

**PREOPERATIVE INFORMATION SHEET FOR
LLETZ (Large Loop Excision of Transformation Zone)**

Clinical diagnosis: _____

Indication for surgery: high-grade squamous intraepithelial lesion of cervix / persistent low-grade squamous intraepithelial lesion of cervix / _____

Nature of the procedure:

- all ornaments and metal objects, e.g. wrist watch, earrings, have to be removed before the procedure
- colposcopic examination of the cervix to identify abnormal area
- local anaesthesia OR general anaesthesia
- an electro-surgical loop is used to cut out the transformation zone of the cervix
- haemostasis with ball electrode +/- application of Monsel's solution
- all tissue removed will be sent to the Department of Pathology or disposed of as appropriate unless otherwise specified
- photographic and/or video images may be recorded during the operation for education/research purpose. Please inform our staff if you have any objection.

Benefits of the procedure: pathological diagnosis and treatment

Other consequences after the procedure: may experience some vaginal bleeding and lower abdominal discomfort within 2-3 weeks after the operation

Risks and complications may include, but are not limited to the following:

- Women who are obese, who have significant pathology, who have undergone previous surgery or who have pre-existing medical conditions must understand that the quoted risks for serious or frequent complications will be increased.
- Anaesthetic complications
- Serious
 - injury to surrounding organs, including urinary bladder and bowel (uncommon)
 - electrosurgical injury – accidental burning or cutting of normal tissue (uncommon)
 - may have increased risks of preterm delivery, low birthweight and premature rupture of membranes, but there appears to be no significant increase in perinatal mortality
 - recurrence of cervical intraepithelial lesion (up to 1 in 10, common)
 - secondary haemorrhage (1-2 in every 100, common)
 - cervical stenosis (1-2 in every 100, common)
- Frequent
 - bleeding
 - infection (1-3 in every 100, common)

Risks of not having the procedure: persistence of the disease or progression to cancer of cervix

Possible alternatives

- cone biopsy
- others _____

Other associated procedures (which may become necessary during the operation): usually none

Other advice

- avoid swimming, intercourse and use of tampon for 6 weeks after the procedure to reduce the risk of wound infection
- attend Accident and Emergency Department in a nearby hospital immediately if vaginal bleeding becomes heavy
- there is no evidence that a single treatment has any adverse effect on a woman's future fertility

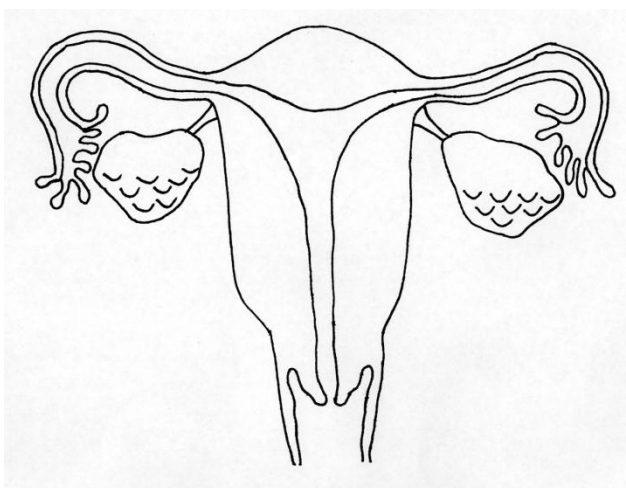
Any special follow up issue: regular cervical smear follow-ups


Statement of patient: procedure(s) which should not be carried out without further discussion

I acknowledge that the above information concerning my operation/procedure have been explained to me and discussed with me by the medical staff and I fully understand them. I have been given the opportunities to ask questions pertinent to my condition and management and satisfactory answers have been provided by medical staff.

Signature _____

Date _____



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