

LAPRASCOPIC BILATERAL SALPINGO-OOPHORECTOMY

This procedure is to remove the ovaries and tubes. It will induce full surgical menopause, if you are not already menopausal.

After checking in at admitting and then daycare, you are brought to the operating room. An IV is started and you are put to sleep with a general anesthetic. Your abdomen is cleaned off and a needle is inserted through your belly button to blow your belly up with gas. A camera is then placed. Under visualization from the camera, a second incision is made in your abdomen to allow instruments to be passed. Additional incisions with additional instruments will be based on what is found in your abdomen.

Risks of the procedure:

- Risk of general anesthetic. There are minimal risk of general anesthesia that are less than the risk of getting into a car crash.
- Small chance of damaging your ureter, which is the tube that comes from your kidney to your bladder.
- A small chance of damaging something upon entry in you abdomen, such as, bowels, bladder or blood vessels. There is a 1:800 risk of needing to open your abdomen, like a c-section incision, to repair the damage that is caused upon entry.
- A small risk of clot in your legs, moving up to your lungs. You are encouraged to get up and walk around following surgery to decrease this risk.
- There is a small risk of infection. The risk of infection with the procedure is so low, we do not give you an antibiotic as prophylaxis.
- Small risk of bleeding, 1:800 chance of needing a blood transfusion. Risk of a blood transfusion in Canada is very minimal as all the blood is screened. It is important that you go to the lab prior to your surgery and have your blood work drawn as we are ensuring that there is a match of blood in the hospital, in case of emergency.

Most patients after the procedure can manage the pain with just Advil and Tylenol. There are no restrictions of activities or lifting or sexual activity following your surgery.