

Frequently Asked Questions:

When can I resume driving?

Your doctor will tell you when you can resume driving, when your wound has healed and you are no longer taking narcotic pain medications. If you drive while taking pain medicine, you can be charged with driving under the influence or DUI. If you are charged with DUI while taking pain medicine, the UofL, UofL Physicians Group, and its providers are not to blame.

You may be a passenger in a car, but we recommend that you keep it to a minimum until you are healed. If you take long drives (more than 1 hour) during the first 4 weeks, stop every hour and walk around for 5 to 10 minutes.

What is a deep vein thrombosis/blood clot?

A deep vein thrombosis (DVT, also called venous thrombosis) is a blood clot that forms in a vein deep in your body. The clot may limit or completely block blood flow through the vein. Most DVTs form in the lower leg, thigh and pelvis. But, they can happen in other parts of the body, such as the arm, brain, intestines, liver and kidneys.

What is the danger of a DVT?

A DVT, itself, is not life-threatening. But, the blood clot can break free and travel through the bloodstream and get stuck in a blood vessel inside your lung. This condition is called a pulmonary embolism and can be life threatening. It is important to find out if you have a DVT as soon as possible and get treatment.

Another problem caused by a DVT is chronic venous insufficiency (also called post-thrombotic syndrome). This means the walls and/or valves of the veins in your legs aren't working well. Blood collects in the veins and causes chronic leg swelling, increased pressure, dark or discolored skin, and open sores on the legs called venous stasis ulcers.

What is the difference between a DVT and a superficial venous thrombosis?

A superficial venous thrombosis (also called phlebitis or superficial thrombophlebitis) is a blood clot that develops in a vein close to the surface of the skin. These types of blood clots do not usually travel to the lungs unless they move from the superficial system into the deep venous system first.

What are the symptoms of a DVT?

A DVT usually forms in one leg or one arm. Not everyone with a DVT will have symptoms, but symptoms can include:

Swelling of the leg or arm (sometimes this happens suddenly)

Pain or tenderness in the leg (may only happen when standing or walking)

The area of the leg or arm that is swollen or hurts may be warmer than usual

Skin that is red or discolored

The veins near the skin's surface may be larger than normal

Symptoms of a pulmonary embolism include:

- Sudden shortness of breath or fast breathing
- Sharp chest pain that often comes with coughing or movement
- Pain in the back
- Cough (sometimes with bloody sputum/phlegm)
- Sweating more than normal
- Fast heartbeat
- Feeling dizzy or fainting

Some people do not know they have a DVT until the clot moves from their leg or arm and travels to their lung.

It is important to call your doctor right away or go to the emergency room if you have symptoms of a pulmonary embolism or DVT. Do not wait to see if the symptoms go away. Get treatment right away to prevent serious complications.

How can I prevent constipation?

Eat a well-balanced diet with plenty of fiber. Good sources of fiber are fruits, vegetables, legumes, and whole-grain breads and cereals. Fiber and water help the colon pass stool. Most of the fiber in fruits is found in the skins, such as in apples. Fruits with seeds you can eat, like strawberries, have the most fiber. Bran is a great source of fiber: eat bran cereal or add bran cereal to other foods, like soup and yogurt.

Drink eight 8-ounce glasses of water a day. (Note: Milk can cause constipation in some people.) Liquids that contain caffeine, such as coffee and soft drinks, have a dehydrating effect and may need to be avoided until your bowel habits return to normal.

Exercise regularly.

Move your bowels when you feel the urge.

How is constipation treated?

Drink two to four extra glasses of water a day.

Try warm liquids, especially in the morning.

Add fruits and vegetables to your diet.

Eat prunes and/or bran cereal.

Add supplemental fiber to your diet (there are several types, such as Metamucil, Citrucel, and Benefiber).

If needed, use a very mild stool softener or laxative (such as Colace [docusate], Miralax, or Milk of Magnesia). Dulcolax suppositories, and enemas may be used following the package directions. Do not use laxatives for more than two weeks without calling your health care provider, as laxative overuse can aggravate your symptoms.