



LAPAROSCOPIC CHOLECYSTECTOMY



Aster
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Digital Version

WHAT IS LAPAROSCOPIC CHOLECYSTECTOMY?

Lap Cholecystectomy (Laparoscopic cholecystectomy), also referred to as a lap chole, is key holes surgery to remove the gallbladder. The gallbladder is a pear-shaped organ that lies beneath the liver on the right side of the body. The gallbladder stores bile secreted from liver.

Cholecystectomy is often done for inflammation of the gallbladder (cholecystitis). This condition is usually caused by a build-up of gallstones (cholelithiasis) in the gallbladder. Gallstones can block the flow of bile, which can result in inflammation and pain. In severe cases, emergency surgery may be required.

This procedure is done through small incisions (key holes) in the abdomen (laparoscopic surgery). A thin scope with a camera (laparoscope) is inserted through one key hole. Thin surgical instruments are inserted through the other incisions. In some difficult cases, a laparoscopic procedure may be turned into a type of surgery that is done through a larger incision (open surgery).

BEFORE THE PROCEDURE

Discuss with your doctor about:

- Any allergies you have.
- All medicines you are taking, including vitamins, herbs, eye drops, creams, ayurvedic, homeopathic and over-the-counter medicines.
- Any problems you or family members have had with anaesthetic medicines.
- Any blood disorders you have.
- Any surgeries you have had.
- Any medical conditions you have.
- Whether you are pregnant or may be pregnant.
- Ask all your doubts and queries

STAYING HYDRATED

Follow instructions from your doctor about hydration, which may include:

- Up to 2 hours before the procedure — you may continue to drink clear liquids, such as water, clear fruit juice as directed by the doctor. Do not take anything other than the doctor advice

- Eating and drinking restrictions

Follow instructions from your doctor about eating and drinking, which may include:

- Overnight fasting or stop eating 8 hours prior to surgery or as advised by your physician
- 2 hours before the procedure - stop drinking clear liquids or as advised by your physician

MEDICINES

Ask your doctor about:

- Changing or stopping your regular medicines. This is especially important if you are taking diabetes medicines or blood thinners.
- Taking medicines such as aspirin and ibuprofen. These medicines can thin your blood. Do not take these medicines before your procedure if your doctor instructs you not to.
- You may be given antibiotic medicine to help prevent infection.

GENERAL INSTRUCTIONS

- Let your doctor know if you develop a cold or an infection before surgery.
- Plan to have someone take you home from the hospital or clinic
- Ask your doctor how your surgical site will be marked or identified

DURING THE PROCEDURE

- To reduce your risk of infection:



- Your healthcare team will wash or sanitize their hands.
- Your skin will be washed with soap.
- Hair may be removed from the surgical area.
- An IV tube may be inserted into one of your veins.
- You will be given one or more of the following:
 - A medicine to help you relax (sedative).
 - A medicine to make you fall asleep (general anaesthesia).
- A breathing tube will be placed in your mouth.
- Your surgeon will make 5mm or 10mm holes (incisions) in your abdomen to facilitate surgery
- The laparoscope will be inserted through one of the small incisions. The camera on the laparoscope will send images to a TV screen (monitor) in the operating room. This lets your surgeon see inside your abdomen.
- Air-like gas will be pumped into your abdomen. This will expand your abdomen to give the surgeon more room to perform the surgery.
- Other tools that are needed for the procedure will be inserted through the other incisions. The gallbladder will be removed through one of the incisions.
- After your gallbladder has been removed, the incisions will be closed with stitches (sutures), staples, or skin glue.

- Your incisions will be covered with a bandage (dressing)

AFTER THE PROCEDURE

- Your blood pressure, heart rate, breathing rate, and blood oxygen level will be monitored until the medicines you were given have worn off.
- You will be given medicines as needed to control your pain.
- Usually discharged on next day morning once you are comfortable
- Do not drive for 24 hours if you were given a sedative.

THE RISKS

Generally, this is a safe procedure. However, problems may occur, including:

- A bile leak from the cyst duct that is clipped when your gallbladder is removed.
- As tone remaining in the common bile duct. The common bile duct carries bile from the gallbladder into the small intestine.
- Infection.
- Bleeding.
- Allergic reactions to medicines.
- Damage to other structures or organs.



PLEASE SCAN FOR
THE LOCATION

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