### PREOPERATIVE INFORMATION SHEET FOR LAPAROSCOPIC TUBAL OCCLUSION

Clinical diagnosis: unwanted fertility

Indication: unwanted fertility

### Nature of the operation:

- general anaesthesia
- pneumoperitoneum created by insufflation of carbon dioxide
- incisions made
- telescope and instruments passed into abdomen
- local anaesthestic applied to fallopian tubes
- fallopian tubes interrupted with Falope rings / clips
- incisions closed
- all tissue removed will be sent to the Department of Pathology or disposed of as appropriate unless otherwise specified
- photographic and/or video images may be recorded during the operation for education/research purpose. Please inform our staff if you have any objection.

# Benefits of the procedure: effective contraception

### Other consequences after the procedure:

- no effect on hormonal status in the presence of normal ovaries
- coitus is not affected
- irreversible method of contraception unless tubal reanastomosis done
- (may have unrelated menstruation change)

**Risks and complications** may include, but are not limited to the following:

- Women who are obese, who have significant pathology, who have undergone previous surgery or who have pre-existing medical conditions must understand that the quoted risks for serious or frequent complications will be increased.
- Anaesthetic complications
- Serious

failure to gain entry into the abdomen and to complete the intended procedure, requiring laparotomy bleeding, may require blood transfusion

uterine perforation

injuries to the bowel, bladder or blood vessels (3 in every 1000, uncommon)

one in every 12000 woman undergoing laparoscopy dies as a result of complications pelvic infection

luteal phase pregnancy (2-3 in every 1000, uncommon)

hernia at site of entry

failure, resulting in unplanned pregnancy: the lifetime failure rate is 1 in 200 (uncommon) the possibility of a future pregnancy occurring in the fallopian tube if failure occurs

• Frequent

shoulder-tip pain frequency of micturition, dysuria and urinary tract infection wound infection, pain, bruising, delayed wound healing or keloid formation numbness, tingling of or burning sensation around the scar internal scarring with adhesions

# Risks of not having the procedure: unwanted pregnancy

#### **Possible alternatives**

- other methods of contraceptions including oral or injectable hormones, intrauterine device, vasectomy
- others \_\_\_\_\_

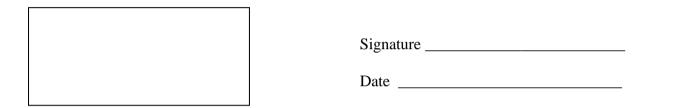
Other associated procedures (which may become necessary during the operation):

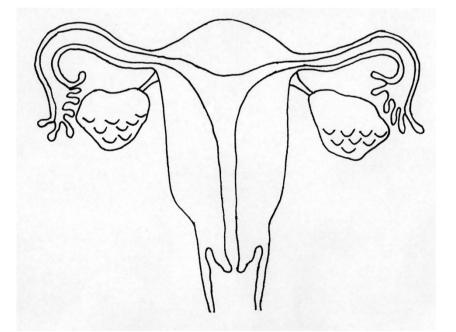
- laparotomy
- repair of damage to bowel, bladder or blood vessels

Special follow-up issue: need to use effective contraception until the next menstrual period.

Statement of patient: procedure(s) which should not be carried out without further discussion

I acknowledge that the above information concerning my operation/procedure have been explained to me and discussed with me by the medical staff and I fully understand them. I have been given the opportunities to ask questions pertinent to my condition and management and satisfactory answers have been provided by medical staff.





感觉智能 QUEEN MARY HOSPITAL	Department of Obstetrics and Gynaecology	Document No.	OGGG-0510-02-04-E (I)
		Issue Date	OCT 2014
	<u>Subject</u> Laparoscopic tubal occlusion	Next review date	OCT 2017
		Approved by	General Gynaecology Division, QMH
		Page	Page 2 of 2