

Surgical management of miscarriage

Your procedure will take place in the Treatment Centre at Chelsea and Westminster Hospital which is on the Ground Floor near Lift Bank B.

Procedure date

Please arrive at

Please do not eat or drink (nil by mouth) from

Contact information

The Elizabeth Suite
Early Pregnancy and Acute Gynaecology Unit
4th Floor
Chelsea and Westminster Hospital
369 Fulham Road
London
SW10 9NH

T: 020 3315 5073 (appointments)
020 3315 5070 (specialist nurse)

Useful information

Miscarriage Association
W: www.miscarriageassociation.org.uk
T: 01924 200799
E: info@miscarriageassociation.org.uk

Patient Advice & Liaison Service (PALS)

If you have concerns or wish to give feedback about services, your care or treatment, you can contact the PALS office on the Ground Floor of the hospital just behind the main reception.

Alternatively, you can send us your comments or suggestions on one of our comment cards, available at the PALS office, or on a feedback form on our website www.chelwest.nhs.uk/pals.

We value your opinion and invite you to provide us with feedback.

T: 020 3315 6727
E: cwpals@chelwest.nhs.uk

Chelsea and Westminster Hospital
369 Fulham Road
London
SW10 9NH

T: 020 3315 8000
W: www.chelwest.nhs.uk

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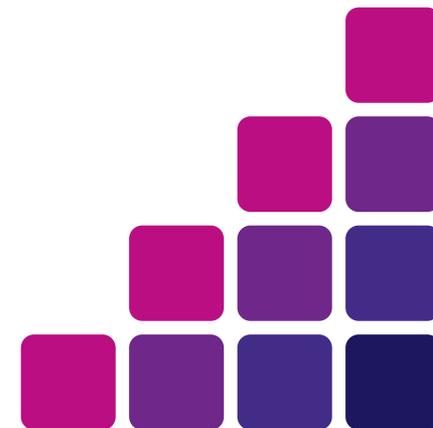
Speak to your clinician



Chelsea and Westminster Hospital **NHS**
NHS Foundation Trust

Surgical management of miscarriage

Information for patients



Surgical management of miscarriage

Following a diagnosis of miscarriage, you will be able to discuss the management options available to you. In some circumstances, surgical management may be recommended and is sometimes performed as an emergency procedure, for example if a woman is experiencing heavy bleeding due to a natural miscarriage.

The process of surgical management of miscarriage involves gently opening the cervix (neck of the womb) and removing the pregnancy from within the uterus (womb). There are some risks associated with this procedure but overall it is rare to have a major complication.

Before your operation

You will be booked to have your procedure on either a morning or afternoon operating list. We will not be able to give you the exact time of your operation as the order of the list is not set beforehand and will depend on various circumstances on the day.

Most women will have their operation in the Treatment Centre which is located on the ground floor close to liftbank B. Unfortunately, the unit is not able to accommodate partners or relatives, although there is a waiting area available.

Prior to your operation you will see a member of the gynaecology team who will discuss the procedure with you, explain possible complications and ask about your medical history. You will be asked to sign a consent form which is used to confirm you have understood the operation and the potential complications. You may be asked to have a blood test to determine your blood group and haemoglobin level.

A small number of women will have a natural miscarriage prior to their planned procedure. If you have significant bleeding before the operation, please contact the unit.

Some women may need a repeat scan to determine if the surgery is still required. If the bleeding becomes very heavy, you should attend as an emergency via the A&E department.

On the day of your operation

Surgical management usually involves having a general anaesthetic which means you will be asleep whilst the operation is performed. Depending on individual circumstances, some women will be given the option of having the procedure under local anaesthetic. This means you are awake and receive a series of injections to numb the cervix (neck of the womb) prior to the procedure.

Prior to a general anaesthetic you should be fasted (have not eaten) for a minimum period of 6 hours before to ensure your stomach is completely empty. If you are not fully fasted your procedure may need to be delayed to avoid potential complications of the anaesthetic.

If you are booked on a morning list, you should not eat or drink from midnight before (12am) on the day of surgery. You can eat and drink as normal before midnight. Please attend the Treatment Centre at 7.30am.

If you are booked on an afternoon list, you may have a light breakfast before 6am on the day of the operation but nothing to eat after this time. You can drink water up until 10am (water only 6am–10am). Please attend the Treatment Centre at 1200.

Whilst you are fasting please do not have chewing gum or smoke cigarettes (including vapour devices/e-cigarettes). If you take medication for pre-existing medical problems, take this as normal on the morning of your operation with a sip of water.

Please discuss this with the doctor you see prior to the surgery as there are a few medications that need to be stopped temporarily.

Before the operation you will be given four small tablets called Misoprostol. These tablets are inserted into the vagina prior to the operation to help soften the cervix ready for the procedure. The tablets should be inserted into the vagina in a similar way to a tampon.

If you are booked onto a morning list, please insert the tablets at 7am. If you are on an afternoon list, please insert the tablets at 11:30am.

After the tablets have been inserted it is common to get some cramps and vaginal bleeding so please wear a sanitary pad.

After your operation

After the operation you will need to recover from the anaesthetic and be observed for a short time. When you wake up you may have some abdominal pain or cramps for which you will be offered pain relief.

Once you are comfortable and have sufficiently recovered from the anaesthetic you will be able to go home. You will be given a single dose of oral antibiotics to help prevent an infection developing and some pain killers to take home with you.

After a general anaesthetic you must have another adult collect you and stay with you overnight after the procedure.

If you cannot arrange for someone to collect you please tell the early pregnancy unit team beforehand; we cannot allow patients to go home alone after an operation.

Recovery

After the operation you will have some vaginal bleeding which is usually no heavier than a period. This bleeding may go on for up to 2 weeks. During this time use sanitary towels rather than tampons and do not have sex. If you have heavy bleeding or bleeding that goes on for longer than 2 weeks, please contact the early pregnancy unit. If you have severe abdominal pain, develop a fever or offensive smelling bleeding/discharge please attend the hospital as an emergency.

You will usually have a period within 4–6 weeks of the procedure—if you have not had a period after 6 weeks, please contact the unit to arrange a follow-up.

We recommend that you take some time off work at the time of the operation and are able to provide a medical certificate for your employer if required.