



# Laparoscopy

## Why do I need a laparoscopy?

Laparoscopy is a useful procedure used to provide a diagnosis when the cause is not known, for example to diagnose a cause for pain. It is also used for suspected ectopic pregnancy (pregnancy outside the womb), small ovarian masses (cysts), infertility problems, endometriosis, period problems and sterilisation. It can be used to take a small piece of tissue for examination, to drain small cysts and also to treat adhesions (where tissue gets stuck together causing pain). For further information search the NHS Choices Laparoscopy.

The procedure takes about 20-30 minutes and is usually done under general anaesthetic.

A small telescope is inserted through the abdominal wall, through which the pelvic organs can be viewed. The abdomen is filled with carbon dioxide (Co<sub>2</sub>) which will swell the abdomen and allow a better view of the organs.

A small cut about one centimetre long is placed near the tummy button. There may also be one or two similar cuts on the lower part of the abdomen. Each of the cuts will have 1 or 2 small stitches. These may require removal after approximately three days or will dissolve over three to four weeks. The nurse looking after you will tell you what type of stitches you have.



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As with all surgery there can be complications. The overall risk of serious complications from diagnostic laparoscopy is approximately 2 women in every 1000 but uncommon risks are - damage to bowel, bladder, uterus or major blood vessels which may require immediate repair.. There are other more frequent risks such as bruising, infection and shoulder tip pain which can feel like trapped wind and is caused by the gas.

## **What will happen before my admission?**

You will be offered an appointment to attend the pre-assessment clinic where you will be told what about procedure. This will also be an opportunity for you to discuss anything you feel maybe relevant, such as meeting the care needs of dependent relatives whilst you are recovering. Blood tests, heart tracing and x-rays may be required and should be arranged in time for your procedure.

Smokers are more likely to develop chest infections or thrombosis and have problems with the anaesthetic, so do try to give up or at least cut down. The hospital is a smoke free zone.

NHS Smoking Helpline 0800 1690169  
[www.gosmokefree.co.uk](http://www.gosmokefree.co.uk)



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## **What will happen before my procedure?**

You will normally be admitted on the day of your surgery to the Day Surgery Unit. If it is necessary to admit you overnight you will be admitted to a ward after surgery. For a few hours before your procedure it is important not to have anything to eat or drink. You will have received advice about when to stop eating and drinking at your pre-assessment appointment. If you are having a period this will not normally stop us from performing your procedure.

Before we can do your procedure, you need to sign a consent form. The surgeon will explain your procedure and give you the opportunity to ask any further questions. If you have any questions after reading this information leaflet then please do not hesitate to contact the ward before your admission.

Before going to theatre you will be seen by the Anaesthetist who will be happy to discuss any complications of the anaesthetic with you before the procedure and if you feel particularly anxious they will be happy to prescribe a tablet to help relax you.

You will be asked to have a bath or shower on the morning of your procedure. Do not use talcum powder or body sprays. Remove all makeup, false nails, nail varnish and jewellery, including belly button piercings. Weddings rings can be worn; we can cover them with tape. Please



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do not have a shave at home as this is often not necessary.

## **What will happen after my procedure?**

After your procedure you will be taken to the recovery room until you are awake enough to come back to the ward. The nurses will be checking your blood pressure and pulse; they will be looking for bleeding from any wounds and your vagina.

You may have a drip in your arm; this will give you all the fluid you need until you are drinking normally again and after some time you will be allowed something to eat – avoid fatty foods/fizzy drinks as this increases the chance of nausea and vomiting and may make wind pain caused by the gas worse.

## **Will I experience any post procedure pain?**

You will experience some mild discomfort, often described as a period type pain. This is usually as a result of the remaining gas in the abdomen. It will disperse over a 24 - 48 hour period. Sometimes shoulder tip pain can be experienced again as a result of the gas left behind from the surgery.

## **What happens when I get home?**

You will normally be allowed home either on the evening of your surgery or the next day. A friend or relative will



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need to collect you from the ward and stay with you overnight.

It is advised that you rest for a couple of days and refrain from work or exercise for 1 – 2 weeks. Everyone recovers at a different pace so be guided by your own body.

You may experience some vaginal discharge for up to 1-2 weeks. If you start to bleed heavily or find that the discharge is very smelly please contact your doctor. Intercourse should be avoided until it feels comfortable. Any mild bloating should soon subside.

If you take the contraceptive pill and have been sterilised please complete the packet to ensure a reduced risk of pregnancy.

The plasters / dressings on your wounds can be removed after 24 hours. It is quite normal to have a slight ooze of blood at the wound sites this can be easily washed away.

The incisions (cuts) in your abdomen are usually closed with sutures that dissolve in 1 – 3 weeks.

It is not unusual for the wound to become inflamed and discharge some watery yellow fluid. This is a reaction to the suture and will resolve. Look for any swelling, discharge or increased pain and contact your own doctor.



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Bath or shower as usual but avoid talcum powder or body sprays until the wounds are completely healed.

## **When will I be seen again?**

Before discharge we will inform you of any planned follow up treatment or appointment. The appointment date and time will be posted to you. If we do not plan to see you in clinic a check-up with your own doctor before returning to work and to receive any results is advisable.

## **What if I have more questions?**

Try to get your advice from the doctors and nurses. It is important to remember that everyone recovers at a different pace. If you have any other questions please ask either a hospital doctor or nurse.

We hope your stay with us will be comfortable. If there is anything that you are not happy with please approach the nurse looking after you who will try to remedy the situation.

If you have any concerns or worries within the first two weeks after discharge then please phone the ward (Beech Ward 01793 605252) for advice and ask to speak to the nurse in charge.



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**Please use this page to make a note of any questions that you might want to ask.**

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