

NASHVILLE FERTILITY CENTER, P. C.
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Laparoscopy/Hysteroscopy Permit

The laparoscope is a surgical instrument like a telescope placed through a small incision in the abdomen. Second, third, and fourth incisions are often made for scissors, coagulator, laser, or other tools to perform surgery at laparoscopy. The hysteroscope is a similar instrument, which is placed through the cervix to view the inside of the uterus. These techniques decrease the need for major open surgery. This decreases the overall cost and discomfort, since recovery is usually much quicker than with open surgery.

Pictures of video may be taken during surgery and used to show you what was seen and done. They are also used for teaching other patients and other surgeons these techniques. Your signature below will grant consent to the creation and viewing of pictures or video. Visiting operating room nurses or surgeons may be present during your laparoscopy to observe our newer laparoscopic and hysteroscopic procedures.

Although laparoscopy is generally an outpatient procedure, you may be asleep from 1 to 4 hours for extensive or difficult operations. Laparoscopy and Hysteroscopy, like any surgical procedure, have risks involved with their performance. The anesthesia or other drugs administered can be associated with risks including severe reaction leading to death (this is rare).

After laparoscopy, shoulder pain, bloating, vaginal bleeding, and sore throat are common. There may be itching if hair has been shaved, and bladder spasms may occur. About 1 in 20 patients will be admitted overnight due to nausea, vomiting, drowsiness, pain or problems urinating after laparoscopy. Complications such as bleeding, infection, allergic reaction, and urinary retention have required hospitalization in approximately 1 in 400 patients. Please be aware that:

- You should avoid any activity that will require concentration for 2 days
- You can usually return to light work and moderate activities by the third day
- You can usually return to full activities at 1 to 2 weeks

Other complications include poor healing, hernia formation, formation of adhesions, damage to nerves going from the pelvis to the legs, or formation of dangerous blood clots in the legs or lungs. Antibiotics, anticoagulants, and other medications may be used to aid in healing and to reduce the chance of infection or postoperative adhesions. Major complications requiring either immediate or delayed further surgery, such as damage to the uterus, tubes, ovaries, bowel, bladder, ureter (tube going from kidney to the bladder), blood vessel, or other organs are uncommon and occur in fewer than 1 in 1200 patients. The chance of severe complications such as hysterectomy, colostomy, paralysis or death is rare.

There is no guarantee that pain will be totally resolved or that pregnancy will occur after surgery. All we can do is be careful and do our best to correct your problem with laparoscopy and/or hysteroscopy.

Please sign the first section to acknowledge that we have discussed this and that you consent to this procedure.

Signature _____ Witness _____ Date _____

I have read the preceding and understand what I have read. Dr. Hill/Whitworth/Weitzman/Eblen and their staff have given me ample opportunity to ask questions on specific points. I would like the following conditions to apply:

I am ready for immediate OPEN SURGERY:

- ___ only for emergency,
- ___ for better results at your discretion,
- ___ only after intraoperative discussion with my family, or
- ___ other _____.

Print name: _____

Signature _____ Witness _____ Date _____