

## WHAT SHOULD I EXPECT DURING RECOVERY?

- You will need to arrange for someone to stay with you after your surgery to help you around the house. Most people can care for themselves after 2-3 days.
- You can eat your normal diet. However, start with small things like clear liquids or soft foods immediately after your surgery as general anesthesia can make some women quite nauseated.
- Most abdominal and pelvic pain will resolve 4-5 days after your surgery, but random aches and pains can last for up to a month. It will get better every day.
- You will be given prescriptions for pain medication. Take any over-the-counter pain medications as prescribed to stay ahead of your pain. Add any narcotic pain medications as needed for severe pain.
- Heating packs, ice packs, and regular movement may be helpful for gas pains.
- All skin incisions will be closed with sutures and glue. The glue will peel off 2-3 weeks after your surgery. Until then, use only your hands and a gentle soap to clean your abdomen. All sutures will dissolve on their own.

## ABOUT DR. SHEHATA

Led by Dr. Hannah Shehata, MHA provides top-tier medical care for women. Our office specializes in gynecologic care for women ages 35-70 years old. Our goal is to help women be the best version of themselves inside and out.

We recognize that female sexual health concerns are often brushed aside, especially as women get older. Therefore, MHA specializes in treating women who are in menopause and/or going through the changes of menopause. Our office offers innovative treatments for urinary leakage, loss of sexual desire, decreased sexual sensitivity, and painful sex. We also offer hormone replacement therapy.



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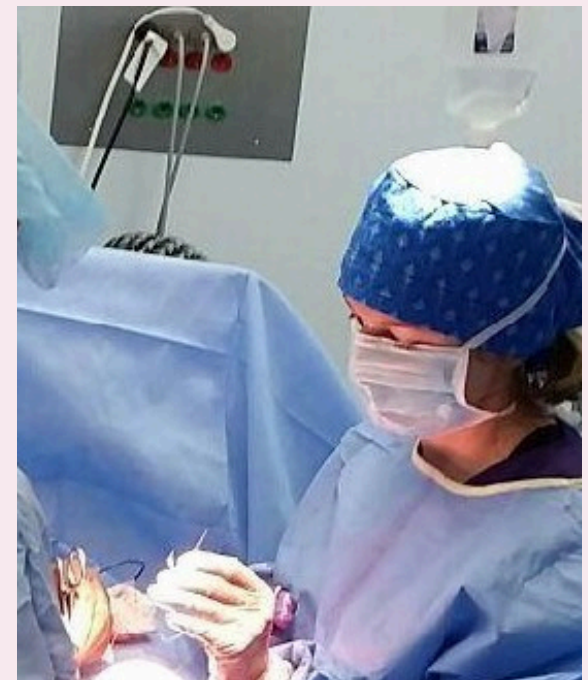
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**MHA**  
**MURRIETA HEALTH**  
*& Aesthetics*

## LAPAROSCOPY SURGERY



*Emphasizing Female Sexual Health*

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## WHAT IS A LAPAROSCOPY?

A laparoscopy is a type of “minimally invasive” surgery where small incisions are made on the abdomen to allow your surgeon to operate in your pelvis.

## WHY IS LAPAROSCOPIC SURGERY PERFORMED?

A laparoscopy is performed for:

- Sterilization by removal (salpingectomy) or tying (tubal ligation) of the fallopian tubes
- Removal of an abnormal fallopian tube that is causing infertility or pelvic pain
- Removal of ovarian cysts
- Treatment of an ectopic pregnancy
- Removal of the ovaries (oophorectomy) to prevent cancer
- Shrinkage of uterine fibroids using radiofrequency ablation (Acessa)
- Removal of the uterus (hysterectomy)
- Excision of scar tissue from prior surgeries causing pelvic pain
- Exploratory surgery when a problem is suspected inside the pelvis



## WHAT HAPPENS DURING A LAPAROSCOPIC SURGERY?

A laparoscopy is performed while you are asleep under general anesthesia. While you are asleep, your surgeon makes three small incisions on your abdomen with one typically being inside the belly button.

Your abdomen is inflated with gas and a special camera is placed inside the umbilical incision to allow your surgeon to look at your pelvic organs on a television monitor.

Long, slender instruments are inserted through the other abdominal incisions to perform the surgery. They are controlled by your surgeon outside of your body. Sometimes, a device needs to be inserted through the vagina into the uterus to help move your pelvic organs during the surgery.

## WHAT ARE THE BENEFITS OF LAPAROSCOPIC SURGERY?

Compared to a traditional “open” abdominal surgery, laparoscopy has:

- Less pain
- Lower risk of infection
- Minimal blood loss
- Faster recovery time
- Smaller and better looking scars
- Less risk of internal scarring after surgery, which reduces your chance of long-term pelvic pain
- No hospital stay – you go home the same day

## HOW DO I PREPARE FOR A LAPAROSCOPY?

- Arrange for someone to drive you to and from the outpatient surgery center.
- Make sure your surgeon has a list of your prescription medications. She will let you know if it is okay to take them on the morning of the surgery.
- Complete all bloodwork ordered by your surgeon 5–7 days prior to your surgery date.
- Obtain your medical clearance (if needed) within 30 days of your surgery date.
- Write down all your questions so your doctor can answer them at your preop appointment.
- Do not eat anything after midnight the morning of your surgery.
- Do not take any supplements or medications the morning of your surgery, unless your surgeon has specifically told you that it is okay.

## WILL THERE BE PHYSICAL LIMITATIONS AFTER SURGERY?

- Ride only as a passenger in a car until you are off all narcotic pain medications.
- Avoid any activities that increase your heart rate for the first two (2) weeks.
- Do not exercise beyond short walks for the first two (2) weeks.
- Do not pick anything up off the floor and do not lift more than 10 pounds (a gallon of milk) for the first two (2) weeks.