D&C, Diagnostic

D&C is a procedure done to test *(evaluate*) the tissues inside the womb *(uterus*). It may be done to evaluate abnormal bleeding, or is also done as a staging procedure for cancer to determine the best possible treatment. During this test, tissue is gently scraped from inside the uterus. These tissue samples are sent to a specialist in looking at cells and tissue samples *(pathologist*). The pathologist will provide a report to your caregiver who will help him or her decide if further treatment is necessary.

COMPLICATIONS

- Putting a hole (*perforation*) in the uterus.
- Excessive bleeding after the D&C.
- Infection of the uterus.
- Developing adhesions inside the uterus later causing abnormal bleeding or amenorrhea.
- Complications from general anesthetic.

HOME CARE INSTRUCTIONS

- Do not drive for 24 hours.
- Wait one week before returning to strenuous activities.
- Take your temperature two (2) times a day for 4 days and record it. Provide these temperatures to your caregiver if they are abnormal (above 98.6° F or 37.0° C).
- Avoid long periods of standing, and do ***no heavy lifting (more than 10 pounds), pushing or pulling.***
- Limit stair climbing to once or twice a day.
- Take frequent rest periods.
- You may resume your normal diet.
- Drink plenty of fluids (6 to 8 glasses a day).
- Eat a well-balanced diet. Daily portions of food from the meat, milk, vegetable, and bread groups are necessary for your health.
- You should return to your usual bowel function. If constipation should occur, you may:
  - Take a mild laxative
  - Add fruit and bran to your diet
  - Drink more fluids
- Do not douche, use tampons, or have intercourse until after your follow-up appointment, unless your caregiver approves.
- No swimming, tub bath, or hot tub for two weeks.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- If a prescription was given, follow your caregiver's directions.

HEALTH PRACTICES

- A PAP smear is done to screen for cervical cancer.
  - The first PAP smear should be done at age 21.
  - **Between ages 21 and 29**, **PAP smears are repeated every 2 years**.
  - Beginning at age 30, you are advised to have a PAP smear **every 3 years as long as your past 3 PAP smears have been normal.**
  - Some women have medical problems that increase the chance of getting cervical cancer. Talk to your caregiver about these problems. It is especially important to talk to your caregiver if a new problem develops soon after your last PAP smear. **In these cases, your caregiver may recommend more frequent screening and Pap smears.**
  - The above recommendations are the same for women who **have** or **have not** gotten the vaccine for HPV (Human Papillomavirus).
  - If you had a hysterectomy for a problem that was **not** a cancer or a condition that could lead to cancer, then you no longer need Pap smears.
  - If you are between ages 65 and 70, and you have had normal Pap smears going back 10 years, you no

longer need Pap smears.
  - If you have had past treatment for cervical cancer or a condition that could lead to cancer, you need Pap smears and screening for cancer for at least 20 years after your treatment.
- Continue monthly self-breast examinations. Your caregiver can provide information and instructions for self-breast examination.

SEEK MEDICAL CARE IF:

- Bleeding is heavier than a normal menstrual cycle.
- An oral temperature of 100.4° F (38° C) or higher develops, or as your caregiver suggests.
- You have increasing cramps or pain not relieved with medication.
- You develop abdominal pain which does not seem to be related to the same area of earlier cramping and pain.
- You are light headed, unusually weak, or have fainting episodes.
- You develop pain in the shoulder strap areas.
- You have foul smelling vaginal discharge.

Document Released: 09/27/2006 Document Re-Released: 03/14/2011
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