Culdocentesis

A *culdocentesis* is a procedure to determine if there is blood and/or pus in the pelvis. This is a procedure that may be done when:

- A fertilized egg is suspected or implanted in the wrong place (*ectopic pregnancy*).
- Bleeding from an ovarian cyst happens.
- The caregiver needs to obtain fluid in the pelvis for culture when there is an infection of the fallopian tubes (*salpingitis*).
- Other sources of bleeding are suspected.

LET YOUR CAREGIVER KNOW ABOUT:

- Allergies.
- Medications taken including herbs, eye drops, over-the-counter medications and creams.
- Use of steroids (by mouth or creams).
- Past problems with anesthetics.
- Possibility of pregnancy (if this applies).
- History of blood clots (*thrombophlebitis*).
- History of bleeding or blood problems.
- Past surgery.
- Other health problems.

RISKS AND COMPLICTIONS OF THE PROCEDURE:

- Injury to surrounding organs in the pelvis.
- Infection.
- Bleeding from rupture of a blood vessel in the pelvis.
- Side effects or allergic reaction from the anesthetic.

PROCEDURE

This procedure is done by inserting a small needle into the area under and behind the cervix where the cervix meets the top of the wall of the *vagina* (birth canal). The *cervix* is the bottom opening of the womb (*uterus*). Usually, a small amount of local anesthesia (*novocaine*) is used to numb this area for the needle insertion. The small space located under and behind the uterus is called the cul-de-sac. When the needle enters this space, a clear fluid can be drawn into the needle (*aspirated*). If the fluid removed is bloody, it shows the caregiver that bleeding is likely. This helps confirm the presence of a bleeding ectopic pregnancy or bleeding from another source in the pelvis or abdomen.

This test may appear falsely positive if the needle has entered a small vessel and is not actually in the cul-de-sac. Sometimes the test may be negative (show clear) with a bleeding ectopic pregnancy. This happens when the cul-de-sac has been scarred because of prior surgery or infection. Your caregiver will discuss the results of your test with you.

AFTER THE PROCEDURE:

Your caregiver will have you lie down for a while to see if:

- More tests have to be done.
- You need surgery right away for a bleeding ectopic pregnancy or ovarian cyst.

The caregivers will make sure there were no complications from the procedure and that you are stable enough to go home.

HOME CARE INSTRUCTIOINS:

- Have someone drive you home.
- Follow your caregiver's instructions regarding rest, diet and returning to your regular activities.
- Only take over-the-counter or prescription medicines for pain, discomfort or fever as directed by your caregiver.
- **Do not** have sexual intercourse until your caregiver tells you it is OK.
- **Do not** use tampons or douche.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop a temperature of 100° F (37.8º C) or higher.
- You develop abdominal pain.
- You have vaginal bleeding.
- You have abnormal vaginal discharge.
- You become dizzy or pass out.

Document Released: 03/26/2002 Document Re-Released: 10/20/2009
ExitCare® Patient Information ©2011 ExitCare, LLC.