Ovarian Cystectomy

Technique
Procedure involves the removal of an ovarian cyst. The entire ovary is not removed. This procedure can be completed either by a laparotomy (abdominal incision) or by laparoscopy (multiple small incisions). Your surgeon will determine which is right for you and your particular condition.

Incisions
Laparotomy - An incision is made on the abdomen for this procedure. The size of the incision is determined by the size of your uterus and the abdominal exposure needed. The incision will either by vertical (from the belly button down to the pubic bone) or horizontal ("bikini cut").
Laparoscopy - 3-4 small incisions (less than one inch) are made on the abdomen.

Operative Time
Operative times vary greatly depending on the findings at the time of surgery. Your surgeon will proceed with safety as his/her first priority. Average times range from 45-90 minutes.

Anesthesia
Spinal anesthesia or
General anesthesia (required for laparoscopy)

Preoperative Care
Nothing by mouth after midnight
The procedure is usually scheduled immediately after your menstrual period.

Hospital Stay
Day Surgery or
23-hour observation
1-3 day hospital stay (laparotomy)

Postoperative Care
These guidelines are intended to give you a general idea of your postoperative course. Since every patient is unique and has a unique procedure, your recovery may differ.
Anti-inflammatory pain medicine is usually required for the first several days to manage soreness and inflammation.
Narcotic pain medicine will be provided to assist with the discomfort from the incisions.
We recommend that anti-inflammatory medications, such as ibuprofen, naproxen, etc., be used on a scheduled (regular) basis and that narcotic pain medicine be utilized on an "as needed" basis.
Driving is allowed after your procedure only when you do not require the narcotic pain medicine to manage your pain.
Patients may return to work in 5-7 days following the procedure.
Incisions may bruise but they should not become red or inflamed.