

GYNECARE THERMACHOICE Uterine Balloon Therapy System Patient Instructions

An appointment has been scheduled for you at _____ on _____. Please bring your procedure medications to your appointment.

Pre-Procedure Instructions

1. Take the Cytotec 200 mcg the night prior to your procedure.
2. Take an 800 mg Ibuprofen the night before the procedure, another 800mg of Ibuprofen the morning of the procedure.
3. Eat a light meal prior to the procedure. (Avoid greasy foods, fried food)
4. A urine pregnancy test will be performed in the office prior to the procedure.
5. You will be given all the procedure medications upon arrival.
6. You must have someone to drive you home after the procedure.

Procedure

1. You will be given a local anesthetic during the procedure to reduce pain. You will be awake during the entire procedure.
2. The physician and his/her staff will keep you informed of what is taking place at all times. If you have questions or concerns, please feel free to ask them at any time.
3. After the procedure you are encouraged to go home and rest for two to three days. Some patients will feel fine after the procedure. Others experience moderate to severe cramping and/or nausea. If you develop nausea or pain, please use the prescriptions you were given at the time of scheduling.

Post-Procedure

1. It is very important that you take your pain medication as prescribed. If you do not stay on top of the pain, it can quickly worsen once the pain medication and the local pain medication wear off. Continue to take Ibuprofen 800 mg every 6-8 hours with food. You should also continue to take the pain medication that was prescribed every 4-6 hours.
2. The pain medicine can make you nauseated. Take the Phenergan every 4-6 hours after the procedure as needed for nausea. This medication may make you drowsy.
3. If you have a fever greater than 100.5 or severe abdominal cramping, call the office at (208) 746-1383 ext 6510.

4. It is common to have watery, brownish, bloody discharge for 2-6 weeks after the procedure, and then a brownish/bloody discharge for another 2 weeks. You may resume all normal activities in 2-3 days. We recommend nothing vaginally (intercourse, tampon use, etc) for 6 weeks.

If you have any questions, please call the office at 208-746-1383 ext 6510.

I have received the above instructions.

Patient signature _____ Date _____

Nurse or Provider _____ Date _____