

Procedure Information Sheet - Laparoscopic Assisted Vaginal Hysterectomy with/without Bilateral Salpingo-oophorectomy

Introduction

The removal of the uterus by inflating the abdominal cavity with carbon dioxide (CO₂) and insertion of instruments through small ports into the abdomen.

Indications

Pelvic mass, heavy menstrual flow, uterine fibroids.

Procedure

1. General anaesthesia.
2. Urinary catheterization.
3. Pneumoperitoneum created by insufflation of carbon dioxide.
4. Incisions made.
5. Telescope and instruments passed into abdomen.
6. Upper part of the uterus freed.
7. Incision made round cervix vaginally.
8. Lower part of the uterus freed.
9. Uterus removed vaginally.
10. Vaginal wound and abdominal wounds closed.
11. All tissue removed will be sent to the department of pathology or disposed of as appropriate unless otherwise specified.
12. Other associated procedures like removal of tubes and ovaries (prophylactic or when affected).

Pre-operative preparation

1. You will need to sign a consent form and your doctor will explain to you the reason, procedure and possible complications.
2. No food or drink for 6 to 8 hours before operation.
3. Blood taking for blood typing and screening.
4. Fleet enema may be performed as instructed by your doctor.
5. Pubic hair is shaved if necessary as instructed by your doctor.

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Possible risks and complications

- Anaesthetic complications.
- May need blood transfusion if excessive bleeding occurs.
- Injury to neighboring organs especially bladder, ureters, bowels and blood vessel may require repair.
- Pelvic infection.
- Wound complications including infection and hernia (lower incidence).
- May need laparotomy.
- Deep vein thrombosis.

Post -operative information

1. You may take analgesics as prescribed by your doctor.
2. Avoid intercourse for 2 months and can take showers.
3. Avoid lifting heavy weights for 2 months after surgery.
4. Contact your doctor if severe abdominal pain, purulent discharge, heavy vaginal bleeding or fever (body temperature above 38°C or 100°F) occurs.
5. Menopause may occur 2-4 years earlier than usual.
6. Climacteric symptoms if ovaries are removed in a premenopausal woman.

Remark

The above-mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or individual differently. Please contact your physician for further enquiry.

Reference: http://www21.ha.org.hk/smartpatient/tc/operationstests_procedures.html

I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. _____. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

Name:

Pt No.: Case No.:

Sex/Age: Unit Bed No.:

Case Reg Date & Time:

Attn Dr:

Patient / Relative Signature: _____

Patient / Relative Name: _____

Relationship (if any): _____

Date: _____