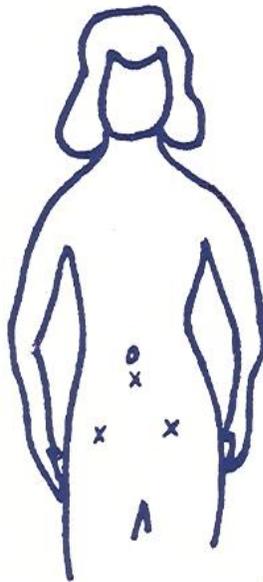

Laparoscopic Assisted Vaginal Hysterectomy Surgery (LAVH)

What is a laparoscopic assisted vaginal hysterectomy?

A laparoscopic assisted vaginal hysterectomy is also called LAVH. Laparoscopic means the operation is done through small incisions in the abdomen. Each incision is 5 to 10 mm long. The picture shows where the incisions are usually made.



X = 3 small incisions

A small telescope with a light at the end is put into one incision so the surgeon can see the pelvic area. Instruments are put into the other incisions to cut the ligaments which release the uterus from the abdomen. The uterus is then removed through the vagina. Removal of the uterus is called a hysterectomy. The ovaries and fallopian tubes may be removed at the same time. You and your surgeon will talk about what you are having removed before you sign a consent form.

In order to see well during surgery, the surgeon inflates the abdomen with a gas called carbon dioxide. At the end of surgery most of this gas is removed.

The surgery lasts about 2 hours.

What do I need to do before surgery?

You will come to the Pre-Admission Assessment Unit 1 to 2 weeks before surgery to have any blood work, x-rays and any tests your doctor orders. Bring a record of all of your medications to this visit. Include any herbal or natural products you take. An accurate record will help the health care team know how to take care of you before and after surgery.

You will talk to the anesthesiologist and find out what type of anesthetic you are having. You are given a checklist that will help you prepare for surgery at home before you come to the hospital.

What happens the day of surgery?

You will come to the hospital and check into the Day Surgery Unit 2 hours before surgery. The nurses will help you get ready for surgery and answer your questions.

Your nurse will put a small tube in a vein in your arm. This is called an intravenous (IV). The IV gives you fluid and medication before, during and after surgery.



An anesthesiologist and doctor may visit you in the Day Surgery Unit. Your skin will be marked with a special pen to show the place where the surgery will be.

What happens in the Operating Room?

The room will feel cool when you go in. Members of the team will greet you and gather around. They will begin to attach you to the monitors needed during surgery and help you relax. The surgical team will make sure everything is ready and then start your anesthetic and surgery.

How will I feel after surgery?

After surgery, you first go to the Post Anesthetic Recovery Unit or PACU. You are watched closely by members of the health care team. There are no visitors allowed in the PACU.

You will then go to a Nursing Unit. On this unit, the nurses will monitor your blood pressure, breathing, heart rate, intravenous, incisions, pain and general recovery from surgery. The nurses will also check for bleeding from your vagina. If you feel pain or have an upset stomach, let your nurse know. There is medication to help.



Pain

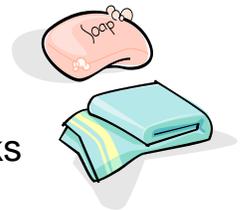
You may have pelvic fullness, bloating, pain and discomfort. Your nurse can give you pain control medication to help. You may also have pain in your shoulder caused by the gas used to fill your abdomen during surgery. Moving and walking around helps this type pain go away.

Other ways to relieve your pain are:

- drinking warm fluids
- any method or relaxation, such as listening to music, imagery, meditation or deep breathing

Bathing, showering and hygiene

You can shower the day after surgery. Shower for 1 to 2 weeks after surgery. ✘Do not douche until your doctor allows you to. You can have a tub bath after your incisions have healed.



Vaginal bleeding

Light vaginal bleeding is normal. This may be red or pink. Wear pads to protect your clothing.

Incision care

Keep the incisions clean and dry. Pat the incisions dry after having a shower or washing. Look at the incisions each day while you are healing to make sure they are dry and closed. If you have strips of tape called steri-strips on the incisions, remove them in 5 to 7 days after surgery.

Catheter

After surgery, you may have a thin, plastic tube in your bladder called a catheter. This drains urine into a drain bag. If you have a catheter, this will be removed on the nursing unit. Your urine is checked before you go home.

Continue to check your urine at home to make sure it is clear. If you have burning or frequent voiding, contact your doctor or health care provider.



What activity can I do?

After surgery, you need to move around to prevent breathing and circulation problems and help your bowels move. Moving also helps you build up your strength and recover faster. Do deep breathing, coughing and circulation exercises each hour you are awake.

Your nurses will teach you how to look after yourself and help you do your care. You can wear your own clothes around the unit when the tubes come out.

At home gradually go back to your normal activities. ✘ Do not do any heavy lifting or strenuous exercises until you check with your doctor or health care provider.



Diet

Drink plenty of fluids after surgery. You do not need to follow a special diet. Eat as you did before. Eating fruits and vegetables and whole grains can help prevent constipation. Choosing foods that are low in fat is also part of healthy eating. If you have questions about your diet, talk to your family doctor or health care provider.



Return to work

The usual time off work is 2 to 4 weeks. This time can vary depending on the type of work you do. Talk to your family doctor or health care provider about when you can return to work.

Sexual activity

Avoid intercourse for 4 to 6 weeks after surgery. Ask your doctor or health care provider when you can resume normal sexual activity.



Follow-up

Make sure you have a follow-up appointment with your doctor or health care provider after surgery.

Call your doctor or health care provider if you have:

- a fever
- drainage from any incision
- burning and/or frequent voiding
- bright red or heavy vaginal bleeding
- nausea and/or vomiting that does not get better

