

Hysterectomy

Total (Simple) Hysterectomy involves the removal of the uterus and cervix.

Subtotal Hysterectomy involves removing the uterus but not the cervix.

In either case, the ovaries and fallopian tubes remain.

The uterus can be reached and removed in these ways:

- **Abdominal hysterectomy** - An incision is made in the abdomen. The incision can be horizontal or vertical.
- **Vaginal hysterectomy** - An incision is made inside the vagina. The uterus is then removed through the vagina. This can be done if the uterus is not too large, or if it has dropped down into the vaginal canal.
- **Laparoscopically assisted vaginal hysterectomy (may also use the robot)** - Small instruments are inserted through tiny abdominal incisions. The uterus is removed through the vagina.

Before the day of surgery:

- Ask your doctor if you need to stop blood-thinning medicines like aspirin or coumadin.

On the day of surgery:

- You will need to arrive 1 ½-2 hours before surgery. A nurse will interview you, start an IV and answer any questions you have.

Diet

- Clear liquids initially. Gradually advance to a regular diet as tolerated. Abdominal hysterectomy patients will need to have return of active bowel sounds before diet is advanced.

Medications

- Take pain medication as instructed by your physician.
- Resume all medication as taken before the surgery unless otherwise instructed by your doctor.

Activities and restrictions

- Follow your doctor's orders concerning driving, returning to work, lifting, exercising, climbing stairs and engaging in sexual activities.

Wound care

- There will be a bandage on the abdomen if an abdominal hysterectomy was performed. There may be several small bandages if a laparoscopic vaginal assisted hysterectomy was performed.
- Instructions will be given for wound care and when showering/bathing may be resumed.
- Intermittent bloody, brown, or yellow discharge may occur for 3-4 weeks. Small bits of suture may be passed.

Reasons to contact your physician

- Increasing amounts of red drainage heavier than a regular menstrual flow
- Fever
- Discomfort not controlled by pain medication
- Signs of wound infections - redness, swelling, wound drainage
- Shortness of breath, chest pain, or unusual sputum
- Calf tenderness or swelling