

Novasure Procedure

Novasure refers to an office procedure that uses radiowave energy to gently remove the endometrium, lining of the uterus. A Novasure procedure is performed once to lighten or stop your periods and is used to treat abnormal uterine bleeding.

I authorize Dr. _____, and such health professionals in training and assistants that he/she may select, to perform a Novasure procedure under local anesthesia performed here at SWHC.

I confirm that my doctor has advised me about my condition, the nature and benefits of the proposed treatment, alternatives, and related risks associated with Novasure. The risks may include but or not limited to infection, bleeding and/or treatment failure.

I was given an explanation of any unfamiliar terms and was offered the opportunity to ask questions regarding the Novasure procedure. I understand my post-op instructions and realize this is an important part of my recovery plan.

I understand that any tissue samples will be forwarded to Rockingham Memorial Hospital Pathology Department for further evaluation.

Patient Signature: _____

Date: _____

Witness: _____

Interpreter Attestation (when applicable):

Name of interpreter used during informed consent discussion: _____