

What to expect:

LOOP ELECTROSURGICAL EXCISION PROCEDURE (LEEP)

WHAT HAPPENS?



- 1. A LEEP procedure is often done under sedation anesthesia and local anesthesia.
- 2. On the exam table, your legs will be placed in stirrups and your physician will ensure that you are in a comfortable position.
- 3. A speculum will then be used to spread the vagina and gain access to the cervix.
- 4. Next, an iodine solution will be applied onto the cervix. This helps to identify any abnormal cells and the transformation zone of the cervix.
- 5. After you are sedated a small needle will be used to administer a local anesthetic to the cervix.
- 6. A tenaculum will be used to hold the cervix in place during the procedure.
- 7. The LEEP wire will then be used to remove abnormal tissue.
- 8. The electrical heat created from the wire will seal the blood vessels simultaneously with tissue removal.
- 9. An additional coagulant called Moncel's solution is applied to stop bleeding.
- 10. The tissue will be sent to the pathology lab for further testing, and the instruments will be removed once the physician is confident the procedure has been safely completed.

WHY ITS DONE?

A LEEP is done when cervical abnormalities are found following a pelvic exam, Pap test, or colposcopy. These conditions are often related to cervical dysplasia (abnormal cells). The LEEP is done to remove these abnormal cells



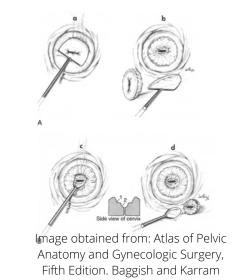
HOW DO I GET READY?

Your healthcare provider will go over a complete list of pre-operative steps. Inform your physician about any allergies to medications or medical problems. Inform your physician if you think you may be pregnant.



WHAT IS IT?

A LEEP procedure is done to remove a small amount of abnormal tissue from the cervix known as the abnormal transformation zone (ATZ), using an electrosurgical device. The removed tissue is then sent to a pathologist for further analysis.



WHAT ARE THE RISKS?

This is generally a very low risk procedure with minimal complications, however possible complications may include bleeding, infections, scarring of the cervical tissue, and slight increased risk for preterm birth.





WHAT HAPPENS AFTER?

Following the procedure, your healthcare provider will review the tissue report and inform you of any next steps. Avoid any strenuous exercise, tampon or douche use, or intercourse for 4 weeks following the procedure. Mild cramping, spotting, and dark discharge are all possible for several days



The LEEP takes about 20-30 minutes, and minimal recovery time is required after the procedure. Most patients are able to return to school or work the next day.





