

COLPOSCOPY

What is a colposcopy?

A colposcopy is an examination of the cervix (entrance to the uterus) and upper vagina with a magnifying device called a colposcope. Except in pregnancy, the provider will often do a biopsy, which is a sample of tissue for additional testing. The provider will be able to tell you if you need a biopsy once he/she has examined your cervix under the colposcope.

Why is a colposcopy needed?

A colposcopy is done if your Pap smear shows an increased risk of pre-cancer of the cervix. In some cases, these abnormalities do not require any treatment. The colposcopy results will help determine if you need treatment, and when you need to have your next Pap smear.

What happens during the procedure?

Your provider will place a speculum in your vagina, which is the same instrument that is used during a Pap smear. The colposcope, which is similar to a microscope, remains outside of the vagina and is adjusted to allow your provider to clearly see your cervix. A vinegar solution will be applied to your cervix with a cotton swab. This makes it easier to see abnormal areas. Most patients feel no discomfort as the solution is put on the cervix. If your provider decides to do a biopsy, he or she will use a tool to take a small sample of tissue. You may feel cramping when the biopsy is performed. The procedure usually takes 10-15 minutes.

What are the risks?

- Vaginal bleeding
- Mild to moderate cramping
- A low risk of infection

What should I do to prepare for the procedure?

- A colposcopy can be done during your menstrual cycle, but it is better to have it done when you are not on your period.
- If you are not allergic, you may take 800 milligrams of ibuprofen (4 regular-strength tablets of Advil or Motrin) or 1000 milligrams of acetaminophen (2 extra-strength tablets of Tylenol) 1 hour before the procedure.
- For 24 hours before the procedure, you should not put anything in your vagina. This includes:
 - Douching (which is generally not recommended at any time)
 - Using tampons
 - Using vaginal medications and creams
 - Having sex

What should I expect during recovery?

You will be able to drive yourself home after this procedure. You may bring someone to drive you if you would like.

If you do not have a biopsy done, you may:

- Resume normal activity immediately after the procedure.
- Have spotting for several days after the procedure and can wear pads or tampons.

If a biopsy is done:

- A medication to prevent bleeding may be used.
 - The medication will come out as a dark green discharge so you will need to wear a pad or panty-liner for several days.
- You may use tampons and have sex any time after the procedure unless told otherwise.
- You may feel sore for a few days. You can take over-the-counter (OTC) pain relievers if you are experiencing pain.

Call your provider if you experience:

- Heavy vaginal bleeding (soaking more than one pad per hour)
- Lower abdominal pain other than mild cramping
- Fever greater than 100.4 degrees Fahrenheit
- Chills

Office number: (404) 778-3401, Monday - Friday 8:00AM - 5:00PM

• For emergencies after hours, calling this number will connect you to the operator, who will page the OBGYN physician on call.

If your pain becomes severe, or your fever rises above 102°F in the 3 days following the procedure you should go to the emergency room.

How long will it take to get my results?

It should take 1-2 weeks to get your results. You may receive your results one of three ways:

- A phone call from your doctor or nurse
- Through your secure Emory Healthcare portal
- In the form of a letter in the mail

If you do not have your results after 2 weeks, please call the office at the number listed above.

Additional instructions:		

Emory Clinic Gynecology & Obstetrics