



Mersey and West Lancashire  
Teaching Hospitals  
NHS Trust

## **PATIENT INFORMATION**

# **Surgical Intervention Following a Miscarriage**



## **ABOUT THE PROCEDURE**

Surgical management of miscarriage can be offered for the diagnosis of missed miscarriage up to 12 weeks, anembryonic pregnancy, incomplete miscarriage and retained products of conception following failed expectant or medical management of miscarriage.

The products if over a certain diameter may increase the risk of heavy bleeding or infection, therefore a surgical procedure called suction aspiration will be necessary to evacuate the uterus.

This will involve a light general anaesthetic. The journey in theatre last approximately 1 hour. Once you are asleep the procedure will take approximately ten / fifteen minutes.

Written consent will be required advantages and disadvantages of the procedure will be discussed.

For some women it may be necessary to prepare the cervix by placing four tablets into the vagina to soften the cervix and enable easier dilation a few hours prior to surgery.

The cervix is the opening to the womb and once dilated the curettes can be inserted and suction applied.

The uterus is checked once the procedure is finished to ensure the bleeding is minimal.

## **RISKS:**

- As with all types of surgery there is a 10% risk of infection.
- There is a less than 1% risk of the uterus or bowel being

perforated during the procedure. If this occurs, it may lead to laparotomy, ie abdominal opening to repair perforation.

- There is a less than 1% risk of trauma being caused to the cervix which may require repair.
- There is a risk of heavy bleeding per vagina and a minimal risk of requiring a blood transfusion as a result.
- Associated risks of general anaesthesia.
- The treatment may be unsuccessful. In 3% of cases, products of conception may still be retained, a repeat procedure may be required.

## **BENEFITS OF SURGICAL INTERVENTION**

1. The management is resolved relatively quickly.
2. It minimizes hospital visits.
3. Psychologically acceptable to most women.
4. Can usually be performed as day case surgery.
5. Allows for the histological testing of the products of conception. Please be aware this does not give us a reason for why miscarriage has occurred.

## **ALTERNATIVES:**

There are alternative methods of managing miscarriage; these include expectant or wait and see method or medical management. However, the methods offered to women are dependent on the individual clinical situation.

Patient information literature is available within the EPAU/E Ward explaining in more detail the alternative methods of management.

## **FOLLOWING THE PROCEDURE**

You may experience some cramping like pains. Oral analgesia can be taken once awake if required.

Sips of water are initially encouraged and once you feel ready toast and a hot drink will be offered. For a short time, the staff will monitor any vaginal bleeding, along with your temperature, blood pressure and pulse.

You can expect to stay in the unit for at least 2 hours post procedure, but if you are well enough, it could be as early as 1 hour post procedure.

When you have eaten, drank, passed urine and mobilised without any problems, and if your pain is under control, you can go home.

Staff will give you advice and answer any questions before you leave the hospital.

## **ADVICE FOLLOWING ANAESTHETIC**

Once you have recovered from the initial anaesthetic you will find the physical side of recovery quite quick.

Due to having had a general anesthetic there are a few precautions you must take for the next 48 hours.

These include:

- Being accompanied home by a responsible adult. Ensuring that you have somebody to stay with you that night.

- You must not drive. Anesthesia affects concentration levels and reflexes will be much slower.
- If you had an accident your insurance may not cover you.
- You must not operate machinery including household appliances for safety reasons as you may be prone to accidents following general anaesthetic.
- You must not drink alcohol; this can make the effects of the anaesthetic much worse.
- You must not sign any important documents.
- You will not be fit to look after children.
- You must not return to work for at least 48 hours or otherwise advised.

The emotional aspect of a miscarriage may differ in each individual case, and you may experience spells of immense sadness and feel quite low.

We suggest that you have at least one week away from work, as you may feel very tired and drained.

If you need more time, see your General Practitioner who will sign a sick note.

Blood loss after the initial procedure may vary in amount and duration before it ceases depending, upon the individual.

Bleeding may be like a period or heavier, for some it will cease quickly or stop and start, lasting from a few days up to 1-2 weeks, turning brown before it subsides. Your next period should be within the next 4-6 weeks.

If you have any heavy bright red bleeding, clots or a discharge that has an odour, please ring the unit for advice

or you may attend your General Practitioner or Accident & Emergency. In some cases antibiotics may be required.

If you experience any period pains you may take analgesia such as Paracetamol/Codeine which can be purchased over the counter.

The day after your operation you may bath/shower as normal but avoid using bubble bath for 1-2 weeks.

You are advised not to use tampons until your next period which may be between 4-6 weeks, do not worry if it is delayed or heavier than usual.

Some couples have concerns about resuming sexual activities, you are advised to wait until the bleeding has settled. Please note ovulation will occur before your next period, making it possible to conceive straight away. We advise at least one normal period before trying again.

This patient information leaflet is intended to be used to support discussion during your clinical consultation. If there is anything you do not understand or are unsure about, please ask the doctor at your appointment or contact the people below.

E Ward (01695) 656901

EPAU (01695) 656064 Mon-Fri 08:30 – 16:30

**Ref:**

Nice Guideline November 2021

Guideline 47 Obs & Gynae Management of ectopic pregnancy and bleeding in early pregnancy. Southport & Ormskirk NHS Trust. (Review date May 2025)



**During your contact with us, it is important that you are happy with your care and treatment. Please speak to a member of staff and/or the ward/department Sister/Charge Nurse if you have any questions or concerns.**

## **MATRON**

A Matron is also available during the hours of 9.00 to 5.00 pm Monday to Friday. During these periods, ward/department staff can contact Matron to arrange to meet with you. Out of hours, a Senior Nurse can be contacted via the ward/department to deal with any concerns you may have.

## **INFECTION CONTROL REQUEST**

Preventing infections is a crucial part of our patients' care. To ensure that our standards remain high our staff have regular infection prevention and control training and their practice is monitored in the workplace. We ask patients and visitors to assist us in preventing infections by cleaning their hands at regular intervals and informing staff of areas within the hospital that appear soiled.

As a patient there may be times that you are unsure whether a staff member has cleaned their hands; if in doubt please ask the staff member and they will be only too happy to put your mind at ease by cleaning their hands so that you can see them.

## **ANY CONDITION SPECIFIC DANGER SIGNALS TO LOOK OUT FOR:**

- Increased sharp pelvic pain – not settling with analgesia.
- Increased vaginal bleeding, flooding/soaking towels.
- Passing of large clots.
- Offensive P.U. discharge.
- Raised temperature.

## **CONTACT INFORMATION IF YOU ARE WORRIED ABOUT YOUR CONDITION**

Your own GP –  
E Ward – 01695 656901  
EPAU – 01695 656064  
A&E – 01704 704131

## **OTHER USEFUL TELEPHONE NUMBERS/CONTACTS:**

NHS 111  
Stop Smoking Helpline (Sefton) - 0300 100 1000  
Stop Smoking Helpline (West Lancashire) - 0800 328 6297  
[www.rcog.org.uk/patient.information](http://www.rcog.org.uk/patient.information)  
Miscarriage Association – 01942 200799



**Please call 01704 704714 if you need  
this leaflet in an alternative format**

**Southport and Ormskirk Hospital NHS Trust**

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Wigan Road, Ormskirk, L39 2AZ  
Tel: (01695) 577111

Southport & Formby District General Hospital  
Town Lane, Kew, Southport, PR8 6PN  
Tel: (01704) 547471

**FOR APPOINTMENTS**

Telephone (01695) 656680  
Email [soh-tr.appointments@nhs.net](mailto:soh-tr.appointments@nhs.net)

We would welcome your feedback about your experience  
at Southport and Ormskirk Hospital NHS Trust.  
Please access the Friends and Family Test at the following  
link:

[https://www.southportandormskirk.nhs.uk/patients-and-  
visitors/fft/](https://www.southportandormskirk.nhs.uk/patients-and-visitors/fft/)

**Thank you**

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