

Patient Information

Colposcopy of the Vagina and Cervix

What is a colposcopy?

A colposcopy is an exam in which your healthcare provider uses an instrument called a colposcope to look at the vagina, vulva, and cervix. The scope acts like a telescope and magnifying glass, and makes it easier for your provider to see the cells of the skin of the vulva, vagina, and cervix. The scope is not placed into the vagina but just \noutside it. At the time a colposcopy is done, your provider may take a sample of tissue (biopsy) for tests.

When is it used?

This exam may be done as part of a routine pelvic exam if your provider wants to get a closer look at an area of your vagina, cervix, and vulva. It may also be done if you have had abnormal Pap test results showing possible infection, precancerous growth, or cancer.

Examples of alternatives include:

- conization of the cervix (removal of tissue from the cervix with a laser or with surgery)
- random biopsy of the cervix (without the colposcope).

You could choose not to have treatment, recognizing the risks of your condition. You should ask your healthcare provider about these choices.

Tell your healthcare provider if you think you may be pregnant. Your provider will want to perform the procedure in a different way if you are pregnant.

How do I prepare for a colposcopy?

- Plan to have the exam when you are not having a menstrual period. These exams are not done during a period.
- Do not douche or have sexual intercourse within 24 hours of the exam.

What happens during the procedure?

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Because the cervix feels little pain, you will not need an anesthetic. You will lie on the examining table with your feet in stirrups, just as you do for a regular pelvic exam. Your provider will insert a speculum into your vagina. This is the same tool used during a Pap test. It will be opened slightly to spread the vagina so the cervix can be seen. Your provider will do a Pap test and then use a swab to put a weak vinegar-like liquid on your cervix, vulva, or vagina. You may feel a slight stinging sensation caused by the liquid, but it is not painful. The liquid will turn abnormal tissue white and show abnormal blood vessels. It helps show where a sample of tissue should be taken for a biopsy and exam.

Your healthcare provider will place the colposcope at the opening of your vagina. When your provider looks into the vagina, he or she will also see your cervix. Photographs may be taken. Your provider may use an instrument to pinch or cut off a small tissue sample for lab tests. You may feel a pinch or slight cramp. The removal of the sample of tissue is called a biopsy. After the tissue is removed, your provider will put a thick, pasty solution on the area of the biopsy. This will help prevent bleeding.

The healthcare provider will remove the instruments. The tissue will be sent to the lab.

What happens after the procedure?

Your healthcare provider will tell you what he or she saw. Test results should be ready within 1 to 2 weeks, depending on the lab.

You may feel a little lightheaded right after the exam. You may have to lie down for a few minutes after the exam is over. You may have some cramping for a short time afterwards.

You may have a little dark-colored, sandy discharge from the vagina for a few days after the procedure. If you had a biopsy, you may have light bleeding for up to a week. You may notice a thick black discharge after a biopsy. If so, it is caused by a thick, brownish-yellow paste that is placed on the area to help stop bleeding. When it mixes

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with blood, it forms a thick black discharge. This discharge may last for a few days.

If you have a sample of tissue removed for a biopsy, you should not douche or use tampons for 2 weeks while the area heals. Do not have sexual intercourse for 48 to 72 hours after the biopsy.

Ask your provider what other steps you should take and when you should come back for a checkup.

What are the benefits of this procedure?

Benefits of this procedure are:

- Your healthcare provider should be able to make a more accurate diagnosis of the problem in your cervix or vagina and suggest further treatment if necessary.
- The procedure can be done while you are awake and without an anesthetic.
- The procedure can be done in the healthcare provider's office rather than a hospital.
- The procedure is simple with few side effects or complications.

What are the risks associated with this procedure?

Minor bleeding from the biopsy site may occur. Other risks include:

- heavy bleeding (soaking more than one pad per hour, or more bleeding than your normal menstrual flow)
- infection.

You should ask your healthcare provider how these risks apply to you.

When should I call my healthcare provider?

Call your healthcare provider right away if:

- You have heavy bleeding.
- You have a fever over 100°F (37.8°C) 24 to 72 hours after the procedure.

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- You have bleeding that lasts over 2 weeks.
- You have a foul-smelling vaginal odor or discharge.
- You have pelvic pain.

Call your healthcare provider during office hours if:

- You have questions about the exam or its result.
- You want to make another appointment.

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Female Pelvis

