

# Uterine Fibroid Embolization

## Discharge Instructions

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### Activity

- **Exercise:** Take it easy and slowly increase your activity over the next three to four days. While you will progressively feel better, you can anticipate a lack of energy, and you should rest when you are tired.
- **Shower:** You may only shower for the next 7.
- **Sexual Relations:** Do not place anything (tampons or intercourse) into the vagina for 2 weeks. You may have unrestricted activity, including sexual relations and exercise, **two weeks** after the procedure.
- **Date to return to work:** You will need up to 1 week off from work following the procedure.
- **Driving:** Do not drive until you are no longer taking prescription pain medications (Percocet). This medication may make you sleepy. You should not operate any machinery while you are on these medications.
- **Other limitations:** No heavy lifting (greater than 10 lbs.), pushing or pulling for 72 hours.

### Radial Puncture Site

- The arterial puncture site is at the wrist region and is covered with a bandage. You can remove the bandage in 24 hours.
- You may shower in 24 hours.
- Observe the site. Some bruising is normal. As this heals, the bruising may spread out over several days. You may feel a small knot, about the size of a large pea, under the skin of the puncture site. This is normal and will fade in a few weeks.
- If you notice any swelling or active bleeding from the puncture site, apply firm pressure to the site and call 911 for help.

### Menstrual Periods, Vaginal Discharge and Spotting

- It is normal to have a brown or brownish-red vaginal discharge or spotting after the embolization. This may continue for a few weeks or until your first period. Occasionally, patients can have a clear watery discharge for several weeks after the procedure. This does not indicate infection. Use a sanitary napkin until any discharge stops. However, a **thick or foul-smelling discharge, particularly accompanied by a fever, shaking, chills, or pelvic pain may indicate infection.** You need to contact the Radiologist or your gynecologist.
- Your next menstrual period may start early or you may skip a period or two. The period may be better right away or some patients may not improve for 2 to 3 cycles.
- **DO NOT** use tampons for the **following two periods. Use sanitary napkins only for the following 2 periods.**
- You may have more discomfort with your first and possibly the second menstrual period. The cramping should resolve as the fibroids shrink over the next several months.
- Fibroids are estrogen-driven. As they shrink, you may have a sudden change in hormones that may cause mild depression to "hot flashes." This is usually self-limiting and requires no treatment.

### Nausea and Vomiting

- Another frequent side effect of UFE is nausea and vomiting.
- This may be caused by the necrosis of the fibroid or as a result of the pain control medication.
- The nausea can usually be controlled by medications, we provide a prescription for nausea medication.

### Diet

- No restrictions.
- Increase fluids and fiber.

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## Constipation Management

The pain medications you were given during your procedure and upon discharge tend to cause constipation.

**Constipation in the days after your procedure will increase your abdominal discomfort.** Please follow these instructions to keep your bowel function regularly after your procedure:

- Drink plenty of liquids to keep your body hydrated and to help keep your bowels functioning properly.

### The day before procedure and day of the:

- Take Colace 100mg capsules (stool softener to prevent constipation). The generic name for this medication is docusate sodium. Take one tablet every 12 hours while taking any narcotic pain medication (including the use of a fentanyl patch).

### Day 2 after the procedure:

If you have not had a bowel movement by the following day: Take two more tablets of Senokot-S in the morning.

### Day 3 after the procedure:

If you have not had a bowel movement by midday, take two tablespoons of Milk of Magnesia at dinnertime and bedtime.

If you have not had a bowel movement by the following day (day 4): Please contact us for further instructions at (540) 686-1600 or follow the instructions at the end of this discharge sheet for after-hours contact information.

## Medication Schedule

- Fentanyl Patch 25 mcq, remove after 48 hours but may keep 72 hours if the pain is not well managed.
- Percocet 1-2 tabs every 6 hours for breakthrough pain. Next dose: \_\_\_\_\_
- **Aleve 2 times a day for seven days without stopping. Purchase over the counter before your procedure.**
- Promethazine 12.5 mg 4 times daily as needed for nausea and vomiting.
- **Colace as directed by the bottle. Purchase over the counter before your procedure.**

## Potential Problems

- Symptoms that may indicate problems:

- Swelling or active bleeding from puncture sites
- Pain arising several days or weeks after the initial pain has resolved
- Elevated temperature, greater than 101 degrees Fahrenheit
- Irregular vaginal discharge that is foul-smelling or copious (may indicate infection or partial passage of fibroid requiring gynecologic evaluation)

- If these symptoms occur, contact the Radiologist or your gynecologist immediately.

## Follow-up Care

- Schedule an appointment for two weeks post-procedure.
- Schedule an appointment with your gynecologist one month after the procedure.

## Physician Contact Information

- **If you have a problem that requires immediate attention, you should go to the emergency room or call 911.**
- **For after-hour emergencies,** call 540-536-8000 and ask the hospital operator to contact the Interventional Radiologist on-call.