Endometrial ablation is an outpatient surgery that can reduce or stop heavy menstrual bleeding. This surgery is for women who do not want to have any more children and who have not yet entered menopause. Treatment takes less than an hour, and you can go home later that day.

Preventing for Surgery
- You may be given medication by mouth or injection for a few weeks or months before your ablation. This thins the lining and reduces bleeding.
- The day before surgery, a special substance (laminaria) may be put into your cervix (the opening to the uterus). This widens the opening.
- To help prevent problems with anesthesia, do not eat or drink anything 10 hours before surgery.

During Your Surgery
- You’ll be given anesthesia so you stay comfortable and relaxed and feel no pain during surgery.
- Your uterus may be filled with fluid. This puts pressure on the lining to help reduce bleeding. It also allows your doctor to see inside your uterus.
- Your physician will insert a small telescope-like instrument through the cervix. This scope may be connected to a video monitor. This helps your physician see and control the ablation process. At the end of the scope, a device using heat or electric current destroys the uterine lining. Instead of the scope, your doctor may use a device that both expands and ablates the uterine lining. It also uses heat or other energy to remove the lining. Your physician will choose the device that’s best for you.

Your Recovery
- You may have cramping or aching in your abdomen after surgery. Your physician can give you pain medication.
- You may also have a bloody or watery discharge or bleeding for days or weeks. Use sanitary pads, not tampons.
- Don’t have sexual intercourse or play active sports for two weeks after surgery.
- You can likely return to work in two days.
- Schedule a follow-up visit with your physician in about six weeks to be sure you’re healing well.

When to Call Your Doctor
Call your doctor immediately if you have any of the following after surgery:
- Persistent or increased abdominal pain
- Shortness of breath
- Heavy vaginal bleeding
- Fever over 100.4°F or chills