# Focus on your care

Learn about your hysterectomy options.



INTUÎTIVE

### Now is the time to honor your needs.

Surgery is one option you and your doctor may discuss if you've been diagnosed with gynecologic cancer.

It's important to take the time to understand your options for care. You and your doctor can discuss your choices and decide which approach is right for you.

This brochure can help you understand the surgical options available.



#### What is a hysterectomy?

Hysterectomy is surgery to remove your uterus and surrounding tissue, as needed. Ovaries and fallopian tubes may or may not be removed. The main types include:

Simple or Total — removal of the uterus, including the cervix and surrounding tissue

Radical — removal of the uterus, cervix, part of the vagina, and surrounding tissue

These procedures can be recommended for cancerous or noncancerous (benign) conditions. You should discuss all options with your doctor, including surgery.

# If you are a candidate for surgery, your surgeon may recommend:



# Open surgery

Surgeon makes an incision in your abdomen large enough to perform the procedure using hand-held tools



# Laparoscopic surgery

Surgeon makes a few small incisions in the abdomen and operates using special long-handled tools while viewing magnified images from the laparoscope (camera) on a video screen



#### Robotic-assisted surgery

Surgeon controls a robotic system to perform the procedure

### What will my surgeon do?

If you and your doctor decide that robotic-assisted surgery is right for you, here is what may happen.



Actual incision size

Your surgeon makes a few small incisions, and uses a 3DHD camera for a crystal-clear, magnified view of your uterus, cervix, and surrounding tissue.



Your surgeon sits at a console next to you and operates through the incisions using tiny instruments and the camera.



The da Vinci system translates your surgeon's hand movements in real-time, bending and rotating instruments that move like the human hand, but with a greater range of motion.

The da Vinci system is a tool used for surgery, but it does not treat cancer. The system extends surgeon capabilities within minimally invasive surgery.

#### How can you prepare for surgery?

One way to learn more about your surgery is to ask your doctor and care team questions.



# Here are some questions you might ask:

What medical and surgical options are available for me?

Which is best for my situation?

What are the differences between open, laparoscopic, and robotic-assisted surgery?

Should I get a second opinion?

What am I likely to experience after surgery?

If I decide to have surgery, how can I prepare for it?

What is your surgical training and experience? What is your experience with robotic-assisted surgery?

What are your patient outcomes?

#### Does a robot perform the surgery?

No. While the word "robotic" is in the description, a robot doesn't perform surgery. Surgeons perform surgery using the da Vinci system's camera and instruments.

# Do surgeons train before doing robotic-assisted surgery?

Yes. Surgeons must be trained to use the system and get clearance from their hospitals to perform robotic-assisted surgery before they can use the da Vinci system in any surgical procedure.

#### What are the outcomes?

Be sure to talk with your surgeon about the surgical outcomes they deliver by using the da Vinci system, as every surgeon's experience is different. For example, ask about:

- Length of hospital stay
- · Complication rate
- · Length of surgery
- Chance of switching to an open procedure

There are additional outcomes of surgery that you may want to talk with your doctor about. Please ask him or her about all important outcomes of surgery.

To find out more about surgery with the da Vinci system, visit the Hysterectomy page on <a href="https://www.davincisurgery.com">www.davincisurgery.com</a>.





Get back to what matters most.



#### Surgical risks

Risks associated with hysterectomy, cancer (removal of the uterus and possibly nearby organs) include injury to the ureters (the ureters drain urine from the kidney into the bladder), vaginal cuff problem (scar tissue in vaginal incision, infection, bacterial skin infection, pooling/clotting of blood, incision opens or separates), injury to bladder (organ that holds urine), bowel injury, vaginal shortening, problems urinating (cannot empty bladder, urgent or frequent need to urinate, leaking urine, slow or weak stream), vaginal fistula (abnormal hole from the vagina into the urinary tract or rectum), vaginal tear or deep cut.

#### Important safety information

Patients should talk to their doctor to decide if surgery using the da Vinci system is right for them. Patients and doctors should review all available information on nonsurgical and surgical options and associated risks in order to make an informed decision.

Serious complications may occur in any surgery, including surgery using the da Vinci system, up to and including death. Serious risks include, but are not limited to, injury to tissues and organs and conversion to other surgical techniques which could result in a longer operative time and/or increased complications.

For Important Safety Information, including surgical risks, indications, and considerations and contraindications for use, please also refer to www.intuitive.com/safety.

Individuals' outcomes may depend on a number of factors, including but not limited to patient characteristics, disease characteristics and/or surgeon experience.

#### Precaution statement

The demonstration of safety and effectiveness for the representative specific procedures was based on evaluation of the device as a surgical tool and did not include evaluation of outcomes related to the treatment of cancer (overall survival, disease-free survival, local recurrence) or treatment of the patient's underlying disease/condition. Device usage in all surgical procedures should be guided by the clinical judgment of an adequately trained surgeon.

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