Dilation and Evacuation

PREOPERATIVE DIAGNOSIS: Intrauterine fetal demise at 16 weeks 3 days. POSTOPERATIVE DIAGNOSIS: Intrauterine fetal demise at 16 weeks 3 days.

PROCEDURE: Dilation, evacuation and curettage.

SURGEON: ASSISTANT: ANESTHESIA: INTRAVENOUS FLUIDS:

ESTIMATED BLOOD LOSS:

URINE OUTPUT: COMPLICATIONS: SPECIMENS: Products of conception. DISPOSITION: Stable to recovery room

FINDINGS: Exam under anesthesia revealed 16 week size uterus. Normal endometrial stripe was noted on ultrasound at the end of the procedure. Prior to sending the specimen to pathology, the four extremities, calvarium and thorax were identified in the products of conception.

DESCRIPTION OF PROCEDURE:

The patient was taken to the operating room where general anesthesia was administered. She was then prepped and draped in the dorsal lithotomy position in candy cane stirrups in a sterile fashion. Five laminaria dilators were removed from the cervix as well as two 4 x 4 gauze, both of which had been placed the day prior to surgery for cervical dilation.

The speculum was placed in the vagina, the anterior lip of the cervix was grasped with a single tooth tenaculum. Under ultrasound guidance, a #10 suction cannula was used to puncture the amniotic membrane and drain amniotic fluid. Large Sopher forceps were then used to remove the intrauterine contents until the uterine cavity was emptied. Gentle curettage was performed to gritty texture and then suction was performed to complete the procedure with confirmation of a normal endometrial stripe on ultrasound as noted above.

At this time moderate bleeding was noted so the patient was given 0.2mg intravenous Methergine with subsequent decrease in bleeding.

The speculum, tenaculum and all other instrumentation were then removed from the patient's vagina. All sponge, lap, needle counts were correct x2. The patient tolerated the procedure well and was transferred to the recovery room awake, alert and breathing independently in stable condition.

Dr. was scrubbed, present and participated throughout the entire procedure.