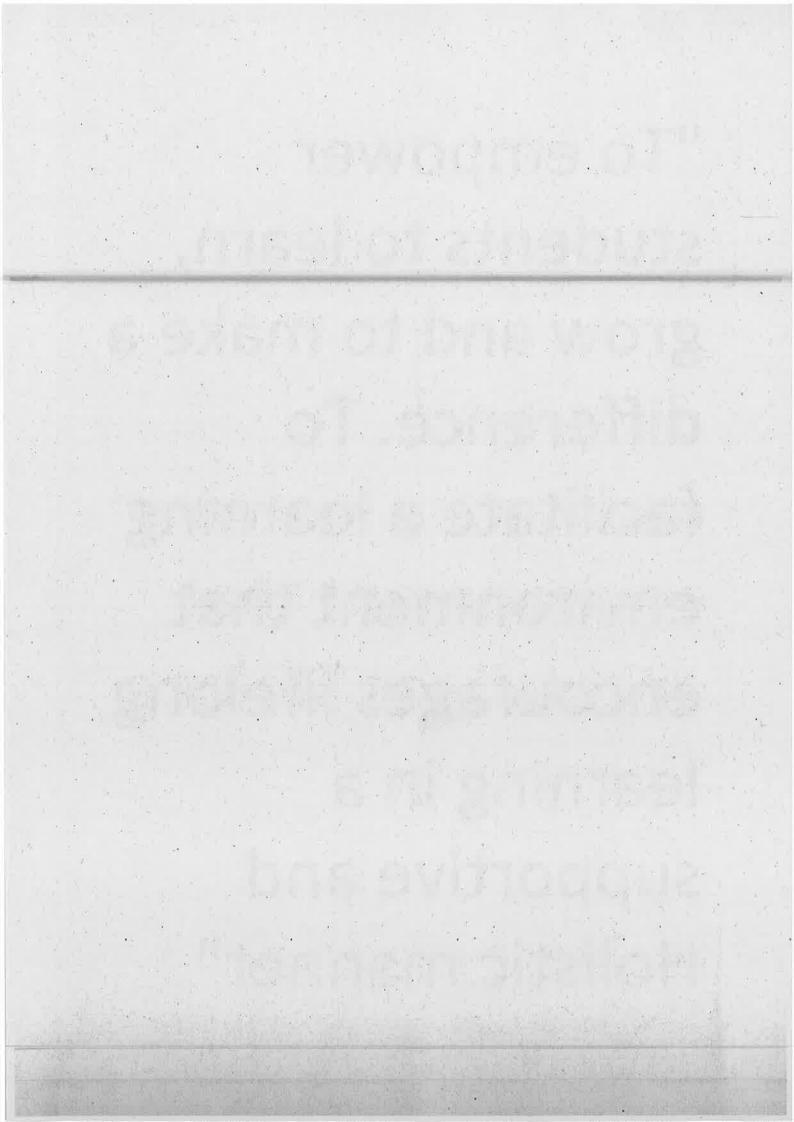
"To empower students to learn, grow and to make a difference. To facilitate a learning environment that encourages lifelong learning in a supportive and Holistic manner"



Gynaecological Surgery and procedures

Total abdominal hysterectomy (TAH) Bilateral Salpingo-oophrectomy (BSO) - Uterus and cervix removed. BSO- Both fallopian tubes and both ovaries removed.

Laparoscopy- (keyhole surgery) A surgical procedure that allows the surgeon to access the inside of the abdomen and pelvis without having to make large incisions on the skin, using a laparoscope. A laparoscope is a small tube with a light source and a camera on the end that takes images of the inside of the abdomen and these are relayed to a monitor in the operating theatre that the surgeon can see.

Laparoscopic Assisted Vaginal Hysterectomy (LAVH) - keyhole surgery to remove the uterus through the vagina.

Salpingectomy- Removal of a fallopian tube (should be specified which one on consent)

Oophrectomy- Removal of an ovary (should be specified which one on consent)

Ovarian cystectomy- Removal of an ovarian cyst

LLETZ (Large loop excision of the Transformation Zone)- This is where a heated wire loop is used to remove a small sample of the cervix where the abnormal cells have been detected from colposcopy.

Colposcopy- A procedure carried out in GOPD that uses a speculum and colposcope to visualise the cervix. Acetic acid is applied to the cervix to highlight any abnormal cells.

Hysteroscopy- A procedure where a hysteroscope (a thin tube with a camera on the end) is passed through the cervix and into the uterus to look inside the uterus and identify any abnormalities. The images from uterus are displayed on a screen for the consultant to see.

Vulval biopsy- A small sample of tissue taken from the vulva that will be sent to histology to identify any abnormalities.

Cervical biopsy- A small sample of tissue is taken from the cervix and sent to histology to identify any abnormalities.

Cone biopsy- Surgery to remove a small cone shaped piece of tissue from the cervix containing abnormal cells, this is usually done under general anaesthetic.

Laparoscopic Sterilization- This procedure involves clips being applied to both of the fallopian tubes laparoscopically for permanent contraception.

Laparoscopy and dye test- Dye is passed into the fallopian tubes to assess the patency of the tubes.

Radical Hysterectomy- For treatment of cervical cancer. This procedure involves removing the uterus, cervix, the parametrial tissue (tissue around the cervix) the top part of the vagina and pelvic lymph nodes

Omentectomy- removal of the omentum which is a fat pad that covers the stomach, large intestine and other abdominal organs.

Radical Vulvectomy- this surgery involves removing the whole vulva, including inner and outer labia and possibly the clitoris, to treat vulval cancer.

Radical wide local excision- this surgery is where the cancerous tissue is removed from the vulva, as well as a margin of healthy tissue.

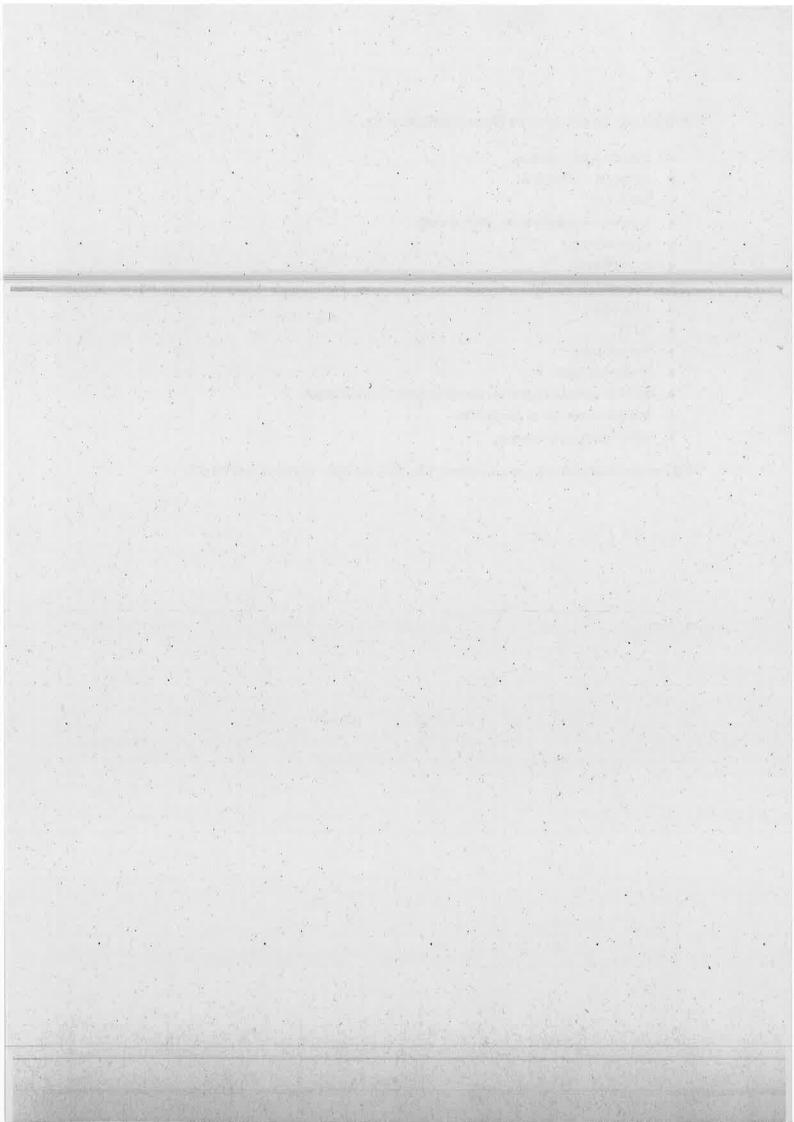
Radical Trachelectomy- This surgery involves removing most of the cervix and upper part of the vagina for treatment of cervical cancer. The uterus is left in place so it may be possible to have a baby afterwards.

Anterior/posterior colporraphy- Colporrhapy may be performed on the anterior and/or posterior walls of the vagina. An anterior repair treats a cystocele (prolapsed bladder), while a posterior repair treats a rectocele (bulge of the front wall of the rectum into the back wall of the vagina). The aim of the surgery is to tighten the support tissues.

Procedures to observe in Gynae outpatients:

- Speculum examination
- Bimanual examination
- Smear test
- Insertion of pessary (ring. Shelf, donut)
- Cervical biopsy
- Vulval biopsy
- Taking of dual swabs
- Colposcopy
- LLETZ
- Hysteroscopy
- Pregnancy tests
- Manual Vacuum Aspiration (for treatment of miscarriage)
- Insertion/removal of mirena coil
- Administration of prostap

Find out the rationale for these procedures, why they are done and what they involve.



Common abbreviations used in Gynaecology documentation

Find out what these mean and when they are used:

TWOC-		4 Y 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
PPT-		An A A CO
RWT-		
LMP-		
PMB-		
PCB-		
VTE-		
CRP-		
FBC-		
BP-		
AVPU-		
PV-		
PR-		
BHCG-		
AMH-		
HVS-	***	
MSSU-		
Group and save-		
CXR-		
ECG-		

Find out what these instruments are, what they used for and when they might be used:

•	Speculum	(n) = 7	12 1917	 * 200	3. "	1 1 N/x 3
	+ 10					3 41

- Tenaculum/vulsellum forceps
- Simms Speculum
- Sponge holding forceps
- Dental syringe
- Insulated speculum
- Cervical dilator

PFT-

CPEX-

IVF-

PID-

IUCD-

TOP-

USS-

MRI-

CT-

UTI-

VE-

U+E-

OCP-

HRT-

EUA-

O/E-

