

Procedure Information Sheet -Vaginal Hysterectomy and Pelvic Floor Repair

Introduction

Vaginal hysterectomy is an operation to remove the uterus through the vagina and strengthen the pelvic floor by repair.

Indications

- Uterine prolapsed.
- ➤ Bothersome discomfort affecting patient's daily activity.
- Adverse effect on urinary function.
- ➤ When treatment by pelvic floor exercise fails.

Procedure

- 1. General anaesthesia.
- 2. Vaginal incision.
- 3. Uterus removed vaginally.
- 4. Trimming of vaginal tissue if necessary.
- 5. Pelvic floor supporting tissue/ ligament strengthened.
- 6. Indwelling catheter may be necessary to drain the bladder. Additional drain may be required for the wound site.
- 7. All tissue removed will be sent for histopathology examination or disposed of as appropriate unless otherwise specified.

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 is allowed 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.

Possible risks and complications

- Anaesthetic complications.
- May need blood transfusion if excessive bleeding occurs.
- ➤ Injury to adjacent organs especially the bladder, ureters and bowel, requiring repair.
- > Pelvic infection.

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- Dyspareunia especially if posterior repair is performed.
- Laparotomy may be required if vaginal procedure fails.
- May develop stress incontinence.
- ➤ Possible recurrence of prolapse of the vaginal vault (enterocoele).

Post-operative information

- 1. You may take analgesics as prescribed by your doctor.
- 2. Contact your doctor if severe abdominal pain, purulent discharge, excessive vaginal bleeding, fever (body temperature above 38°C or 100°F) or urinary discomfort occurs.
- 3. Avoid lifting heavy weights after surgery.
- 4. Avoid sexual intercourse for 6 weeks and until you have been examined by your doctor.

Risk if not undergoing the procedure

Progression and deterioration of the disease condition may affect the quality of your life.

Remark

The above-mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or different individual. 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:		Patient / Relative Signature:
Pt No.:	Case No.:	-
Sex/Age:	Unit Bed No:	Patient / Relative Name:
Case Reg Date & Time:		Relationship (if any):
Attn Dr:		Date:

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