

# Introduction

Indications for the operation are anxiety state, miscarriage, maternal medical condition, abnormal fetus.

# The Operation / Procedure

- 1. Priming of cervix if necessary.
- 2. Local anaesthesia + conscious sedation or general anaesthesia.
- 3. Cervical dilatation if necessary.
- 4. Insertion of the suction tube.
- 5. Uterine content evacuated under negative pressure.
- 6. All tissue removed will be sent for pathology exam or disposed of as appropriate unless otherwise specified.
- 7. Photographic and / or video images may be recorded during the operation for education / research / documentation purpose. Please inform the staff if you have any objection.

## **Preoperative Preparation**

- 1. Admit 1 day before or on same day of this "elective" operation.
- 2. Reassess may cancel the procedure if uterine size found to be too big for suction evacuation.
- 3. Anaesthetic assessment before operation. Inform your doctors about drug allergy, your regular medications or other medical conditions.
- 4. Keep fast for 6 to 8 hours before operation.
- 5. Empty bladder and change to operation clothes before transfer to operating room.
- 6. Pre-medication, intravenous line, and antibiotic prophylaxis may be required.

# **Postoperative Instruction**

# A. <u>General</u>

- 1. Mild throat discomfort or pain because of intubation.
- 2. Mild discomfort or pain over the operation site. Inform nurse or doctor if pain severe.
- 3. Nausea or vomiting are common; inform nurses if symptoms severe.
- 4. Inform nurses if more analgesics are required.
- 5. Can mobilize and get out of bed 6 hours after operation, go home on day 2.

## B. Diet

Resume diet usually 4 hours after anaesthesia when taking sips of water well.

**Common Risks and Complications** (not all possible complications are listed)

# A. <u>Anesthesia related complications</u>

- 1. Cardiovascular: myocardial infarction or ischaemia, stroke, deep vein thrombosis, pulmonary embolism, etc.
- 2. Respiratory: atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease.
- 3. Allergic reaction and shock.

# B. <u>Procedure related complications</u>

- 1. Cervical tear (1%).
- 2. Incomplete evacuation/failure of the procedure resulting in continuation of pregnancy.
- 3. Excessive bleeding (0.1%), may need blood transfusion.
- 4. Uterine perforation (0.1-0.4%) with or without trauma to surrounding organs necessitating laparoscopy / laparotomy.
- 5. Pelvic infection (1%) and adverse effect on future fertility.
- 6. Intrauterine adhesions and cervical incompetence.
- 7. Third stage complications in future pregnancy.
- 8. Adverse psychological sequelae.





### **Risk of Not Having the Procedure**

- 1. Continuation of the pregnancy which involves risk to the life or injury to the physical or mental health of the pregnant woman.
- 2. Delivery of a child who will suffer from physical or mental abnormality and being seriously handicapped.
- 3. Vaginal bleeding, abdominal pain or infection in case of incomplete miscarriage.

### Alternative Treatment

- 1. Continuation of pregnancy and support from the Birthright Society or the Mothers' Choice.
- 2. Expectant treatment for incomplete miscarriage or medical treatment for silent miscarriage.

### Things to take note on discharge

- 1. Take analgesics prescribed by your doctor if required.
- 2. Resume daily activity gradually.
- 3. May experience some vaginal bleeding and mild abdominal cramps within 2 weeks after operation.
- 4. Future contraception.

#### Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor. Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

#### Reference

Hospital Authority: "Suction Evacuation" (2021)

Smart Patient: https://www.ekg.org.hk/pilic/public/O&G\_PILIC/O&G\_SuctionEvacuation\_0315\_eng.pdf (20-07-2023)

