You are scheduled for a Uterine Fibroid Embolization (UFE) on _____________ at ____________.

Please report to the 7th Floor Sky Lobby of the Center for Care and Discovery 60 minutes before your appointment time to register for the test.

**Uterine Fibroid Embolization**

Uterine fibroids are benign growths in the uterus (womb) that affect 1 out of 5 women under the age of 50. Many women experience symptoms such as painful cramping, heavy menstrual bleeding and anemia. Uterine Fibroid embolization (UFE) can relieve these symptoms. The recovery time after the procedure is minimal and usually includes an overnight hospital stay. UFE treats fibroids and severe bleeding by blocking the blood supply to the fibroids, which, in turn, causes them to shrink. The procedure is performed by an interventional radiologist (IR), a doctor who uses X-rays and other imaging techniques to see inside the body and treat conditions without surgery. You will be asked to come in for a consultation with an Advanced Practice Nurse (APN) and an IR doctor before the procedure is scheduled. During the consultation, a history and physical will be performed. Please bring any prior imaging studies, including ultrasounds or MRIs. If no recent imaging studies are available for the doctor to review, an MRI or ultrasound may be ordered at the time of the consultation. Please also note that after the results of the MRI or ultrasound are obtained, you may be asked to have an endometrial biopsy performed by your gynecologist.

**Before the Test**

**Do not eat solid food or drink any liquids for at least 6 hours before the test.**

Blood tests are needed before the procedure to find out if your blood clotting parameters and kidney function are normal. Your doctor will order the blood tests and may give you additional instructions about the tests. A nurse from Interventional Radiology will call you a few days before the procedure to review preparation instructions with you.

**Preparation**

Please leave all valuable items at home. After you check in on the 7th floor you will be will be escorted to the Prep/Recovery Room on the 5th floor. Two of your family members are allowed to come to the Prep/Recovery Room with you. You will be asked to change into a hospital gown. You will then be assigned a holding bay and be given a blanket to keep you warm.

While in the Prep/Recovery Room, you will be asked to empty your bladder. The nurse will check your temperature, pulse, respiration, blood pressure and answer any questions. An IV (into the vein) line will be started and hooked up to a pain pump just in case you experience any discomfort immediately following the procedure. Also, a small catheter called a Foley will be inserted into your bladder and will remain in place until the next day.

A review of the prior history and physical will be performed by an APN or radiologist and you will be given medication to prevent nausea, as well as an antibiotic. Next, the radiologist or APN will explain the procedure and discuss the risks involved. After the radiologist or APN has answered your questions, you will be asked to give your written consent for the procedure.
During the Procedure
When you are taken to the procedure room your family or visitors will be asked to leave the Prep/Recovery Room. They will be able to wait on the 7th floor where you were registered or they can travel around campus.

You will be taken to a procedure room and will be assisted onto an x-ray table. Keep in mind that the table is very firm. This type of table is necessary for the x-ray equipment used during the procedure. The IR doctor/nurse may give you some medicine through your IV to help you relax. The medication might make you feel drowsy, but some patients are awake and usually comfortable during the procedure.

The IR doctor will select the site to puncture the skin. The femoral artery in your groin is the most often used site. The puncture site will be cleansed with a special soap that may feel cold. A local anesthetic (similar to novocaine) will be used to numb the area selected. When it is numb, a puncture will be made and the IR doctor will insert a catheter. This catheter is a long, thin, flexible tube that can be guided to a certain position. The catheter placement is not usually painful. You may feel pressure and mild discomfort at the puncture site. If needed, additional injections of local anesthetic will be given at your request.

Next, the catheter is placed in the proper position and contrast (dye) is injected into the catheter to obtain images of the blood vessels that supply the fibroids. You may feel a sudden warm or hot sensation but it will only last a few seconds. Next, tiny particles are injected into the blood vessels that lead to the fibroids. The particles block the blood flow and eventually cause the fibroids to shrink. The particles remain permanently at the fibroid site. This process is repeated several times until there is a complete blockage of the blood supply to the fibroid. Finally, the catheter is removed and firm pressure will be held over the puncture site for at least 10 to 15 minutes. This completes the procedure and you will then be taken to the recovery area.

After the Procedure
After the procedure, you will be taken to your assigned hospital bed. You need to remain still for at least 6 hours. During this period, it is very important to keep your leg straight (specifically, the leg on the side that was punctured). Also, do not raise the head of your bed more than 30 degrees. The Foley in your bladder will be removed during this time. The nurse will check your blood pressure, temperature, pulse, and the puncture site, frequently. An ice pack may be placed over the puncture site to prevent swelling and relieve discomfort. The pulse in your leg will be checked and compared to the opposite leg. Most patients experience cramping and pain, as well as some nausea, following the procedure. Let your nurse know if you are having any of these issues and medication will be given to relieve these discomforts. You may eat regular meals as soon as you can tolerate them after the procedure. The IV will remain in place until you are discharged. This will help to flush out the contrast that was used during the procedure.

Notify the nurse immediately if you should notice any of the following symptoms:

- Swelling at the puncture site
- Bleeding or bruising at the puncture site
- Numbness, tingling, pain or any change in normal sensation in your arm or leg
- Difficulty moving your fingers, hands, feet or legs
- Coolness of the foot

You will be given further instructions when you are discharged from Interventional Radiology.