PREOPERATIVE DIAGNOSIS:, Desires permanent sterilization., POSTOPERATIVE DIAGNOSIS: , Desires permanent sterilization., PROCEDURE: , Laparoscopic tubal ligation, Falope ring method., ANESTHESIA:, General., ESTIMATED BLOOD LOSS: , 10 mL., COMPLICATIONS: , None., INDICATIONS FOR SURGERY: A 35-year-old female, P4-0-0-4, who desires permanent sterilization. The risks of bleeding, infection, damage to other organs, and subsequent ectopic pregnancy was explained. Informed consent was obtained., OPERATIVE FINDINGS: , Normal appearing uterus and adnexa bilaterally., DESCRIPTION OF PROCEDURE:, After administration of general anesthesia, the patient was placed in the dorsal lithotomy position, and prepped and draped in the usual sterile fashion. The speculum was placed in the vagina, the cervix was grasped with the tenaculum, and a uterine manipulator inserted. This area was then draped off the remainder of the operative field., A 5-mm incision was made umbilically after injecting 0.25% Marcaine, 2 mL. A Veress needle was inserted to confirm an opening pressure of 2 mmHg. Approximately 4 liters of CO2 gas was insufflated into the abdominal cavity. The Veress needle was removed, and a 5-mm port placed. Position was confirmed using a laparoscope. A second port was placed under direct visualization, 3 fingerbreadths suprapublically, 7 mm in diameter, after 2 mL of 0.25% Marcaine was injected. This was done under direct visualization. The pelvic cavity was examined with the findings as noted above. The Falope rings

were then applied to each tube bilaterally. Good segments were noted to be ligated. The accessory port was removed. The abdomen was deflated. The laparoscope and sheath was removed. The skin edges were approximated with 5-0 Monocryl suture in subcuticular fashion. The instruments were removed from the vagina. The patient was returned to the supine position, recalled from anesthesia, and transferred to the recovery room in satisfactory condition. Sponge and needle counts correct at the conclusion of the case. Estimated blood loss was minimal.