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Coordinating Committee in Obstetrics & Gynaecology

Laparoscopic Ovarian Cystectomy/Salpingo-Oophorectomy (腹腔鏡卵巢囊腫切除/腹腔鏡輸卵管卵巢切除) Document no.: PILIC0316E version3.0

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PATIENT INFORMATION FOR LAPAROSCOPIC OVARIAN CYSTECTOMY/SALPINGO-OOPHORECTOMY

Indication for surgery: ovarian cyst

Nature of operation

- General anaesthesia
- Urinary bladder catheterized
- Pneumoperitoneum created by insufflation of carbon dioxide
- Telescope and instruments passed into abdomen via incisions
- Ovarian cystectomy/salpingo-oophorectomy performed
- Specimen removed
- Wounds closed.

What to expect?

- Few small abdominal wounds
- No effect on hormonal status in the presence of normal ovarian tissue
- Possible adverse effect on future fertility

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

- Anaesthetic complications
- Bleeding, may need blood transfusion
- Wound problems
- Pelvic infection
- Injury to neighbouring organs especially the bladder, ureters and bowels
- Conversion to laparotomy
- Requiring removal of both the ovary and fallopian tube during cystectomy if bleeding excessive or absent of normal ovarian tissue
- Recurrence of ovarian cyst



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<u>Remarks</u>

The information contained is very general. There is individual variation in practice in different units. The list of complications is not exhaustive and other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor.