POST-OPERATIVE HYSTEROSCOPY INSTRUCTIONS

<u>FOLLOW-UP:</u> You do not need a routine postoperative appointment after your hysteroscopic surgery. You will be called within one week of surgery with any pathology results from your surgery.

Call the Gynecology office immediately if you have any fevers greater than 102, increasing abdominal pain, problems urinating, persistent nausea/vomiting, or any other major concerns.

<u>POST-SURGERY CARE INSTRUCTIONS:</u> Over the next 7-14 days, you can expect irregular vaginal bleeding and pelvic cramping. Please avoid using tampons for the first 7 days. If your pelvic cramping becomes severe or if your vaginal bleeding becomes so heavy that you are soaking through a thick pad or tampon every hour for more than two hours, please contact the Gynecology office immediately.

WHAT TO EXPECT AFTER THE PROCEDURE: You may feel some discomfort for a few days. This is normal and should stop soon. Normal symptoms include:

- · Cramps, similar to menstrual cramps, for 1-3 days
- Vaginal bleeding for 1-2 weeks
- Frequent urination for 24 hours
- Nausea

<u>DIET:</u> You may eat any foods that you can tolerate. It is a good idea to eat a high fiber diet, take in plenty of fluids, and take a daily stool softener such as Colace to prevent constipation. If you do become constipated, you may want to take a mild laxative on a daily basis until your bowel habits are regular. Constipation can be very uncomfortable, along with straining, after recent surgery.

ACTIVITY: You are encouraged to walk and engage in regular activity after surgery without any activity restrictions. For the first 1-2 days, you may feel more fatigue which is normal.

MEDICATIONS:

You may take over the counter medications as needed for pain relief, including:

- **Tylenol (Acetaminophen):** Decreases pain. This medicine is available without a doctor's order. You may take 1-2 tablets (500mg) every 4-5 hours as needed for pain relief. Do not exceed more than 4,000mg in 24 hours as it can cause liver damage.
- **NSAIDs** (Ibuprofen, Naprosyn): Decreases pain and swelling. This medicine is available without a doctor's order. This medicine can cause stomach bleeding or kidney problems. If you take a blood thinner, **always** ask your healthcare provider if NSAIDs are safe for you. Always read the medicine label and follow the directions on the label before you use this medication.

POST-OPERATIVE ENDOMETRIAL ABLATION INSTRUCTIONS

FOLLOW-UP: You do not need a routine postoperative appointment after your hysteroscopic surgery. You will be called within one week of surgery with any pathology results from your surgery.

Call the Gynecology office immediately if you have any fevers greater than 102, increasing abdominal pain, problems urinating, persistent nausea/vomiting, or any other major concerns.

<u>POST-SURGERY CARE INSTRUCTIONS:</u> Over the next 7-14 days, you can expect irregular vaginal bleeding and pelvic cramping. Please avoid using tampons for the first 7 days. If your pelvic cramping becomes severe or if your vaginal bleeding becomes so heavy that you are soaking through a thick pad or tampon every hour for more than two hours, please contact the Gynecology office immediately.

<u>WHAT TO EXPECT AFTER THE PROCEDURE</u>: You may feel some discomfort for a few days. This is normal and should stop soon. Normal symptoms include:

- Cramps, similar to menstrual cramps, for 1-3 days
- Bloody discharge for 2 to 3 days that may become light, and then turns to watery and yellow discharge and may last several weeks
- Frequent urination for 24 hours
- Nausea

<u>DIET:</u> You may eat any foods that you can tolerate. It is a good idea to eat a high fiber diet, take in plenty of fluids, and take a daily stool softener such as Colace to prevent constipation. If you do become constipated, you may want to take a mild laxative on a daily basis until your bowel habits are regular. Constipation can be very uncomfortable, along with straining, after recent surgery.

ACTIVITY: You are encouraged to walk and engage in regular activity after surgery without any activity restrictions. For the first 1-2 days, you may feel more fatigue which is normal.

MEDICATIONS:

You may take over the counter medications as needed for pain relief, including:

- **Tylenol (Acetaminophen):** Decreases pain. This medicine is available without a doctor's order. You may take 1-2 tablets (500mg) every 4-5 hours as needed for pain relief. Do not exceed more than 4,000mg in 24 hours as it can cause liver damage.
- **NSAIDs (Ibuprofen, Naprosyn):** Decreases pain and swelling. This medicine is available without a doctor's order. This medicine can cause stomach bleeding or kidney problems. If you take a blood thinner, **always** ask your healthcare provider if NSAIDs are safe for you. Always read the medicine label and follow the directions on the label before you use this medication.

POST-OPERATIVE D&C INSTRUCTIONS

FOLLOW-UP: Call for an appointment in 2-4 weeks following your procedure, to discuss any pathology results and next steps in your care.

Call the Gynecology office immediately if you have any fevers greater than 102, increasing abdominal pain, problems urinating, persistent nausea/vomiting, or any other major concerns.

<u>POST-SURGERY CARE INSTRUCTIONS:</u> Over the next 7-14 days, you can expect irregular vaginal bleeding and pelvic cramping. Please avoid using tampons for the first 7 days. If your pelvic cramping becomes severe or if your vaginal bleeding becomes so heavy that you are soaking through a thick pad or tampon every hour for more than two hours, please contact the Gynecology office immediately.

WHAT TO EXPECT AFTER THE PROCEDURE: You may feel some discomfort for a few days. This is normal and should stop soon. Normal symptoms include:

- · Cramps, similar to menstrual cramps, for 1-3 days
- Vaginal bleeding for 1-2 weeks
- Frequent urination for 24 hours
- Nausea

<u>DIET:</u> You may eat any foods that you can tolerate. It is a good idea to eat a high fiber diet, take in plenty of fluids, and take a daily stool softener such as Colace to prevent constipation. If you do become constipated, you may want to take a mild laxative on a daily basis until your bowel habits are regular. Constipation can be very uncomfortable, along with straining, after recent surgery.

ACTIVITY: You are encouraged to walk and engage in regular activity after surgery without any activity restrictions. For the first 1-2 days, you may feel more fatigue which is normal.

MEDICATIONS:

You may take over the counter medications as needed for pain relief, including:

- **Tylenol (Acetaminophen):** Decreases pain. This medicine is available without a doctor's order. You may take 1-2 tablets (500mg) every 4-5 hours as needed for pain relief. Do not exceed more than 4,000mg in 24 hours as it can cause liver damage.
- **NSAIDs (Ibuprofen, Naprosyn):** Decreases pain and swelling. This medicine is available without a doctor's order. This medicine can cause stomach bleeding or kidney problems. If you take a blood thinner, **always** ask your healthcare provider if NSAIDs are safe for you. Always read the medicine label and follow the directions on the label before you use this medication.

POST-OPERATIVE VULVAR PROCEDURE INSTRUCTIONS

FOLLOW-UP: Call for an appointment in 2-4 weeks following your procedure, to discuss any pathology results and to examine your incision.

Call the Gynecology office immediately if you have any fevers greater than 102, increasing pelvic pain, problems urinating, increasing redness or drainage from your incision, or any other major concerns.

<u>POST-SURGERY CARE INSTRUCTIONS:</u> You do not need a bandage over your incision. You may take daily warm sitz baths as needed for vulvar discomfort. Do not swim in a pool or hot tub for at least 2 weeks.

WHAT TO EXPECT AFTER THE PROCEDURE: You may feel some discomfort for a few days. This is normal and should stop soon. Normal symptoms include:

- Light vaginal bleeding
- Vulvar discomfort
- Burning with urination and frequency of urination for the first 24-48 hours
- Nausea

<u>DIET:</u> You may eat any foods that you can tolerate. It is a good idea to eat a high fiber diet, take in plenty of fluids, and take a daily stool softener such as Colace to prevent constipation. If you do become constipated, you may want to take a mild laxative on a daily basis until your bowel habits are regular. Constipation can be very uncomfortable, along with straining, after recent surgery.

ACTIVITY: You are encouraged to walk and engage in regular activity after surgery without any activity restrictions. For the first 1-2 days, you may feel more fatigue which is normal.

MEDICATIONS:

You may take over the counter medications as needed for pain relief, including:

- **Tylenol (Acetaminophen):** Decreases pain. This medicine is available without a doctor's order. You may take 1-2 tablets (500mg) every 4-5 hours as needed for pain relief. Do not exceed more than 4,000mg in 24 hours as it can cause liver damage.
- **NSAIDs (Ibuprofen, Naprosyn):** Decreases pain and swelling. This medicine is available without a doctor's order. This medicine can cause stomach bleeding or kidney problems. If you take a blood thinner, **always** ask your healthcare provider if NSAIDs are safe for you. Always read the medicine label and follow the directions on the label before you use this medication.

POST-OPERATIVE LEEP INSTRUCTIONS

<u>WHAT YOU NEED TO KNOW:</u> A loop electrosurgical excision procedure (LEEP) is used to remove abnormal tissue from your cervix or vagina. Your cervix is the opening to your uterus. Your healthcare provider will use a small wire loop that is heated with electrical current to remove the abnormal tissue.

<u>FOLLOW-UP:</u> You do not need a routine postoperative appointment after your LEEP procedure. *** will call you within one week of surgery with any pathology results from your surgery.

Call the Gynecology office immediately if you have any fevers greater than 102, heavy vaginal bleeding soaking a pad, foul-smelling vaginal discharge, increasing abdominal pain, problems urinating, persistent nausea/vomiting, or any other major concerns.

<u>POST-SURGERY CARE INSTRUCTIONS:</u> You do not need a bandage over your incision. You may take daily warm sitz baths as needed for vulvar discomfort. Do not swim in a pool or hot tub for at least 2 weeks.

WHAT TO EXPECT AFTER THE PROCEDURE: It is normal to have mild cramping, spotting or discharge after your procedure. You may also have a thin, watery discharge for up to 4 weeks after your procedure. Do **NOT** use tampons, douche or have sex for 14 days after your procedure.

<u>DIET:</u> You may eat any foods that you can tolerate. It is a good idea to eat a high fiber diet, take in plenty of fluids, and take a daily stool softener such as Colace to prevent constipation. If you do become constipated, you may want to take a mild laxative on a daily basis until your bowel habits are regular. Constipation can be very uncomfortable, along with straining, after recent surgery.

ACTIVITY: Rest when you feel it is needed and increase activity each day. You are encouraged to walk and engage in regular activity without any major activity restrictions. For the first 1-2 days, you may feel more fatigue which is normal.

MEDICATIONS:

You may take over the counter medications as needed for pain relief, including:

- **Tylenol (Acetaminophen):** Decreases pain. This medicine is available without a doctor's order. You may take 1-2 tablets (500mg) every 4-5 hours as needed for pain relief. Do not exceed more than 4,000mg in 24 hours as it can cause liver damage.
- **NSAIDs (Ibuprofen, Naprosyn):** Decreases pain and swelling. This medicine is available without a doctor's order. This medicine can cause stomach bleeding or kidney problems. If you take a blood thinner, **always** ask your healthcare provider if NSAIDs are safe for you. Always read the medicine label and follow the directions on the label before you use this medication.