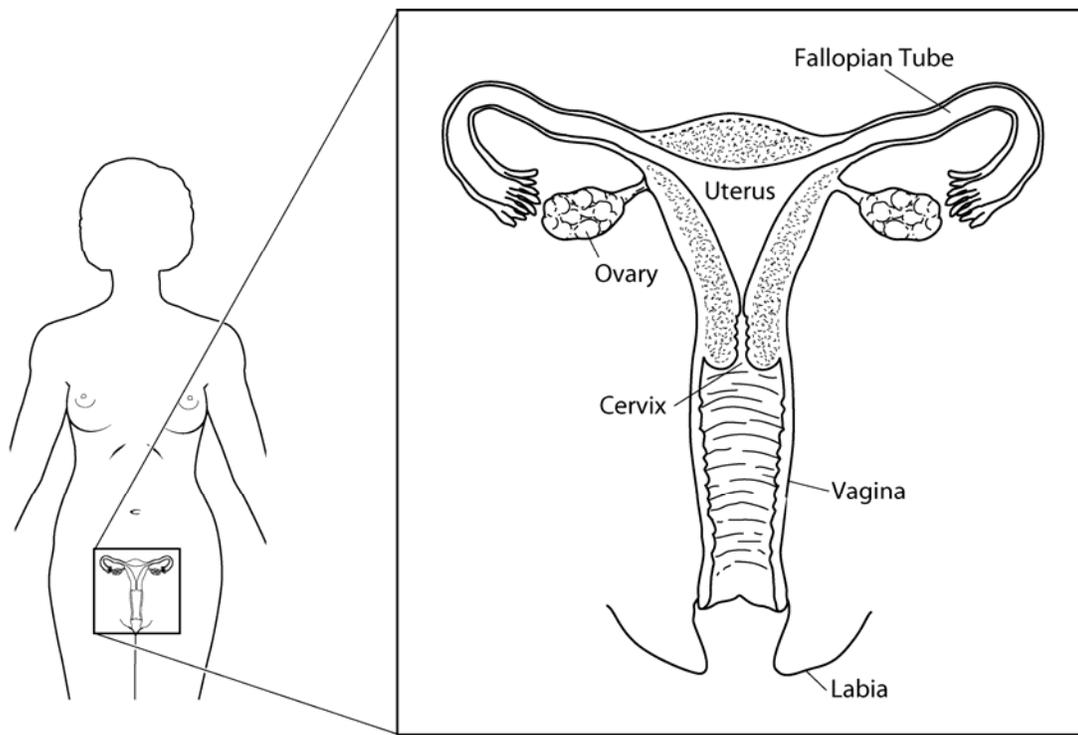


# Hysterectomy

A hysterectomy is a surgery to remove a woman's uterus. The uterus is one of the organs of the female reproductive system and is about the size of a closed hand. You can no longer have children after you have your uterus removed, and you will no longer have periods (menstruate). If your ovaries are not removed, you will continue to make female hormones. If your ovaries are removed, menopause will occur.



There are different types of hysterectomy surgeries. Ask your doctor what type of surgery you are having and if your cervix, tubes and ovaries are being removed.

- **Vaginal hysterectomy** – the uterus is removed through the vagina. No incision in the abdomen is needed.
- **Abdominal hysterectomy** – the uterus is removed through an incision in the abdomen.

- **Laparoscopic hysterectomy** – several small incisions are made in the abdomen and the doctor works through these small incisions using a laparoscope. This instrument makes it easier for the doctor to see small areas during surgery. Other small instruments are used to detach and remove the uterus.
  - ▶ **Robotic hysterectomy** – It is very similar to a laparoscopic hysterectomy. Instruments are more flexible and the doctor uses a special camera to guide the instruments during surgery.

## To Prepare

- Tell your doctor all the medicines you are taking. Be sure to include any prescription or over the counter medicines, vitamins and herbs.
  - ▶ You may be told not to take aspirin or ibuprofen (Advil, Motrin) for a few days before your surgery. **If you take aspirin daily**, do not stop taking it without asking your doctor first.
  - ▶ **If you are taking blood thinners or medicines to prevent clots**, check with the doctor who prescribed the medicine to see if you should stop the medicine before surgery.
- Ask your doctor if you should take your medicines the morning of your surgery. If so, take them with small sips of water only.
- **Do not** eat or drink anything, including water, after midnight before your surgery.
- If you have any allergies to medicines, foods or other things, tell the staff before your surgery.
- An adult family member or friend will need to take you home when you leave the hospital. It is not safe for you to drive or leave alone.

## During Surgery

- You will wear a hospital gown.
- An IV (intravenous) tube is put in a vein in your arm for giving medicines and fluids.
- You will be taken on a cart to the operating room and then helped onto a table.

- Medicine is given in your IV to keep you asleep and free from pain.
- You will have a catheter that drains urine from your bladder. This tube is often removed the morning after your surgery.
- Another tube may be put in through your nose and is passed down to your stomach to remove fluids so that you will not feel sick to your stomach. This tube is often taken out before you leave the recovery room.
- The surgery area or abdomen is cleaned.
- Your uterus is removed. Your cervix, tubes and ovaries may also be removed.
- Any incisions are closed with stitches, staples or special tapes called steri-strips.
- A bandage is put over the incisions.

## **After Surgery**

### **In the Hospital**

- You are taken to the recovery room where you are watched closely until you wake up and are doing well.
- Your breathing, blood pressure and pulse are checked often.
- If you are staying at the hospital, you will be taken to your room.
- A pad will be placed between your legs in case you have vaginal bleeding.
- You also may have special stockings on your legs while you are in bed to help prevent blood clots.
- The staff may teach you how to cough, deep breathe and use an incentive spirometer. An incentive spirometer is a device used to help you take deep breaths. These exercises help open the airways of the lungs and prevent pneumonia. If you have abdominal incisions, place a pillow or a folded blanket over your incisions for support when deep breathing or coughing. Do these exercises every 1 to 2 hours while you are awake.

- You will be given medicine to control your pain. Tell your nurse if you have pain.
- The IV is used to give you medicine and fluids until you are able to eat and drink well. You may be given a few ice chips if you are not sick to your stomach.
- You will be given clear liquids at first and then slowly progress to regular foods.
- Your bandage will be removed the day after surgery. Your incision may have:
  - ▶ Stitches that dissolve on their own.
  - ▶ Staples which are often taken out a few days after surgery.
  - ▶ Steri-strips that come off on their own in 7 to 10 days.
- If you have a vaginal hysterectomy, you will not have an incision.
- For your safety, when you leave the hospital, you will need to have an adult family member or friend take you home. You should have someone stay with you for at least the first 24 hours you are home.

### **At Home**

- Take your medicine as directed.
- Schedule a follow-up visit with your doctor. You will need to see your doctor in 4 to 6 weeks.
- Wash any incisions gently with soap and water and pat dry. You may take a shower or sponge bath, but do not take tub baths.
- A small amount of vaginal discharge is normal for 2 to 4 weeks after surgery. Change the pad every few hours. Wash the vaginal area with soap and water and pat dry.
- **Do not** put anything in your vagina until your doctor checks you.
  - ▶ **Do not** douche.
  - ▶ **Do not** have sexual intercourse.
  - ▶ **Do not** use tampons.

### **Activity Limits**

- **Limit** your activities for 4 to 6 weeks.
- **Do not** lift over 10 pounds for at least 2 weeks.
- You may do light housework such as washing dishes and cooking.
- **Do not** do strenuous activities, such as vacuuming or exercising for at least 2 weeks.
- **Do not** drive for 2 weeks, but you can ride in a car for short trips.
- Go up and down stairs slowly, one step at a time.
- Take walks. Starting with short distances. Slowly increase how long and fast you walk.

### **Other Issues**

- If your ovaries are taken out, you may have signs of menopause such as hot flashes, vaginal dryness or mood changes.
- It is common to have many feelings after surgery. You may feel sad, fearful, nervous or angry. Share these feelings with your loved ones and friends to help you cope as you recover. If the sadness does not go away after a few weeks, talk to your doctor.
- Your looks will not change after this surgery. There are no physical changes except that you may have a scar from your incision.
- Your surgery should not affect your ability to have sex or the way you or your partner feel while having sex. Ask your doctor when you may resume sexual activity and discuss any concerns you may have about sex.

### **Call your doctor right away if you have:**

- Shaking, chills or a temperature over 101 degrees F or 38 degrees C
- An incision that is swollen, red, has drainage or comes apart
- Bleeding from your incisions
- Pain, warmth or tenderness in your legs
- Heavy vaginal bleeding, soaking 2 to 3 pads in one hour

- Vaginal drainage with an odor
- Trouble urinating
- Burning when you urinate or feel a need to urinate often
- Skin that is itchy, swollen or has a rash
- Severe mood swings or feel depressed

**Call 911 right away** if you have trouble breathing all of a sudden or have chest pain.

**Talk to your doctor or nurse if you have any questions or concerns.**