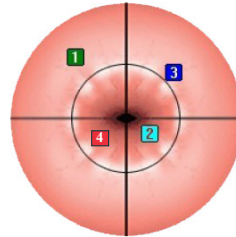


EndoSoft Surgery Center

135 Broadway
Schenectady, NY 12305

Patient Name: Debbie Doe
Date of Birth: 01/01/1980
Record Number: A065061
Procedure Date/Time: 06/11/2017/ 1:19:41 PM
Gynecologist: Sandra Blue
Referring Physician: Johanna Black



PRE PROCEDURE DIAGNOSIS:

Dysplasia of cervix (uteri).

POST PROCEDURE DIAGNOSIS:

Leukoplakia of cervix (uteri).

PROCEDURE PERFORMED:

Colposcopy of the cervix including upper/adjacent vagina; with biopsy(s) of the cervix.

INDICATIONS FOR THE PROCEDURE:

Dysplasia of cervix (uteri) for 2 months.

Instruments: Colposcope

Medications: None

Visualization: Good

Tolerance: Good

Complications:

None

PROCEDURE TECHNIQUE:

The patient's legs are parted and flexed and comfortably put up on a stirrup in a lithotomy position. The vagina and cervix are scrubbed with an antibacterial solution. An appropriate speculum is inserted taking due care not to injure the cervix. Examination started at a low magnification after rinsing the cervix with normal saline and removing any excess cervical mucus. The green filter was used at this stage of the examination to observe the vascular patterns.

A 3 to 5% acetic acid solution was applied to the cervix to visualize the acetowhite reaction, which occurs when the squamous epithelium is abnormal. Complete colposcopic examination was done observing the original squamous epithelium, the entire transformation zone, the squamocolumnar junction and as much of the columnar epithelium of the cervix. Abnormal colposcopic findings are noted under each of the segments of the cervix. Application of Lugol's iodine causes a homogeneous dark brown staining of normal squamous epithelium; iodine non-reactive epithelium was noted. Biopsies are performed under colposcopic guidance after precisely localizing the abnormal areas using acetic acid and iodine tests.

Examination of the vaginal walls was performed after examination of the cervix. After observation of the lateral walls, stepwise withdrawal of the speculum allows the anterior and posterior surfaces of the vagina were investigated and areas of iodine-negativity and acetowhite lesions were noted.

FINDINGS:

Cervical Exam Adequacy: Satisfactory

Abnormal Colposcopic Findings: Mild acetowhite epithelium noted in the endocervix. Endocervical curettage obtained. Fine punctuation noted in the upper outer right cervical quadrant. Fine mosaic noted in the lower inner left cervical quadrant. Cervical punch biopsy obtained. Abnormal vessels noted in the upper outer right cervical quadrant. Cervical cone biopsy obtained.

RECOMMENDATIONS:

Follow-up with the results in 1 week.

Signature: _____ Sandra Blue, MD

CPT:

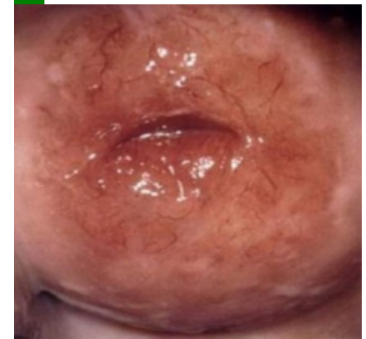
57455 Colposcopy of the cervix including upper/adjacent vagina; with biopsy(s) of the cervix

ICD 10 Codes:

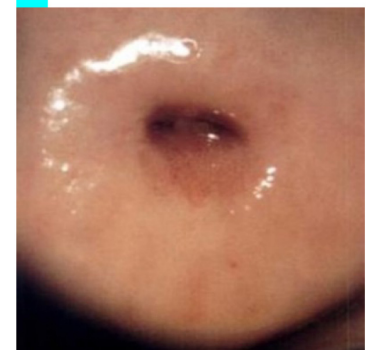
N88.0 Leukoplakia of cervix (uteri)

N87.9 Dysplasia of cervix unspecified

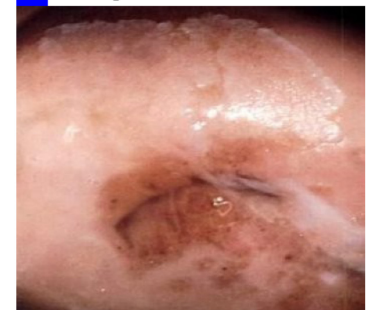
1 Abnormal Blood Vessels



2 Fine Mosaic



3 Leukoplakia



4 Acetowhite Epithelium

