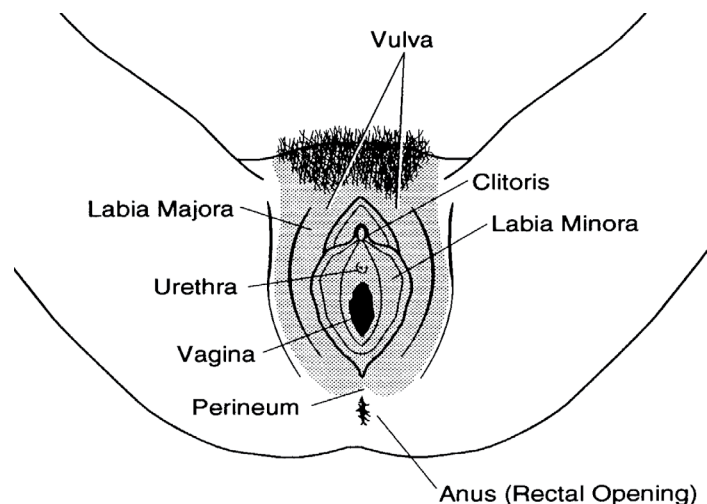


Partial Vulvectomy

The vulva is the outside part of a woman's sexual organs. This includes the inner lips (labia minora), outer lips (labia majora) and the clitoris. If abnormal cells (dysplasia) are found in this area, a partial vulvectomy is done to remove the affected area of the vulva.

Symptoms of dysplasia may include:

- Itching of the vulva
- Change in color in the skin of the vulva
- Burning sensation on the vulva when you urinate
- Change in a mole or birthmark on the vulva
- Lump or mass on the vulva



Partial Vulvectomy

The most common treatment for dysplasia of the vulva is a surgery called a partial vulvectomy. Your doctor will decide how much tissue from the vulva will need to be removed to best treat your condition. The amount of tissue removed will depend on the size of the area that is affected.

It is normal to have questions about your surgery. This handout gives you information about what will happen to you before, during and after your surgery. If you still have questions, ask your doctor or nurse for more information.

This handout is for informational purposes only. Talk with your doctor or health care team if you have any questions about your care.

Before Surgery

Talk to your nurse or doctor about any medicines you take to thin your blood, prevent clots or manage your diabetes. These may need to be adjusted before surgery. Call your nurse or doctor if you have any questions.

If you take aspirin or medicines like aspirin for arthritis pain, your doctor may have you take a different medicine in the weeks before your surgery or procedure.

You will be told when your scheduled surgery date is and where to check in when you get to the hospital.

If your surgery or procedure is canceled for any reason, call your doctor because you may need to restart the medicines while you wait for your surgery to get scheduled again.

Day of Surgery

Before your surgery, a nurse will ask you questions about your health and your surgery. These questions may be asked in the pre-operative care areas several times by different team members.

- You will be asked to not wear or remove these items the day of surgery:
 - ▶ Nail polish
 - ▶ Make-up
 - ▶ Jewelry
 - ▶ Hair clips
 - ▶ Dentures or partial plates
 - ▶ Contact lenses or eyeglasses
 - ▶ Hearing aids
- You may have 1 to 2 family members visit you while in the pre-operative area.
- The nurse will answer any questions you or your family may have and tell them where to wait while you are in surgery.
- You will meet your anesthesia team before surgery.
- You will receive an intravenous (IV) catheter in the pre-operative area.

Partial Vulvectomy

During Surgery

- Your doctor will tell you how long your surgery may take.
- If your surgery takes longer than you were told, it does not mean that anything is wrong.
- Your family will be updated on how you are doing. After your surgery is over, the surgeon or an assistant will call or come to the waiting area to talk with your family in a private room.
- During your surgery, your vital signs (blood pressure, temperature, pulse and breathing rate) will be watched closely.
- You will be positioned on the operating room table after you are asleep.

After Surgery

Once your surgery is over, you will be taken to the Post Anesthesia Care Unit (PACU). You will recover for 1 to 2 hours before returning to the pre-operative area if you are going home the same day. The following is a list of what to expect when you wake up after surgery:

- Your pulse and the amount of oxygen in your blood will be checked. If needed, you may be given oxygen through small tubes inside your nose called a nasal cannula.
- You may feel cold. This is normal if you have had general anesthesia.
- Tell your nurse if you have pain and she will give you medicine to help make you more comfortable.
- A pad will be placed between your legs to absorb drainage, if you have any.
- Your nurse will review your discharge instructions with you before you leave the hospital. These may include:
 - ▶ An appointment to see your doctor
 - ▶ Important phone numbers
 - ▶ Signs/symptoms of infection and what to do if you have these problems
 - ▶ Directions for incision care
 - ▶ A list of current medicines and new prescriptions
 - ▶ Information on what activities will help you heal and what you may do during your recovery from surgery

Partial Vulvectomy

Sexuality After Surgery

- You may still have sexual intercourse after this surgery, but **you must wait until your doctor tells you that you are completely healed** and it is okay for you to have sex.

Care at Home

Your health care team will help you learn how to care for yourself at home. Here are a few reminders of what you can and cannot do. Get plenty of rest at home and do not overdo it. A good rule to follow is if you do not feel like it, do not do it.

- Limit your activities for 4 to 6 weeks.
- Do not drive while taking narcotic pain medicine. If you cannot sit comfortably in a car, do not drive.
- No strenuous activities or exercises.
- Take the stairs slowly. Go one step at a time.
- It is important to keep your incisions clean and dry. It is okay to take a shower. Use gentle soap and water. Pat yourself dry with a clean towel.
- It may be helpful to use a hair dryer on the cool setting to dry your incisions.
- After a bowel movement, use a spray or squirt bottle or a shower head to clean the area. The hospital should discharge you with a sitz bath or a peri-bottle.
- Pat dry the incision area after toileting or showering. No rubbing.
- Wear loose fitting clothes and cotton underwear (not wearing underwear is also fine). **Do not** wear pantyhose and girdles.
- Put nothing in the vagina until your doctor tells you it is okay. No tampons, no douche or no intercourse (sex) while you recover.
- Sit no more than 30 minutes at a time.
- Sit with your legs uncrossed.
- Your stitches will not need to be removed. They will dissolve and fall out on their own.
- Sometimes incisions separate. If this happens, do not be alarmed. Call your doctor and you will be given directions about what you need to do.

Call your doctor if you have any of the following problems:

- Redness or swelling or skin separation from the incision
- Pus from the incision
- Fever of 100.4 degrees Fahrenheit (38 degrees Celsius) or higher
- Vaginal discharge with a bad smell
- Severe emotional changes such as mood swings or depression
- Pain, warmth, tenderness or swelling in the legs
- Problems urinating or with bowel movements
- Nausea or vomiting
- Any other questions or concerns

It is important to keep your doctor appointment that is scheduled 3 to 4 weeks after your surgery.