

Hosp No. :	HKID No.:
Case No. :	
Name :	
DOB :	M / F
Adm Date :	
Contact No. :	

Procedure Information Sheet – Marsupialisation

1. Introduction

- 1.1. Clinical diagnosis: Bartholin's cyst / Bartholin's abscess / vulval retention cyst / vaginal retention cyst
- 1.2. Indication of surgery: vulval swelling/ vulval pain/ swelling in vagina

2. Nature of operation

- 2.1. Local anesthesia / general anesthesia / Monitored Anaesthetic Care (MAC)
- 2.2. Examination of lesion
- 2.3. Incision made on over the lesion, cyst /abscess wall opened and drained
- 2.4. Pus swabs for bacterial culture and cyst wall biopsy may be taken
- 2.5. Cavity of lesion emptied, cleansed and inspected
- 2.6. Stitches applied at edge of cyst/ abscess cavity to skin
- 2.7. All tissue removed will be sent to Department of Pathology or disposed of as appropriate unless otherwise specified
- 2.8. Photographic and /or video images may be recorded during the operation for education /research purpose. Please inform our staff if you have any objection.

3. Benefits of intended procedure

- 3.1. Relief of symptoms like swelling and/or pain

4. Risks and complications may include, but are not limited to the followings

- 4.1. Women who are obese, who have significant pathology, who have undergone previous surgery or who have pre-existing medical conditions must understand that the quoted risks for serious or frequent complications will be increased.
- 4.2. Anaesthetic complications
- 4.3. Serious
- 4.4. Haematoma
- 4.5. Frequent may experience pain if done under local anaesthesia
- 4.6. Bleeding (common, up to 11%)
- 4.7. Infection recurrence (5-15%, common)

5. Risk of not having the procedure

- 5.1. Progression and deterioration of disease condition
- 5.2. Infection

6. Possible alternatives

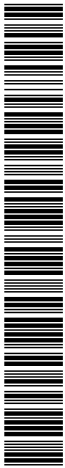
- 6.1. Observation
- 6.2. Excision
- 6.3. Word catheter
- 6.4. Other _____

7. Special follow-up issue

- 7.1. Patient is advised to use plain, clean water or aseptic solution (Hibitane) as prescribed by physician for perineal cleaning after toileting
- 7.2. Gynaecological follow-up would be arranged for wound condition 6-8 weeks after operation

8. Statement of patient:

- 8.1. Procedure (s) which should not be carried out without further discussion



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I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature: _____

Patient/ Relative Name: _____

Date: _____

