



HYSTEROSCOPY INSTRUCTIONS

Stop aspirin, ibuprofen (Advil, Motrin) and naproxen (Aleve) 1 week before surgery, as these medications increase the risk of bleeding

- If you take any vitamins or herbs, stop them one week before surgery
- Inform your doctor if you take Xaralto, Coumadin, Plavix, or Glucophage
- You may take any blood pressure medications with a small sip of water the morning of the surgery. Do not take any other medication on the morning of the procedure. You may take them after you get home from the hospital.
- Do not eat or drink anything after midnight the night prior to the procedures. If your surgery is scheduled for the afternoon, you may drink clear liquids (plain coffee, tea, apple/cranberry juice, water, lemonade, soda) up to 6 hours prior to the scheduled time of the procedure.

Postoperative instructions:

- It is normal to have mild to moderate cramping. Take ibuprofen (Advil or Motrin), 600mg every 6 hours (3 pills every 6 hours), or Aleve, 2 pills every 12 hours. If you are still in pain, you may take Vicodin in addition to the ibuprofen or Aleve. If you are in severe pain despite taking these medications, please call the office. You are usually given a written prescription for Vicodin or another mild narcotic prior to surgery. Approximately 50% of patients will take 1-2 doses, and the other 50% are fine with ibuprofen alone. Do not drive if you are taking a narcotic.
- Eat a bland diet the day of the procedure (nothing fatty, spicy, or fried). The following day, resume your normal diet.
- Pelvic rest for 2 weeks (no tampons, intercourse, douching)
- You may return to work the day after the procedure
- Schedule a 2 week postoperative appointment in the office (240) 912-4546
- You may resume exercise 2-3 days after the procedure, but listen to your body. If you are in pain, or note an increased in bleeding, please decrease your activity level.
- Avoid taking baths or swimming for 1 week after surgery.
- Light bleeding or spotting is normal for up to 2 weeks after surgery. Heavy bleeding where you are changing a pad an hour is not normal, and you need to call the office.
- Please call the office if you have fever (temp > 100.4), persistent vomiting, or any significant concerns.

All surgery has risks. The risks include but are not limited to bleeding which may require a blood transfusion, infections, injury to surrounding structures, problems w/ anesthesia, blood clot in the leg, or nerve injury. With hysteroscopy, there is a risk that an instrument may go through the top of the uterus (uterine perforation). If this occurs, a laparoscopy may need to be performed (small incision in

the belly button; look inside the abdomen with a small camera). If anything is injured (bowel, blood vessels, bladder), then I will repair it or call in a specialist to repair it). The risk of ANY of these complications occurring is approximately 1%. Please let us know if you have any other questions.