

Care at home

Remove the bandage from the needle site the day after the procedure. You can then shower.

Take pain medicine every 4 to 6 hours until the pain is mild or gone.

If you feel sick (nauseated), take anti-nausea medicine.

After 2 days, slowly return to your daily activities as you feel able.

For one week:

- Do not lift heavy objects.
- Do not do any strenuous activities, heavy housework, or exercise.

Locations

Abbotsford-Regional Hospital 604-851-4866
Medical Imaging 2nd Floor, Fraser Wing
32900 Marshall Road, Abbotsford

Lions Gate Hospital 604-984-5775
Medical Imaging, Lower Level
231 East 15th Street, North Vancouver

Royal Columbian Hospital 604-520-4640
Medical Imaging, Columbia Tower
330 E. Columbia Street, New Westminster

Surrey Memorial Hospital 604-588-3305
Medical Imaging, 1st Floor, Lower Level
13750 96th Avenue, Surrey

UBC Hospital 604-822-7076
Medical Imaging, Main Floor
2211 Westbrook Mall, Vancouver

When to get help

You might have watery or mucus-like fluid coming from your vagina for a few weeks up to 6 months after. This is normal and should stop. If you notice pieces of tissue, see your gynecologist as soon as you can.

If you notice bleeding at the needle site:

- Press down firmly about 1 to 2 cm. (1 in.) above the needle site for 15 minutes.
- If bleeding does not stop, call 9-1-1.

Also, go to the nearest Emergency Department or call 9-1-1 if you have:

- Shortness of breath all of a sudden, or
- Chest pain

See your doctor as soon as possible if you notice any of the following:

- Fever above 38.5°C (101°F)
- Pain, swelling, redness, or coolness in the leg or foot (arm or hand if an artery in the arm was used)
- Abdominal pain or cramping that does not go away

HealthLinkBC

8-1-1

Call any time you have any questions or concerns. HealthLinkBC is open 24 hours.

Available in 130 languages. For an interpreter, say your language in English. Wait until an interpreter comes on the phone.

www.fraserhealth.ca – www.vch.ca

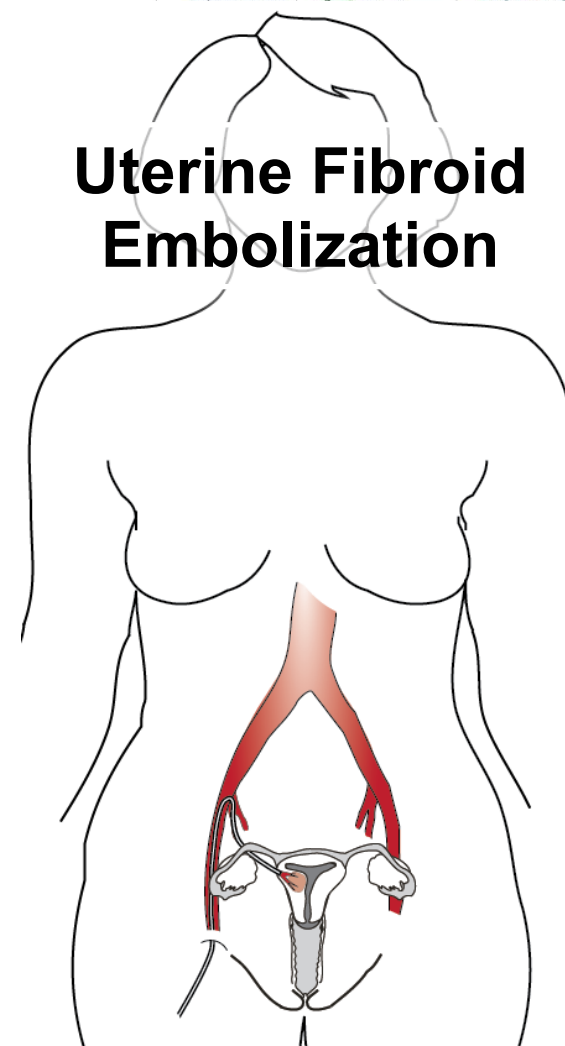
This information does not replace the advice given to you by your healthcare provider.

July 2017

FH Catalogue # 264546
VCH Catalogue # GG.580.U84



Uterine Fibroid Embolization



Follow-up Instructions/Appointment:

- Make an appointment to see the doctor who sent you for this procedure to get any further instructions.

What is a Uterine Fibroid Embolization?

This is a procedure that closes off the blood supply to fibroids that are inside the uterus (called 'embolization'). When we slow down or block the blood supply, the fibroid stops growing. Any bleeding and or pressure you have should be less or go away.

Who does the Uterine Fibroid Embolization?

It is done by an interventional radiologist (a doctor who specializes in using x-ray, ultrasound, CT scan, and medical resonance imaging to guide diagnosis and treatment).

Can I bring a relative or friend?

Yes, they can stay with you before and after the procedure. However, for reasons of safety and regulations, they cannot be in the room during the procedure. We will tell you where family members can wait.

What happens before the procedure?

Our Medical Imaging Department contacts you with specific instructions on how to prepare for this procedure.

You must arrange for a 'responsible adult' to drive you home when leaving the hospital.

How long will it take?

Plan to stay in the hospital overnight. Bring only those items you will need for the night.

The procedure usually takes about 1 to 2 hours. Everyone is different. We cannot predict exactly how long your procedure will take.

What happens during the procedure?

- We start an intravenous in your arm so we can give pain and other medicines during the procedure.
- We might ask you for a urine sample to do a pregnancy test.
- We put a small flexible tube (urinary catheter) into your bladder to drain urine during the procedure.
- The radiologist injects numbing medicine to 'freeze' the area where a needle goes through the skin into the artery.
- The radiologist guides a tiny, flexible tube (an intravenous catheter) to the uterine artery that supplies blood to the fibroid. X-ray dye is injected to show the blood supply to the uterus.
- Small particles are injected through the intravenous catheter into the arteries of the fibroid, blocking blood supply.
- Once the tube is removed, the radiologist puts pressure over the area to stop any bleeding.

Does it hurt?

It might sting or burn as the numbing medicine is injected.

After the procedure, you might have some tenderness and bruising where the tube went through the skin. Most women have some pelvic pain or cramping for the first 6 to 10 hours. Your intravenous will be connected to a machine with pain medicine in it. You give yourself pain medicine as you need it. The nurse shows you how to use it. Some women feel sick to the stomach (nausea). Let the nurse know so you can get medicine for this.

What happens afterwards?

We move you to our recovery area. You stay here for 4 to 6 hours. A nurse checks you and the needle site to make sure there is no bleeding. You then move to a nursing unit for the night.

Are there any risks or complications?

Possible complications include:

- bleeding or blood clots at the site
- allergic reaction to x-ray dye
- infection
- damage to other tissue if particles go to the wrong place (mis-embolization)