# **Procedure Name: Hysteroscopy**

# **Brief Description of Procedure:**

A procedure to see inside the uterus (the womb) using a telescope-like instrument that is inserted into the vagina up through the cervix into the uterus. Hysteroscopy is used as both a diagnostic and a treatment tool.

# Describe anesthesia type that is typically given:

General anesthesia is used for this surgery, but other options are available. See Anesthesia Section.

# What patients that smoke can expect when having surgery:

After surgery, your anesthesia specialist will check your breathing and lung sounds to determine if a breathing treatment is needed. Smoking increases airway irritation, which leads to wheezing and coughing. Further breathing treatments and medications are sometimes needed.

# **Average length of surgery time:**

30-45 minutes

# Average length in immediate recovery time:

20-30 minutes

#### Average length for time of discharge:

Expect to be here an average of one hour after surgery. During this time you may experience some dis-comfort. Medication can be given to make pain bearable.

#### When can you go back to work:

Depending on your occupation you and your doctor will discuss when you may return to work. At your post-operative visit with your surgeon he will discuss any further need to be off work based on your occupation.

# What will my weight-bearing limit be after surgery:

There is no limit in what you can lift after this procedure.

# What kind of post discomfort can you expect:

It is normal to experience light bleeding for one to two days after surgical hysteroscopy and sometimes longer depending if other procedures were done. Mild cramping or pain is common after operative hysteroscopy, but usually diminishes within eight hours. Your surgeon may write a prescription for pain medicine to help control the pain, but generally ibuprofen-example Advil, Motrin, or NSAIDS is enough.

# **Surgical Safety Checklist:**

For optimal quality care and surgical safety, the following questions will be asked.

# **CONFIRM** between patient, surgeon, and surgery team:

Identity of the patient
Surgical Site
Procedure
Sign Consent
Surgeon to mark the surgical site, if applicable
Allergies

