

Talking to your doctor about fibroids and polyps

If your doctor tells you that you have fibroids or polyps, here are some questions you may want to ask

- How many fibroids or polyps do I have?
- What size are my fibroid(s) or polyp(s)?
- Where are my fibroid(s) or polyp(s) located?
- How rapidly have the fibroid(s) or polyp(s) grown (if you already knew about the fibroid(s)?
- How will I know if the fibroid(s) or polyp(s) are growing larger?
- What problems can the fibroid(s) or polyp(s) cause?
- What tests or imaging studies are best for keeping track of the growth of my fibroid(s) or polyp(s)?
- What are my treatment options if my fibroid(s) or polyp(s) becomes a problem?

Notes and other questions



IMPORTANT SAFETY INFORMATION

The MyoSure hysteroscopic tissue removal system is intended for hysteroscopic intrauterine procedures by trained gynecologists to resect and remove tissue including submucous myomas, endometrial polyps and retained products of conception. It is not appropriate for patients who are or may be pregnant, or are exhibiting pelvic infection, cervical malignancies or previously diagnosed endometrial cancer.

The Acessa ProVu system is indicated for use in percutaneous, laparoscopic coagulation and ablation of soft tissue, including treatment of symptomatic uterine fibroids under laparoscopic ultrasound guidance. The Acessa ProVu system is contraindicated for patients who are not candidates for laparoscopic surgery and/or patients with a uterus adherent to pelvic tissue or viscera. The Acessa ProVu system's guidance system is not intended for diagnostic use. Please read all instructions for use of the Acessa ProVu system prior to its use. Safe and effective electrosurgery is dependent not only on equipment design but also on factors under control of the operator. Rare but

serious risks include, but are not limited to, skin burns, mild inter-operative bleeding, post-procedural discomfort (cramping, pelvic pain), infection, vaginal bleeding, blood loss and complications related to laparoscopy and or general anesthesia. If you or someone you know has possibly experienced a side effect when using our product please contact your physician. Insufficient data exists on which to evaluate the safety and effectiveness of the Acessa ProVu system in women who plan future pregnancy, therefore the Acessa ProVu system is not recommended for women who are planning future pregnancy.

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Talking to your doctor about excessive menstrual bleeding

Conversation starters

Maybe you've never discussed your heavy bleeding with your doctor and you're not sure where to start. Relax—it's a problem that affects 1 out of every 5 women, and your doctor is there to help. So, don't be hesitant or embarrassed to bring it up at your next visit.

If getting the conversation started seems hard, try one of these openers:

- "I'd like to ask you a few questions about my menstrual cycle..."
- "I've noticed that my periods are different than they used to be..."
- "I've heard that many women are getting treated for heavy periods... is this something I should consider?"

Before your visit you should

Keep a journal to track your bleeding for a few cycles or try to write down notes from memory that includes the following information:

- # of days bleeding
- What type of protection you need each day (for example, light pantiliner or heavy pad, light or more absorbent tampon, or even double protection)
- How frequently you need to change protection each day
- If you notice any clots in your flow
- Any other symptoms (such as fatigue, cramps, headaches, irritability, etc.)

- How your life is affected by your periods (missing work, social or athletic activities, etc.)

Questions to ask the doctor

- What might be causing my heavy bleeding?
- Do I need to have any tests?
- Is treatment right for me?
- What are my treatment options? What does each one involve?
- What is the best treatment for me?
- What types of treatments do you perform?
- What success rates have you had with each?

Notes and other questions



IMPORTANT SAFETY INFORMATION

NovaSure[®] endometrial ablation is for premenopausal women with heavy periods due to benign causes who are finished childbearing. Pregnancy following the NovaSure procedure can be dangerous. The NovaSure procedure is not for those who have or suspect uterine cancer; have an active genital, urinary or pelvic infection; or an IUD. NovaSure endometrial ablation is not a sterilization procedure. Rare but serious risks include, but are not limited to, thermal injury, perforation and infection. Temporary side effects may include cramping, nausea, vomiting, discharge and spotting. Inform patients to contact you if they experience a possible side effect related to use of this product. If you or someone you know has possibly experienced a side effect when using our product, please contact your physician.

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