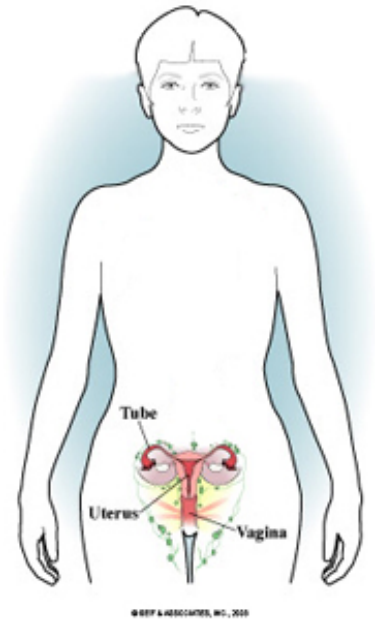
Bilateral Salpingo-Oophorectomy
(Removal of Tubes and Ovaries)

Removal of both fallopian tubes and ovaries is called a Bilateral Salpingo-oophorectomy (BSO). The fallopian tubes transport the egg from the ovary to the womb (*uterus*). The fallopian tube is also where the sperm and egg meet and become fertilized and move down into the uterus. Usually, the uterus was previously removed when doing a BSO.



Removing both tubes and ovaries will:
- Put you into the menopause. You will no longer have menstrual periods.
- May cause you to have symptoms of menopause (hot flashes, night sweats, mood changes).
- Not affect your sex drive or physical relationship.
- Cause you to not be able to become pregnant (*sterile*).

BEFORE THE PROCEDURE:
- **Do not** take aspirin or blood thinners because it can make you bleed.
- **Do not** eat or drink anything at least 8 hours before the surgery.
- Let your caregiver know if you develop a cold or an infection.
- If you are being admitted the day of surgery, arrive at least one hour before the surgery to read and sign the necessary forms and consents.
- Arrange for help when you go home from the hospital.
- If you smoke, **do not** smoke for at least 2 weeks before the surgery.
- There is a waiting room available for friends and family while you are having surgery.

LET YOUR CAREGIVERS KNOW ABOUT:
- Allergies to food or medication.
- Medications taken including herbs, eye drops, over-the-counter medications and creams.
- Use of steroids (by mouth or creams).
- Previous problems with anesthetics or numbing medication.
- Possibility of pregnancy, if this applies.
- Your smoking habits
- History of blood clots (*thrombophlebitis*).
- History of bleeding or blood problems.
- Previous surgeries.
- Other health problems.

RISKS & COMPLICATIONS OF THE PROCEDURE
All surgery is associated with risks. Some of these risks are:
- Injury to surrounding organs.
- Bleeding.
- Infection.
- Blood clots in the legs or lungs.
- Problems with the anesthesia.
- The surgery does not help the problem.
- Death.

PROCEDURE
You will change into a hospital gown. Then, you will be given an IV (*intravenous*) and a medication to relax you. You will be put to sleep with an anesthetic. Any hair on your lower belly (*abdomen*) will be removed, and a catheter will be placed in your bladder. The fallopian tubes and ovaries will be removed either through 2 very small cuts (*incisions*) or through large incision in the lower abdomen.

AFTER THE PROCEDURE:

- You will be taken to the recovery room for 1 to 3 hours until your blood pressure, pulse and temperature are stable and you are waking up.
- If you had a laparoscopy, you may be discharged in several hours.
- If you had a laparoscopy, you may have shoulder pain for a day or two from air left in the abdomen. The air can irritate the nerve that goes from the diaphragm to the shoulder.
- You will be given pain medication as is necessary.
- The intravenous and catheter will be removed.
- Have someone available to take you home from the hospital.

HOME CARE INSTRUCTIONS

- Only take over-the-counter or prescription medicines for pain, discomfort or fever as directed by your caregiver.
- **Do not** take aspirin. It can cause bleeding.
- **Do not** drive when taking pain medication.
- Follow your caregiver's advice regarding diet, exercise, lifting, driving and general activities.
- You may resume your usual diet as directed and allowed.
- Get plenty of rest and sleep.
- **Do not** douche, use tampons, or have sexual intercourse until your caregiver says it is OK.
- Change your bandages (*dressings*) as directed.
- Take your temperature twice a day and write it down.
- Your caregiver may recommend showers instead of baths for a few weeks.
- **Do not** drink alcohol until your caregiver says it is OK.
- If you develop constipation, you may take a mild laxative with your caregiver's permission. Bran foods and drinking fluids helps with constipation problems.
- Try to have someone home with you for a week or two to help with the household activities.
- Make sure you and your family understands everything about your operation and recovery.
- **Do not** sign any legal documents until you feel normal again.
- Keep all your follow-up appointments.

SEEK MEDICAL CARE IF:

- There is swelling, redness or increasing pain in the wound area.
- Pus is coming from the wound.
- You notice a bad smell from the wound or surgical dressing.
- You have pain, redness and swelling from the intravenous site.
- The wound is breaking open (the edges are not staying together).
- You feel dizzy or feel like fainting.
- You develop pain or bleeding when you urinate.
- You develop diarrhea.
- You develop nausea and vomiting.
- You develop abnormal vaginal discharge.
- You develop a rash.
- You have any type of abnormal reaction or develop an allergy to your medication.
- You need stronger pain medication for your pain.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop an unexplained temperature above 100º F (37.8º C).
- You develop abdominal pain.
- You develop chest pain.
- You develop shortness of breath.
- You pass out.
- You develop pain, swelling or redness of your leg.

- You develop heavy vaginal bleeding with or without blood clots.

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