



# What to expect: LAPAROSCOPIC HYSTERECTOMY

## WHAT HAPPENS?

1. You will be asked to put on a hospital gown and positioned on an operating table
2. A urinary catheter will be inserted
3. An intravenous line will be started in your arm or hand
4. The surgical site on the lower abdomen and vagina will be cleaned with surgical prep
5. Surgical drapes will be placed over the abdomen and chest
6. The anesthesiologist will monitor all your vital signs throughout the duration of the operation
7. Once the anesthetic has taken full effect, the surgeon will make three to four 4-5 mm incisions. One at the naval and two on either side of the lower abdomen.
8. CO2 gas will be inflated into the abdomen, allowing the surgeon space to operate in the abdomen.
9. The abdominal cavity will be inspected and the trocars (guides for surgical tools) will be inserted
10. Following the separation of uterus from its blood supply and other connective tissue, the uterus will be removed from a small incision made in the upper vagina
11. Prior to completion, the abdominal cavity will be inspected once more. The previously made skin and vaginal incisions will be closed

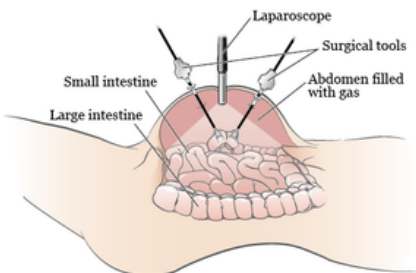


Image obtained from:  
<https://www.mskcc.org/cancer-care/patient-education/laparoscopy>

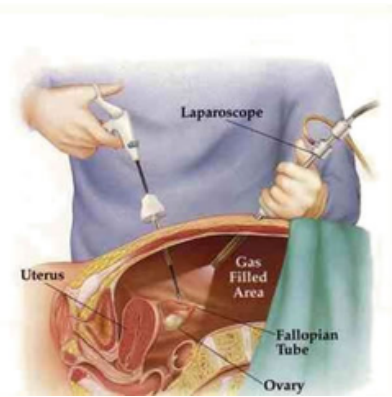
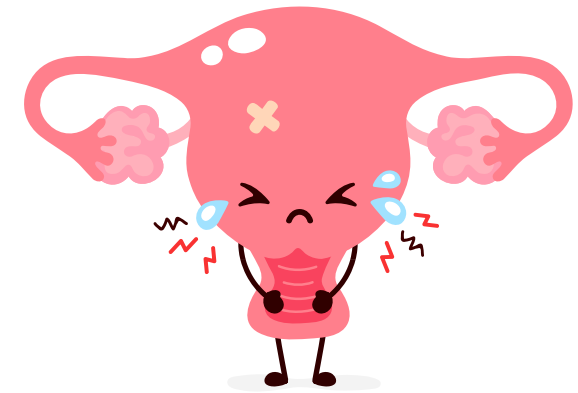


Image obtained from:  
<https://www.hysto.net/procedures/laparoscopic-hysterectomy.htm>

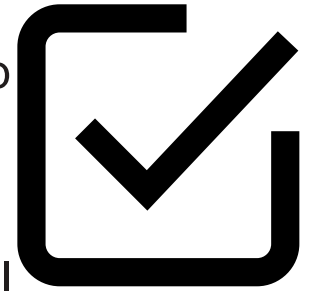
## WHY ITS DONE?

A hysterectomy is performed for a variety of reasons including; unmanageable bleeding, severe menstrual pain, uterine fibroids, uterine prolapse, cervical or uterine cancers.



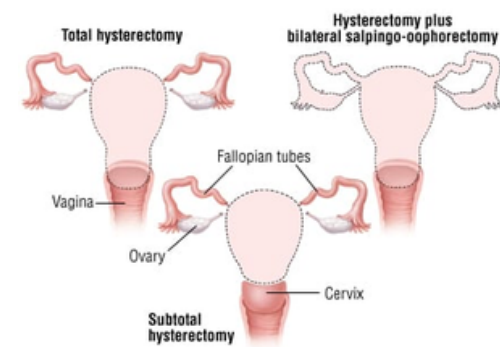
## HOW DO I GET READY?

Gather all medical information so your physician is aware of all medications and conditions prior to the operation. You will attend a pre-op clinic where instructions will be for preparation for the day before and day of surgery. Your physician will recommend time off work for approximately 2-4 weeks after your surgery



## WHAT IS IT?

During a laparoscopic hysterectomy, the entire uterus and fallopian tubes are removed using small incisions and tools assisted by a small camera. Depending on your age, the ovaries may or may not be removed. In younger patients, the ovaries are left in place to avoid future health issues.



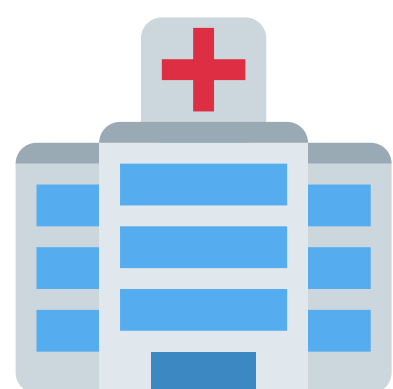
## WHAT ARE THE RISKS?

As with all surgeries, there is a chance of complications such as; blood clots, infection, bleeding, bowel injury/blockage, urinary tract injury, post-operative pain, and anesthesia-related problems.



## WHAT HAPPENS AFTER?

You will likely stay at the hospital overnight to ensure that there are no complications. Following discharge from the hospital, recovery time varies between 4-6 weeks. A follow-up appointment at the office will be arranged usually around 4-6 weeks post-op. If you have any concerns post-op you should contact your physician as soon as possible.



## HOW LONG DOES THE OPERATION TAKE?

The time for the procedure can vary greatly depending on the size of the uterus and the need to remove abnormal tissue. On average, the operations can take between 2-3 hours.

