OUR SPECIALISTS

Board Certified in Reproductive Endocrinology



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Appointments may be requested online for your convenience through our Patient Portal



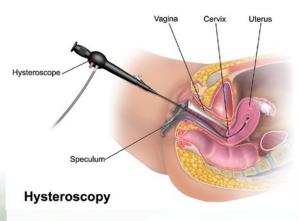






HYSTEROSCOPY





What Is A Hysteroscopy?

A hysteroscopy is a procedure that allows your doctor to look inside your uterus by passing a small telescope through the cervical canal. This can be done in our Marlton office, or for certain cases your doctor may recommend having the procedure at a surgical center under anesthesia. A hysteroscopy allows the doctor to evaluate the inside of the uterus before you pursue fertility treatment. The procedure involves passing an ultra-thin camera in to the uterus through the vagina. Scar tissue inside the uterine cavity can be cut, and polyps and fibroids can be removed. If there is a wall (septum) dividing the uterine cavity in two, it can be removed. When the fallopian tubes are blocked at the place where they are connected to the uterus, special catheters can be placed through the hysteroscope to attempt to re-open them.

Benefits of a Hysteroscopy

Office hysteroscopies allow your Doctor to fully evaluate the inside of the uterus and the opening

of the fallopian tubes. Many times if something is found during a hysteroscopy (such as a polyp) it can be taken care of at the time of diagnosis. Other procedures like a sonohysterogram (sono) or hysterosalpingogram (HSG) are only diagnostic. All in office hysteroscopies are performed in our Marlton office.

If you are having an outpatient hysteroscopy, you should have nothing to eat or drink after midnight before the surgery. If you have medicines that you have to take in the morning, you can usually do this with a small sip of water, but please discuss this with your doctor. You will need to be at the surgery center at the designated time. You should wear loose fitting clothing. Your doctor will meet with you before the surgery to discuss any last minute questions. You will go to the operating room and the anesthesiologist will put you to sleep. You will wake up in the recovery room and feel "groggy" and you may have some pelvic discomfort like menstrual cramps. You will be observed by the recovery room nurses until you are awake enough to walk on your own, can drink liquids without vomiting, and are able to urinate. The recovery room nurse will tell you when you can go home.

Your doctor will have explained the surgical findings with a designated family member while you are waking up. Often, a picture from the surgery will be given to your family member. It is best to fully discuss the findings with you at a

later date because the anesthesia will make you forget the conversation in the recovery room. A post-operative check-up and examination should be scheduled for 2 to 3 weeks after surgery, at which time the surgery will be discussed and a plan made for any future therapy.

Before & After Your Procedure

Prior to your in office hysteroscopy, your Doctor may prescribe you Valium. If you choose to take this medication, you should have someone drive you to and from your procedure. After your in office hysteroscopy, you can expect some menstrual type cramping or spotting. You will be discharged with pain medication to take if needed. If you have any further questions or concerns after your procedure, please contact our office.

If you are having a hysteroscopy at a surgical center, in general you should be able to be "up and around" the day of surgery with some pelvic discomfort, and back to your usual activities within 1 to 4 days. You should take ibuprofen 600 mg every 6 hours for 2 days after surgery, and take a narcotic pain pill such as Percocet every 6 hours as necessary for additional pain relief. You may also have vaginal bleeding, but it should be less than a period. You may have some irritation when urinating because the bladder may have been catheterized to remove urine during the surgery. You may resume your usual activities and diet when you feel ready, and may resume intercourse one week after surgery.