

## Partial Vulvectomy

MRN:

NAME:

Date of Procedure:

DOB:

Attending:

Dictating:

PREOPERATIVE DIAGNOSIS: Vulvar intraepithelial neoplasm 3.

POSTOPERATIVE DIAGNOSIS: Vulvar intraepithelial neoplasm 3.

PROCEDURE: Exam under anesthesia and partial vulvectomy.

SURGEON:

ASSISTANT:

ANESTHESIA:

ESTIMATED BLOOD LOSS:

FLUIDS:

URINE OUTPUT:

COMPLICATIONS:

CONDITION:.

FINDINGS:

Exam under anesthesia revealed a midline butterfly-shaped raised white lesion involving the entire perineum. The lesion approaches the hymenal ring, but there was no evidence of extension into the vagina. The lesion extends posteriorly over the perineal body but does not extend to the anus. There were no palpable masses or abnormalities on bimanual exam. Rectovaginal exam was confirmatory.

### DESCRIPTION OF PROCEDURE:

After informed consent was obtained the patient was taken to the operating room where anesthesia was administered and found to be adequate. The patient was then positioned in the dorsal lithotomy position in Allen stirrups. Exam under anesthesia was then performed yielding the above noted findings. The patient was then prepped and draped in the normal sterile fashion. After injection of .25% marcaine, the scalpel was then used to incise the outlined skin, taking care to leave a 5mm wide margin. The dermis and underlying subcutaneous tissue was excised using Bovie electrocautery. The excision bed was cauterized to obtain excellent hemostasis. The endopelvic fascia was reinforced with 2-0 Polysorb, rebuilding the perineal body. The skin edges were closed with vertical mattress sutures of 2-0 Polysorb. Excellent hemostasis was noted. The patient was awakened in the operating room. She tolerated the procedure well. All instrument, sponge and needle counts were correct x2.

ATTESTATION STATEMENT: Dr. \_\_\_\_\_ was present, scrubbed, and actively participated throughout the entire procedure.