

Laparoscopic-Assisted Vaginal Hysterectomy Fact Sheet

Technique

This procedure involves removing the uterus and cervix using a combined laparoscopic and vaginal technique. The surgeon will visually examine the liver, gallbladder, appendix, and pelvic cavity for any sign of additional pathology.

Incisions

Three small incisions are made on the abdomen to complete this procedure. One of these incisions is often placed within the umbilicus (bellybutton). The remaining incisions are usually 5mm in size and made on the sides of your 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 priority.
- Average times range from 45-120 minutes.

Preoperative Care

You should not eat anything by mouth after midnight on the day before surgery.

Hospital Stay

Day surgery

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.
- Pain medicine is usually required for the first week. We recommend using anti-inflammatory medications such as ibuprofen or naproxen on a schedule, only using opioid pain medicine on an "as needed" basis.
- Driving is allowed once you no longer need opioids for pain.
- Nothing may be placed in the vagina for at least 6 weeks. This includes tampons, douching, and intercourse.
- If they desire, patients may return to desk work after 2 weeks. We advise that you do not perform any heavy lifting or strenuous exercise until after the surgeon has seen you at 6 weeks.

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