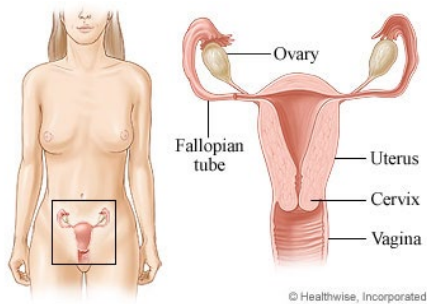


Laparoscopic Oophorectomy: Before Your Surgery



What is a laparoscopic oophorectomy?

Oophorectomy (say "oh-uh-fuh-REK-tuh-mee") is surgery to remove one or both of your ovaries. Your ovaries store and release eggs so that you can get pregnant. Ovaries also produce female sex hormones.

Your oophorectomy will be laparoscopic surgery, which requires only small cuts (incisions). To do this type of surgery, a doctor puts a lighted tube, or scope, and other surgical tools through small cuts in your belly. The doctor is able to see your ovaries with the scope. Sometimes the doctor needs to make a larger incision if it's too hard to work through the scope.

The incisions leave scars that fade with time. After your surgery, you are likely to have pain for the next several days.

If both of your ovaries are removed, you can no longer get pregnant. Removing both ovaries also makes you start menopause if you haven't started it already.

How do you prepare for surgery?

Surgery can be stressful. This information will help you understand what you can expect. And it will help you safely prepare for surgery.



Preparing for surgery

- Bring a list of questions to ask your doctors. It is important that you understand exactly what surgery is planned, the risks, benefits, and other options before your surgery.
- Tell your doctors ALL the medicines and natural health products you take, including any vitamins and supplements. Some of these can increase the risk of bleeding or interact with anesthesia. Your doctor will tell you which medicines to take or stop before your surgery.

- If you take aspirin or some other blood thinner, be sure to talk to your doctor. They will tell you if you should stop taking these medicines before your surgery. Make sure that you understand exactly what your doctor wants you to do.
- You may need to stop taking certain medicines a week or more before surgery, so talk to your doctor as soon as you can.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

Plan Ahead

- **Plan a ride home.** Ask a family member or friend to bring you home after your hospital visit and stay with you for 24 hours.
- **Plan for meals.** Good nutrition is important for your recovery, but cooking may be harder to do right after you get home. Prepare and freeze meals before your surgery or ask friends and family to help you cook or shop for groceries.
- **Get help with chores.** After you get home you may need help. For a short time after your surgery, you may be told to avoid certain physical activities. Plan ahead and arrange to have some help with chores after your surgery.
- **Buy gum or hard candies.** Chewing gum and sucking on hard candies may help get your bowels moving after surgery.

Be as healthy as possible

- **Be active.** Being active before surgery will make it easier for you to be active after surgery. If you're normally active, keep doing your regular activities up to the day of your surgery. If you aren't used to exercising, start slowly. You can start by going for 15 minute walks.
- **Eat healthy.** Eating healthy foods will give your body the nutrients it needs to prepare for and handle the surgery. Eat healthy foods and drink enough fluids in the weeks before your surgery. Your healthcare team will tell you how long before surgery that you need to stop eating and drinking.
- **Manage your medical conditions.** If you have other medical conditions, such as anemia or high or low blood sugar, ask your healthcare team what you need to do to prepare for surgery.
- **Quit tobacco.** You can heal faster and prevent lung problems after surgery if you quit tobacco. Aim to quit smoking and using tobacco and tobacco-like products at least 4 weeks before surgery. Talk to your healthcare team about ways to quit or cut back. **Don't drink alcohol 24 hours before surgery.** Alcohol, cannabis, and other drugs may interact with medicines you take before and after surgery. Talk to your healthcare team if you need help stopping or cutting back on alcohol, cannabis, or other drugs.

Do the following before your surgery to help you feel better sooner and recover faster.

The day before surgery

- Know the time of your surgery, when you need to be at the hospital, and where you need to go when you get there.
- Follow any instructions the healthcare team or your surgeon gave you for your medicines (including herbal or complementary medicines).
- Don't drink alcohol 24 hours before your surgery.



- **Stop** eating after midnight. This is very important!



Stop eating and drinking all non-clear fluids at midnight. This is very important

- You may **DRINK CLEAR FLUIDS ONLY** up to 3 hours before surgery. This includes **BLACK** coffee, tea, Gatorade, apple juice and water.

Morning of surgery

Plan to arrive at the hospital on time.

- Follow any instructions provided
- Bring all of the things you packed for your hospital stay **if** you are being admitted.
- Follow **all** other instructions the healthcare team gave you to prepare for surgery.
- Bring your CPAP if you use one



Taking care of yourself before surgery

- Build healthy habits into your life. Changes are best made several weeks before surgery, since your body may react to sudden changes in your habits. Talk to your doctor about any changes you need to make.
 - Stay as active as you can.
 - Eat a healthy diet.
 - Cut back or quit alcohol and tobacco. If you drink a lot of alcohol, talk to your healthcare provider about helping you cut down the amount you drink.
- If you have an advance care plan, let your doctor know. If you do not have one, you may want to prepare one so your doctor and loved ones know your health care wishes.

Doctors recommend that everyone prepare these papers before surgery, regardless of the type of surgery or condition.

What happens on the day of surgery?

- If your doctor has instructed you to take your medicines on the day of surgery, please do so using only a sip of water.
- Take a bath or shower before you come in for your surgery. Do not apply lotions, perfumes, deodorants, or nail polish.
- Remove all jewellery, piercings, and contact lenses.
- Leave your valuables at home.

At the hospital



Bring a picture ID health card

- Before surgery you will be asked to repeat your full name, what surgery you are having, and what part of your body is being operated on. The area for surgery may be marked.
- A small tube (IV) will be placed in a vein, to give you fluids and medicine to help you relax. Because of the combination of medicines given to keep you comfortable, you may not remember much about the operating room.
- You will be kept comfortable and safe by your anesthesia provider. You will be asleep during the surgery.
- As you wake up in the recovery room, the nurse will check to be sure you are stable and comfortable. It is important for you to tell your doctor and nurse how you feel and ask questions about any concerns you may have.

When should you call your doctor?

- You have questions or concerns.
- You become ill before the surgery (such as fever, flu, or a cold).
- You need to reschedule or have changed your mind about having the surgery.

Discharge

How you may feel after your operation

- You may feel nauseated, light headed dizzy or sleepy for up to 24 hours after your surgery
- You may have a slight temperature for 2 days
- You may feel tired for a few days after your surgery

For 24 hours after your surgery do not.... Drive a vehicle

Operate heavy equipment
Drink alcohol or smoke
Make any important or legal decisions

Laparoscopic Oophorectomy: What to Expect at Home

Your Recovery

It's normal to also have some shoulder or back pain. This is caused by the gas your doctor put in your belly to help see your organs better.

To help with pain, your doctor will prescribe medicines. You may need about 1 week to fully recover. It's important not to lift anything heavy for about 1 week. You can ask your doctor when it's okay to have sex.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to get better as quickly as possible.

How can you care for yourself at home?



Activity

- Rest when you feel tired.
- Be active. Walking is a good choice.
- Allow your body to heal. Don't move quickly or lift anything heavy until you are feeling better.
- Hold a pillow over your incisions when you cough or take deep breaths. This will support your belly and may help to decrease your pain.
- You may shower 24 hours after surgery. Pat the incision dry.
- Do breathing exercises at home as instructed by your doctor. This will help prevent pneumonia.



Diet

- Start off with light foods such as soup, toast and tea. Avoid dairy and fatty foods as this might upset your stomach
- Drink plenty of fluids

- If your bowel movements are not regular right after surgery, try to avoid constipation and straining. Drink plenty of water. Your doctor may suggest increasing your fibre intake or taking a mild laxative.



Medicines

- Your doctor will tell you if and when you can restart your medicines. He or she will also give you instructions about taking any new medicines.
- If you take blood thinners, such as warfarin (Coumadin), clopidogrel (Plavix), or aspirin, be sure to talk to your doctor. He or she will tell you if and when to start taking those medicines again. Make sure that you understand exactly what your doctor wants you to do.
- Be safe with medicines. Read and follow all instructions on the label.
 - If the doctor gave you a prescription medicine for pain, take it as prescribed.
 - You may take Tylenol, which is also called acetaminophen every 4 hours and Advil 650mg every 6 hours as needed for pain.



Incision care

- If you have strips of tape on the cut (incision) the doctor made, leave the tape on for a week or until it falls off.
- Wash the area daily with warm, soapy water, and pat it dry. Don't use hydrogen peroxide or alcohol. They can slow healing.
- You may cover the area with a gauze bandage if it oozes fluid or rubs against clothing.
- Keep the area clean and dry.



Other instructions

- Wear loose, comfortable clothing. For a few weeks, avoid anything that puts pressure on your belly.
- You may want to use a heating pad on your belly to help with pain.

At Home

Slowly get more active.

- Eat healthy and drink fluids as you did before surgery (unless your healthcare team gives you other instructions).
- Drink oral nutritional supplements (like Ensure Protein Max) for the first month after surgery to give you extra protein and help you heal faster.
- Take less pain medicine as your pain gets better.
- Take your blood thinner and other medicines as you were told.

What is anesthesia?

Anesthesia controls pain. And it keeps all your organs working normally during surgery or another kind of procedure.

Anesthesia can relax you. It can also make you sleepy or forgetful. Or it may make you unconscious. It depends on what kind you get.

Your anesthesia provider (anesthesiologist) will make sure you are comfortable and safe during the procedure or surgery.

There are different types of anesthesia.

- **Local anesthesia.** This type numbs a small part of the body. Doctors use it for simple procedures.
 - You get a shot in the area the doctor will work on.
 - You will feel some pressure during the procedure.
 - You may stay awake. Or you may get medicine to help you relax or sleep.
- **Regional anesthesia.** This type blocks pain to a larger area of the body. It can also help relieve pain right after surgery. And it may reduce your need for other pain medicine after surgery. There are different types. They include:
 - Peripheral nerve block. This is a shot near a specific nerve or group of nerves. It blocks pain in the part of the body supplied by the nerve. This is often used for procedures on the hands, arms, feet, legs, or face.
 - Epidural and spinal anesthesia. This is a shot near the spinal cord and the nerves around it. It blocks pain from an entire area of the body, such as the belly, hips, or legs.
- **General anesthesia.** This type affects the brain and the whole body. You may get it through a small tube placed in a vein (IV). You are unconscious and will not feel pain. During the surgery, you will be comfortable. Later, you will not remember much about the surgery.

What type will you have?

The type of anesthesia you have depends on many things, such as:

- The type of surgery or procedure and the reason you are having it.
- Test results, such as blood tests.
- How worried you feel about the surgery.
- Your health. Your doctor and nurses will ask you about any past surgeries. They will ask about any health problems you may have, such as diabetes, lung or heart disease, or a history of stroke. They will want to know if you take medicine, such as blood thinners. Your doctor may also ask if any family members have had any problems with anesthesia. You will talk with your anesthesia provider about your options. In many cases, you may be able to choose the type of anesthesia you have.

What can you expect after having anesthesia?

Right after the surgery, you will be in the recovery room. Nurses will make sure you are comfortable. As the anesthesia wears off, you may feel some pain and discomfort from your surgery.

Tell someone if you have pain. Pain medicine works better if you take it before the pain gets bad.

You may feel some of the effects of anesthesia for a while. It takes time for the effects of the medicine to completely wear off.

- If you had local or regional anesthesia you may feel numb and have less feeling in part of your body. It may also take a few hours for you to be able to move and control your muscles as usual.
- When you first wake up from general anesthesia, you may be confused. Or it may be hard to think clearly. This is normal.
- Don't do anything for 24 hours that requires attention to detail. This includes going to work, making important decisions, or signing any legal documents.

Other common side effects of anesthesia include:

- Nausea and vomiting. This does not usually last long. It can be treated with medicine.
- A slight drop in body temperature. You may feel cold and shiver when you first wake up.
- A sore throat, if you had general anesthesia.
- Muscle aches or weakness.
- Feeling tired.

You may go home the same day of surgery or you may stay in the hospital. Your doctor will check on your recovery from the anesthesia. He or she will answer any questions you may have.

For answers to frequently asked questions about your anesthetic, please visit <https://www.cas.ca/en/about-cas/advocacy/anesthesia-faq>



When should you call for help?

Call 911 anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have chest pain, are short of breath,

Call your doctor or seek immediate medical care if:

- You have vaginal discharge that has increased in amount or smells bad.
- Bright red blood has soaked through the bandage over your incision.
- You have signs of infection, such as:
 - Increased pain, swelling, warmth, or redness.
 - Red streaks leading from the incision.
 - Pus draining from the incision.
 - A fever.
- You have bright red vaginal bleeding that soaks one or more pads in an hour, or you have large clots.