

Laparoscopy

What are the reasons for doing this?

A Laparoscopy enables the surgeon to look at the pelvic organs including the outside of your womb, fallopian tubes and ovaries.

The procedure

A Laparoscopy is carried out under a general anaesthetic. A small cut is made near your tummy button and just above your pubic hair line and also to the side of your abdomen. The laparoscope (camera) is passed through the cut to help us see your pelvic organs. A gas called carbon dioxide is put in the abdomen to help us get a better view. This gas is removed at the end of the procedure, but can cause some pain into your shoulders which generally settles over the next 48 hours. Paracetamol will help with any mild discomfort.

Are there any alternatives?

You and your doctor will probably have discussed any other suitable treatments before now. However please ask if you want any further advice about any alternatives that might be suitable for you, including the option of no treatment.

What are the risks?

This is a relatively safe procedure but every operation carries risks and your surgeon will discuss these when you sign your consent form. The risks include a small chance of injury to pelvic organs, bleeding and infection.

What anaesthetic will be used?

You will meet the anaesthetist before your operation and will have a chance to ask any questions you might have about your anaesthetic.

Blood clot prevention

Without preventative measures, there is a risk of blood clot in the leg (deep vein thrombosis or DVT) in all surgical patients of around 15% - 25%. Please discuss the risks of this particular operation with your surgeon. You will be given additional information about the measures we take to reduce this risk.

Consent

You will be asked to give your consent to this treatment following further discussion with medical or nursing staff. It is important that you understand what is involved and you will have an opportunity then to ask any questions that you might have.

Plan ahead for discharge home

If you think you may have any difficulties, please discuss these at your pre-operative assessment appointment. Please ensure that you have asked your nurse or doctor when your expected discharge date will be.

You will be given instruction about your wound and how to look after it after your surgery. This will include keeping it dry from 24 hours to 5 days. You will be given dressings as needed. Most stitches are now dissolvable and will disintegrate over time. You may have special glue on your wound which will flake off gradually.

We advise you to use sanitary towels rather than tampons whilst you have any bleeding or discharge following your operation.

Contact your GP if

- You have severe pain
- You develop a fever
- Your wound appears red and lumpy or starts to leak fluid
- You develop leg pain and swelling, difficulty walking, or if your leg becomes warmer than usual, or reddish / purplish in colour.
- You develop unexplained shortness of breath, chest pain and / or coughing up blood

Further Information

If you require further information or advice please contact the ward you have been on

Ward phone number

Other sources of useful information can be found at:

NHS Direct 0845 4647

NHS Choices <http://www.nhs.uk/Pages/HomePage.aspx>

Harrogate and District NHS Foundation Trust website www.hdft.nhs.uk

Patient Experience helpline 01423 555499 (Monday – Friday 9.30am – 4pm). E-mail: thepatientexperienceteam@hdft.nhs.uk

If you require this information in an alternative language or format (such as Braille, audiotape or large print), please ask the staff who are looking after you.