



Cryotherapy Consent

The cervix is located at the opening of the uterus and in most women should be tested yearly with a pap smear. If the pap smear is abnormal, colposcopy and cervical biopsies are usually performed. When the results of the biopsies are available, your physician will discuss the various treatments methods with you. Dysplasia or CIN (cervical intraepithelial neoplasm) is an abnormality of development and organization of the cervical cells which may progress into invasive cervical cancer. Should your biopsies demonstrate cervical dysplasia (CIN), treatment may be indicated. Moderate or severe dysplasia should be treated by removing the lesion with a LEEP or cone biopsy. Mild dysplasia can be monitored with no treatment, treated with cryotherapy, LEEP or cone biopsy.

Cryotherapy or freezing of the cervix is performed by placing a cold probe against the cervix. Mild cramping may occur during the procedure. Cervical cells are destroyed by freezing and are shed from the cervix as a watery discharge. The advantage of cryotherapy is that it can be performed easily in the office. It can be used only if the abnormal cells are located on the surface of the cervix and do not involve the cervical canal. Risks or cryotherapy include but are not limited to abnormal bleeding (3%), pelvic infection (1%) or cervical stenosis or scarring of the cervix (less than 1%). After cryotherapy is completed, pap smears should be continued on a regular basis.

I have read the above consent form and understand the recommended treatment. My physician has gone over the consent form with the patient and answered any questions and explained any terms that were unfamiliar to the patient.

Patient signature: _____ Name: _____

Witness: _____ Date: _____

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