

## What is a Laparoscopy?

It is a procedure in which an instrument called a laparoscope is passed into the abdomen to enable the doctor to look inside. It is performed under intravenous (IV) sedation. Small incisions, measuring about one centimeter each, are made just below the belly button, by the bikini line. A needle is inserted through the incision to pass carbon dioxide into the abdomen. This gas swells the abdominal cavity and separates the bowel from the abdominal wall in order for the laparoscope to be inserted safely. The laparoscope has a powerful light attached to it which allows the doctor to look inside the abdomen and examine the organs, particularly, the outside of the uterus, fallopian tubes, and ovaries. The procedure usually takes about 60-90 minutes.

Any tissue taken at the time of your operation will be sent for examination.

You will be notified of the result. Following the investigation, the tissue will be disposed in accordance with health and safety.

This information sheet is a brief outline of this problem and is not intended to replace verbal communication with the medical or nursing staff.



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## Why do I need to have a Laparoscopy?

A laparoscopy is used to examine your uterus, fallopian tubes, ovaries, and pelvic wall. It can help the doctor to diagnose the cause of your infertility and decide on the best form of treatment.

In many cases, endometriosis and other pelvic inflammatory diseases may be the cause of repeated embryo implantation failures. By relieving the abdominal cavity of such adhesions or scarring there is an increased likelihood that the embryo may implant. This procedure can also be used for treatment of conditions such as removal of ovarian cysts and ectopic pregnancy.

## What alternatives do I have?

This depends on the reasons for having the laparoscopy. The doctor would be happy to discuss any alternative investigations or treatment if they are applicable to your particular case.

## What are the benefits of Laparoscopy?

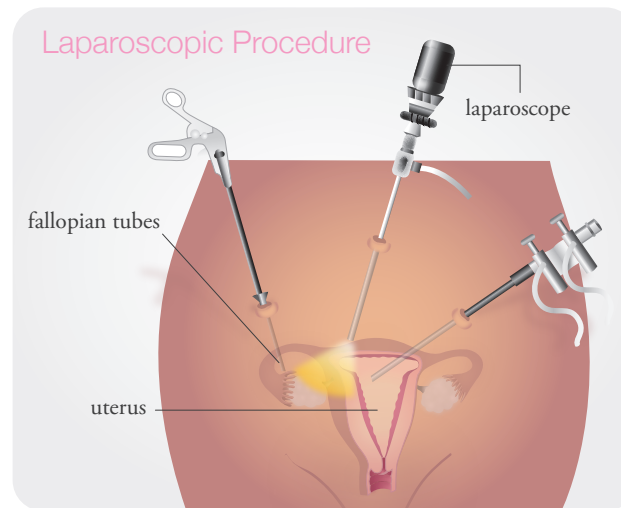
A diagnosis can often be made immediately and can prevent the need for major surgery.

## What are the risks of a Laparoscopy?

A small number of women (2 out of every 1000) have some internal bleeding which usually does not require any further treatment.

There is a small risk of perforating the bowel or bladder when the needle or laparoscope is inserted. In these circumstances, an immediate operation may be necessary to repair the damage (1 in every 1000). This will involve a bigger incision to the abdomen and a longer hospitalization.

It is possible that a wound infection may develop. Any inflammation or discharge at the wound site or fever (temperature 100.3 or above) that develops, should be reported to your doctor. If you have any concerns about the risks mentioned here, please speak to our medical staff.



## How long will I have to stay in the hospital?

Many times this procedure is done on an out-patient basis, where the patient does not require admission to the hospital. Some patients may stay overnight due to side effects from the anesthesia. You are also more likely to stay overnight if the procedure is carried out late in the afternoon or early evening.

## How will I feel after a Laparoscopy?

You may experience abdominal bloating and pain that is caused by the insertion of gas at the time of procedure. Sometimes the pain may be felt in your shoulders and neck. This is not serious and should decrease within 12 hours. Simple pain medication such as Advil, Motrin, and Tylenol are effective in most cases.

## What happens when I go home?

### **What happened to the stitches?**

Dissolving stitches are used to close the small incisions. These are absorbed and the remains fall out. This can take over a week. If you find the stitches irritating, notify your physician who can take them out.

### **How long is the recovery?**

You will probably need a week to recover from the procedure. Most people will need a few days off from work but you can return to work as soon as you feel able. Please follow-up with our office on the date instructed.

### **Will I be able to drive?**

You should not drive for the first 72 hours and until you can move about freely. As long as you feel comfortable you should not have problems driving.

### **When can I resume intercourse?**

This depends on the findings during surgery and can be discussed with a member of the hospital staff before your discharge home.

