

LEEP INSTRUCTIONS

The purpose of the Loop Electrosurgical Excision Procedure (LEEP) is to remove from the cervix or vagina abnormal tissue using a loop electrode. Unlike other ways of treating precancerous lesions of the cervix, LEEP removes the abnormal tissue without destroying it. A pathologist can then examine the removed tissue. Very little of the normal tissue is removed.

Advantages of LEEP

1. LEEP can be done in your doctor's office.
2. The procedure is very quick.
3. There is very little bleeding afterwards.
4. The procedure removes more abnormal tissue than freezing (cryosurgery) removes.

When you come in for the LEEP, you will be asked to sign a consent form. The procedure will be scheduled about one week after your last period. LEEP cannot be performed during your period or if you have an infection of the cervix.

Before you come in the office for the LEEP procedure:

1. Make sure you eat breakfast or lunch. Make sure you do not skip your meal prior to the procedure.
2. One hour prior to your procedure, take two Advil, Motrin, Extra-Strength Tylenol, or Aleve.
3. Have someone drive you to the office and take you home if you are able to arrange it. It is not mandatory.

You will be placed in a chair that tilts you back automatically. This table tilts back further than a regular table so that the doctor can use a microscope for the procedure. A speculum will be inserted into the vagina and your cervix will be looked at by the doctor using a colposcope (microscope). A vinegar and maybe an iodine solution will be applied to the cervix to help identify abnormal tissue. A local anesthetic will be used to numb your cervix. The abnormal tissue will be removed with a thin wire loop that cuts through the tissue. The entire procedure takes about 15-20 minutes to complete.

After the LEEP is performed:

1. You may have some discomfort (mild cramping) for several hours after the LEEP.
2. You may have some heavy bleeding right after the procedure. Please contact the office if you soak a Pad in ½ hour or more. A brownish-black discharge for the first week is normal.
3. Avoid heavy lifting for 3-4 weeks.
4. Do not use tampons for 4 weeks. Use sanitary pads to protect your clothing.
5. No intercourse for 4 weeks.
6. Shower rather than take tub baths, and no swimming for 4 weeks.
7. If you develop bleeding with clots, call the office.
8. If you have severe abdominal pain, fever, or a foul-smelling discharge, please call the office.
9. Always wipe perineal area from front to back after going to the bathroom.
10. Return to the office in 2 weeks for a post-op exam.

If you have any questions or if any problems arise, please do not hesitate to call the office at 703-370-0400