

Preoperative and Recovery Instructions for Hysteroscopy, Ablation or D&C

At EmpowHer, we want you to be prepared for your visit, upcoming surgery, and post-operative care. This document should be reviewed when you are considering, scheduled for, or recovering from surgery. You can even bring this information with you to your visits or the hospital for reference. This document would be helpful for your primary caretaker to read over with you.

Choosing the date for your surgery

Recovery from a minor surgery is about 1-2 days. Most people will take off work for 1-2 days; however, we are happy to entertain longer time off requests, especially for complicated hysteroscopies or D&Cs for miscarriages. You will be able to drive as soon as you are off of all pain medications, which is usually 24-48 hours. You should refrain from strenuous exercise for 2 days. Finally, you may not have intercourse or submerge in water for 7 days (14 days after a D&C for miscarriage) so think carefully about scheduling prior to a vacation. It's important to look at your calendar when scheduling your surgery. It's very challenging to reschedule once a date has been set. We build our office schedules and surgery schedules around our commitment to your surgery date.

Contacts

Please make sure you have registered for the patient portal, as this is the most efficient way to communicate important information like out of pocket costs, times and lab results. You can go to our website to register for the portal. Also, if you are having difficulty please call our office so we can assist you.

Insurance

As a courtesy, we will contact your insurance for your authorization for your surgery. We can also provide your expected out of pocket costs; however, as you know, this does change and vary between insurance carriers and time of request for this information. If you have any questions about your exact out-of-pocket costs, you should be able to call your insurance company. We will do our best to help you with this!

Pre-Operative Visit

At this visit, we will review your labs, imaging, and medical exam and provide you with all surgical and non-surgical alternatives. Once you decide on a surgical treatment option, we will go over the planned procedure and have you review the surgical consent. This is not a

contract. You can always change your mind. We will review the planned procedure, possible complications and ensure you understand your proposed procedure. This consent acknowledges your understanding of those things.

Allergies and Medications

Please make sure your medications and allergies are correct on the portal. If they are incorrect, please review them at your visit. Please let us know if you are taking aspirin, motrin, ibuprofen, fish oil or other supplements. If you don't need it, please stop taking it 10 days prior to your planned surgery and use Tylenol (acetaminophen) instead for pain. If you are taking any blood thinners, discuss this specifically with us - and we will come up with an individual plan for those medications surrounding surgery. If you have had a stomach ulcer, please let us know as we may adjust your postoperative prescriptions

Preoperative Testing

We will need to get some basic lab work prior to your procedure. The hospital will call you approximately 1 week prior to your planned surgery detailing when to get these done (which may be the morning of surgery in some cases). If you have any cardiac or lung problems, you may need a recent Chest X-Ray or EKG. If you have any recent cardiac testing, please bring them with you to your appointment so we can better plan for an preoperative testing or clearance needed.

Blood Transfusions

Approximately 1% of women having minor surgery will need a blood transfusion. This can be done using self-donated or donor-donated blood. However, if you would like to do this or want more information on this, you may call the blood bank at Hendrick Hospital who will guide you through this process. The risk of contracting a serious infection like HIV is about 1/300,000 - rare. And, we will not transfuse blood without your consent. Should you have any concerns regarding a blood transfusion in the event one is needed, please discuss them with us at your visit.

Power of Attorney

If you are married, your spouse will be your medical power of attorney. If you are not happy with that, or if you are not married, please bring a copy of your durable medical power of attorney, or ask for one to sign when you check in for surgery. This will be the person that will be able to make medical decisions for you in the event you are not able.

Preparing for Surgery

These are a day surgery procedure done either in the office or in the hospital as determined by your preference and/or medical risks. You will typically go home the same day - a few hours

after you have left the operating/treatment room. You should wear comfortable clothes that are not tight. Sweat pants/suits are a great option. Please do not bring valuables or jewelry. Instead of contacts, wear glasses. You can shave any area prior to your surgery for grooming purposes, but please do not shave your surgical incision sites. Nail tips (acrylic) or even non-traditional nail paint can make it difficult to assess your oxygen status in the operating room. I would plan on removing these and having bare nails if time allows. False eyelashes should be removed and avoid mascara on the day of your surgery. Finally, you should remove all piercings, especially in your mouth, prior to arriving at the hospital or office as we use electrical energy in the operating room which could cause metal to spark. You may replace ones that are not in your mouth or nose with silicone studs instead. We may be able to tailor these recommendations if these are strategic challenges. Just let us know!

For Hospital Check-In and Hospital Surgical Expenses

Bring your ID and insurance card to check in. You may also be asked to pay your portion of the cost for the surgery and hospital stay. The hospital should provide that estimate for you by phone the week prior to your surgery. However, if you would like to get an estimate before then, please call Hendrick Hospital Billing Department with your planned surgical procedure and insurance card/information for assistance.

www.hendrickhealth.org/patients-visitors/billing/billing-faq-hendrick-health

Surgery verification specialist (325) 670-2943.

Discharge Instructions

Here's a basic guide, but remember your individual recovery could vary and may be individualized by your physician.

Activity/Post Operative Expectations

You may have soreness like a period cramp for a few days. Usually Ibuprofen (Motrin/Advil) 600-800 mg tablets (or 3-4 of the over the counter tablets) works well for this pain and can be safely used for several days. If you need it longer than 3 days, please add Pepcid twice a day to your medications to prevent an ulcer. You may alternate this with extra strength Tylenol. A heating pad also works very well for uterine cramping/pain.

You may have spotting that lasts a few weeks.

You may experience some increase in vaginal discharge, especially after an ablation, that may require a pantiliner for up to one month.

We may drain your bladder during surgery, so you may experience some burning during your first few voids.

You should rest for the first day when you get home from surgery.

Do not lift anything heavy or do any vigorous exercise or activities (i.e - crossfit, running, riding an ATV) for 3-5 days (2 weeks for a miscarriage D&C).

Finally, do not put anything in your vagina (sex, etc) or soak in any bodies of water (baths, swimming pools, etc) for 1 week after surgery (2 weeks after a miscarriage D&C).

Follow-up

We need to follow up between 2-4 weeks after surgery, usually by telehealth, to review your surgical findings. I will release your pathology as I receive it, usually within 7 days. Please contact us if you have not heard from me.

When to call EmpowHer

Redness or increasing drainage/swelling at your incision sites

Fever >100.4

Pain that is not relieved by your pain medications

Any heavy bleeding

Dizziness or fainting

Worsening abdominal bloating or swelling associated with pain

Extreme nausea or vomiting

Inability to empty your bladder

Symptoms of a urinary tract infection

If you are unable to reach us in a timely manner, or if you are having any serious side effects like difficulty breathing, chest pain, shortness of breath or life threatening bleeding, please proceed to the emergency room and they will contact us when you arrive.

We are honored that you are trusting us with your care, and we wish for you to have a pleasant, uncomplicated surgical experience. If we can do anything to make this process less confusing or more comfortable, please don't hesitate to ask!

