



## Will I have any bleeding after the operation?

Some bleeding normally occurs. This may be heavier if you have had polyps or fibroids removed. The nurses on the ward will monitor your bleeding. Please use sanitary towels and not tampons until the bleeding stops.

## Will I feel any pain?

You may feel some discomfort, but should not experience any severe pain. It often feels like period pain. The nurses in the recovery room and on the ward will regularly assess your pain and give you pain relief medication.

Most women will be comfortable with paracetamol or ibuprofen, so it is useful to make sure you have some at home in preparation.

## Hygiene needs

Avoid having a bath or hot shower when you go home on the day of your operation as you may feel faint after a general anaesthetic. Normal bathing can resume the following day. The ward nurses will help you with your hygiene needs when required.

## When can I resume normal activities?

You will need to fully recover from the general anaesthetic, which takes at least 24 hours. We would not recommend driving for 48 hours after the anaesthetic, and wait longer if you still feel your concentration is affected. You should not drive if you feel drowsy and cannot drive within 24 hours of having an anaesthetic.

You should be able to resume all your normal daily activities the following day.

Sexual intercourse should be avoided until any vaginal bleeding has settled.

## What if I feel unwell at home?

Please contact your GP if any of the following symptoms occur:

- severe pain;
- heavy prolonged bleeding;
- high temperature/fever;
- offensive vaginal discharge.

These symptoms can mean you may have an infection which would require treatment.

## Are there any potential complications?

All operations carry some degree of risk, including reaction to general anaesthetic or any drugs you may be given. There may be bleeding from the vagina, especially if you have had a biopsy. Occasionally, particularly if you have had previous operations on the womb such as an ablation, it may not be possible to see into the cavity of the womb. Your doctor will discuss options with you after the procedure if this occurs.

Major complications are rare. Uncommonly the instruments can cause a perforation to the womb, which is a small hole made in the muscle of the womb,. If the doctor is concerned there may be other problems from a perforation a laparoscopy may be performed to check and potentially repair any damage. This does not usually cause any long-term problems. You would need to stay in hospital overnight for observation and may require treatment with antibiotics. Occasionally, further surgery may be needed to repair any damage caused by the perforation. This is usually via a laparoscopy. There is also risk of pelvic infection.

Depending on what was found during the hysteroscopy, and if biopsies were taken, you may be asked to:

- see your GP for results;
- come to the ward the following week to be given your results;
- be sent an outpatients appointment;
- be written to directly to your home address with your results.

Your GP will receive a copy of your results.

If no biopsies or other tissue is removed at the operation, then there will not be any need to wait for any results from the Pathology Laboratory. The medical and nursing staff should explain to you any further treatment that is needed.

*If you have any further questions, please contact us on:*

- **Wynard Ward .....01392 406512**
- **Day Case Unit .....01392 406550**
- **Pre-assessment Nurse.....01392 406531**