Patient information



Care of a child following Hernia or Hydrocele under General Anaesthetic-advice for Parents/Guardians

Your child will be discharged from hospital when medical and nursing staff are satisfied that they have recovered sufficiently from the anaesthetic.

When you get home, your child may still be sleepy and should be given the chance to rest quietly. It is important that your child does not do anything strenuous on the day of the operation, such as riding a bicycle.

What is a Hernia?

This is where a small portion of gut pokes through a weak point in the wall of the tummy. This may be termed as "an abnormal protrusion of part of the intestine or an organ through a weak point in the muscle in the abdominal wall".

What is a Hydrocele?

This is a collection of fluid around the testicle.

Eating and drinking

Your child may eat a light diet on the day of the operation with nothing too greasy and it is advisable to avoid fizzy drinks following the operation.

Pain

If the operation site becomes uncomfortable then give a dose of children's paracetamol such as Calpol®, and/or ibuprofen appropriate to the age of your child. This may need to be repeated every four to six hours, according to the manufacturer's instructions. A local anaesthetic block may be used to numb the area of the operation – this will be explained by the anaesthetist.

Hygiene

Your child may have a shower after 48 hours. If there is a dressing, this may need to be replaced afterwards and dressings will be provided to you by ward staff. Do not allow your child to soak in a bath as this will make the wound soggy and may cause it to break down.

Exercise/activity/return to school

Your child may return to nursery or school when comfortable but strenuous activity or sport should be avoided to allow the operation site to heal.

Wound healing

Your child may experience some tingling, numbness and soreness around the wound site. This is usually normal but if there is any redness or discharge or if you are concerned please contact the appropriate person, below:

If your child has stitches which need to be removed, this can usually be done
approximately one week after surgery by the Paediatric Community Nurse at home, or by
your GP or Practice Nurse.

If your child has dissolvable stitches then these do not need to be removed as they will
dissolve naturally. Nursing and medical staff will tell you whether stitches need to be
removed or are dissolvable.

Further information

Conquest Hospital - Kipling Ward Tel: (01424) 758039 Eastbourne DGH - Friston SSPAU Tel: (01323) 414946

Paediatric Community Nurses - Conquest: Tel: (01424) 758054

Eastbourne: Tel: 0300 131 4500 Ext: 3849

Own GP or Practice Nurse.

If unable to contact any of the above phone NHS 111.

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 or by email at: esh-tr.patientexperience@nhs.net

Hand hygiene

The Trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4500 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

Your Child's Anaesthetic - Royal College of Anaesthetists and Association of Paediatric Anaesthetists

The following clinicians have been consulted and agreed this patient information: Elizabeth Vaughan, Matron, Friston. Mr Roger Plail, Consultant Urology Surgeon.

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Responsible clinician: Caroline Stephenson, Practice Educator

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