

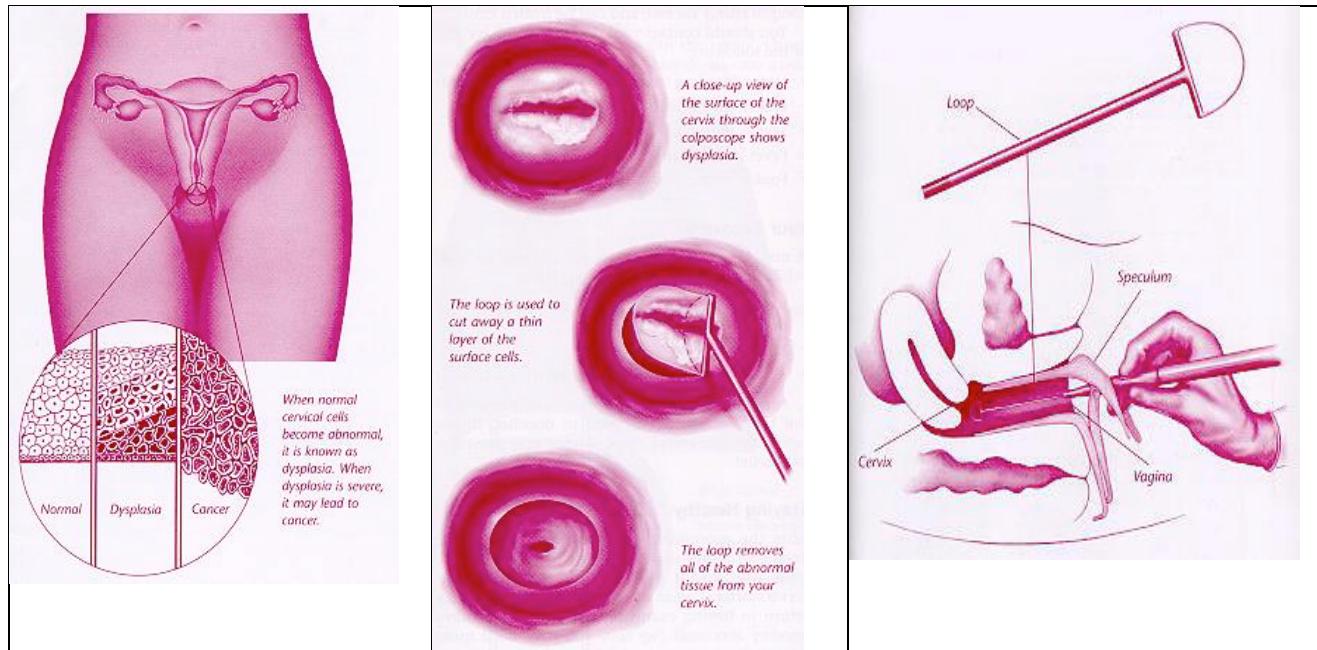
## LEEP PROCEDURE, CONE BIOPSY AND CRYOTHERAPY CONSENT

The cervix is the portion of the uterus that extends into the vagina. It is the area where squamous cells (skin) meet columnar cells (mucous membrane). Cells are taken from this area for a Pap smear to test for precancerous (potentially may progress to cancer if untreated) or cancerous changes. This is the area most prone to these changes.

If abnormal cells are found on a Pap smear, further evaluation of your cervix is necessary. Your doctor will first use a colposcope to provide a magnified view of your cervix. Small amounts of tissue may be removed from the outer cervix to better assess for any abnormality detected at the time of colposcopy. The inner cervix may also be curetted or scraped to determine whether abnormal cells are present in the canal that leads to the uterus. These procedures are called a cervical biopsy and endocervical curettage. A procedure to treat the precancerous cells may be necessary if either the biopsy or the endocervical curettage reveals precancerous tissue.

The two procedures performed at Los Olivos are cryotherapy (freezing) and excision of abnormal cells with a wire through which electrical current passes (Loop Electrical Excision Procedure or LEEP).

Cryotherapy involves freezing the external surfaces of the cervix to destroy precancerous cells, while a LEEP procedure removes the abnormal cells. A cone biopsy is another method of treating dysplasia of the cervix and is performed as an outpatient surgical procedure.



**Cervical Dysplasia**

**Appearance of the Cervix**

**LEEP Procedure**

With any of these procedures there can be complications, which include but are not limited to the following:

- Reaction to local anesthetics (serious reactions are rare).
- Bleeding either right after or several weeks after the procedure, that is heavy enough to require treatment. (Less than 1%).
- “Over healing” or scarring of the cervix so that the cervical canal narrows or closes off. Though very rare, difficulty passing menstrual flow and/or getting pregnant may result, and may take a number of visits to resolve.
- Studies show that a LEEP may be associated with problems in future pregnancy, such as difficulty holding a pregnancy due to cervical weakness (incompetent cervix). Though again rare, the risk of treatment should be weighed against the risk of developing cancer if not treated.
- There is a small chance the precancerous cervical abnormality may persist or recur. For this reason it is essential that you have a follow up visit in our office in three months for a repeat Pap smear.
- One may experience infection, pain or damage to other tissues such as the vagina or rectum.

Your physician may prescribe a period of pelvic rest including no sex, tampons, or douching, and decreased aerobic exercise.

Please call night or day if you have a fever greater than 100.5° F in the week after surgery, vaginal bleeding enough to soak one Maxi-pad per hour, or increasing pain.

Most women experience transient cramping, which is usually alleviated by non-steroidal anti-inflammatory medications like Ibuprofen or Naprosyn. Vaginal discharge or drainage is also normal for up to two weeks.

By signing this, you acknowledge the treatment options and risk of this procedure have been discussed with you. You also agree to maintain the advised follow-up schedule. Please schedule a repeat pap smear in four months.

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Signature

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Date

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Witness