

# LAPAROSCOPY

## **What is a laparoscopy?**

Laparoscopy is a minimally invasive surgery, meaning it only uses one or a few small incisions. A laparoscope is a lighted, telescope-like instrument with a camera that is inserted into a small incision. This procedure allows your doctor to see the pelvic organs including the uterus, fallopian tubes, and ovaries.

## **Why am I having a laparoscopy?**

Because this procedure allows the doctor to see the reproductive organs, it may be helpful in diagnosing and treating gynecological problems including:

- Endometriosis
- Fibroids
- Ovarian cysts
- Ectopic pregnancies
- Adhesions (scar tissue)
- Fallopian Tube disease

## **What happens during laparoscopy?**

Before the procedure, you will be given general anesthesia to make you fall asleep for the entire procedure. During a laparoscopy, a small incision will be made in your navel (belly button) through which the laparoscope will be inserted. The abdomen will be filled with gas (carbon dioxide or nitrous oxide) so that the organs can be seen more clearly. The laparoscope will send a picture of the organs onto a screen for the surgeon to see. If a problem in your pelvic organs needs to be treated, the surgeon may use other instruments inserted other small incisions in your abdomen. These incisions will be usually no more than half an inch long. An instrument called a uterine manipulator may be inserted through the vagina and cervix into the uterus to move the organs into view.

## **What are the risks?**

Technological advances have allowed laparoscopy to be done as a minimally invasive surgery, so there are minimal risks compared to a major gynecologic surgery. The risks involved with laparoscopic surgery include:

- Anesthesia related complications
- Bleeding
- Infection
- Injury to abdominal organs

Certain conditions increase the possibility of complications. Conditions that may lead to higher risks with laparoscopy include:

- Previous operations in the abdomen, especially the bowel
- History of bowel or pelvic adhesions (scar tissue)
- History or evidence of infection in the abdomen or pelvic organs
- Large growth or tumor in the abdomen
- Obesity

### **What should I do to prepare for the procedure?**

Do not eat or drink anything after midnight the night before your surgery.

You will be under anesthesia for the procedure so you will need someone to drive you to and from your appointment.

Ask your provider any questions you may have before the procedure, especially instructions on stopping or continuing to take any existing medications. Follow the instructions on your surgery information sheet to complete your pre-op appointments with your surgeon and anesthesiology.

### **What can I expect after surgery?**

After a laparoscopy you should be able to return to normal activity in about 1 to 2 days. It is normal for your navel area and abdomen to be sore and possibly bruised. Your shoulders and back may hurt from the gas placed in your abdomen during the procedure. Also, it is normal for the anesthesia to sometimes make you feel weak and nauseous.

### **Call your provider if you experience:**

- Fever greater than 100.4 degrees Fahrenheit
- Severe nausea / vomiting or abdominal pain
- Heavy bleeding (greater than 2 pads soaked per hour for more than 4 sequential hours)
- Redness, swelling, or discharge from your incision
- Fainting

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.

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