

## Transanal Endoscopic Microsurgery (TEM) or Transanal Minimally Invasive Surgery (TAMIS)

Micro-surgery removes or repairs small body parts with special small tools. Doctors use a microscope to see the area better.

- **TEM** removes tumors throughout the rectum.
- **TAMIS** surgery removes tumors from the upper part of the rectum.

### Before Surgery

You will need to do a bowel prep to get ready for surgery. With your help we will choose a bowel prep that works best for you. We will give you printed instructions to follow.

### After Surgery

#### Rectal Care

1. **Sitz baths:** Take a sitz bath three to four times a day for two days. Then, as needed for comfort and after each bowel movement. A sitz bath is sitting in warm water to decrease pain and spasms. You can use a sitz bath that fits on your toilet or sit in a bathtub. Sit and relax in the water for 10-20 minutes.
2. **Cleaning after bowel movements:** For the first few days, after a bowel movement gently clean with warm water. You may want to use **baby wipes**, free of alcohol and unscented.
3. **Drainage:** You may have yellowish-red drainage from the rectum for at least 7–14 days. Use a **sanitary pads** in your underwear to protect your clothes. The amount of drainage will decrease and become lighter in color with time. Expect bloody drainage after a bowel movement, with activity, and possibly when the stitches dissolve (in about 10 days).

### Activity

- **Do not** lift more than 20 pounds until it is okayed by your doctor.
- Change positions from sitting to standing and lying down as needed for comfort.
- **Do not** drive while taking narcotic pain pills.
- Your doctor will talk with you when it is safe to resume sex.
- Talk with your doctor before going back to work.

### Pain

You will first feel pressure and not pain. You may feel like you need to get to the bathroom quickly. This is normal and will get better with time. Take pain pills if needed.

### Diet

Plan to eat a low fiber diet for the first few weeks with **stool softeners** (docusate sodium). This helps prevent hard stools that may stretch the incision.

After 2–3 weeks, you may increase the fiber in your diet. This can include a bulk fiber laxative like Metamucil®. Your doctor will talk to you about your diet.

Be sure to drink at least 8-10 (8 oz.) glasses of fluid a day. Fluids with caffeine **do not** count.

**When to Call**

- Problems having a bowel movement
- Unable to control bowel movements
- Increased pain and bleeding with bowel movements
- Large amounts of bright red blood that will not stop with pressure applied for 10 minutes
- Fever over 100.4° F
- Foul-smelling drainage
- Excess swelling
- Pain not controlled by pain pills
- Problems passing urine

**Who to Call**

Digestive Health Center:  
**608-242-2800 or 1-855-342-9900**

**After hours, weekends and holidays:** Ask for the doctor on call for Dr. \_\_\_\_\_.  
Leave your name and phone number with area code. We will call you back.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 3/2022 University of Wisconsin Hospitals & Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7002