What is colposcopy?
Colposcopy is a method of taking a closer look at the cervix and vagina. The instrument used is called a colposcope which is a magnification device which allows the examiner to better see the tissue. The medical provider can then see what areas may need a biopsy.

How is colposcopy performed?
Colposcopy is performed in a clinic or office setting by a specially trained medical provider. The procedure is done on a regular gyn exam table. A speculum is inserted, allowing the cervix to come into view. The colposcope is positioned outside the vaginal opening and never directly touches the body. This exam feels the same as a routine gyn exam. However, it is often necessary to perform a biopsy, or sampling of tissue, at the same time. This part of the exam is described differently by those who have experienced it. Some report no or little sensation, while for others there is mild to moderate cramping or a sharp pinch. No anesthesia is required. Cells also may be taken from the canal of the cervix. A special device is used to collect the cells. This is called endocervical curettage (ECC).

When is it recommended?
Colposcopy is generally recommended for people who have had an abnormal pap smear. Most commonly, a diagnosis of atypical cells on the cervix has been made, requiring a closer look at the cervix. Persistent high risk types of human papillomavirus on the cervix may also require colposcopy. It is also suggested for genital warts on the cervix, cervicitis (an inflamed cervix), benign growths such as polyps, pain, or persistent bleeding from the cervix.

How do I prepare for colposcopy?
The procedure takes about 15 minutes to perform. It is scheduled between menstrual periods. Do not douche, have vaginal intercourse, use vaginal medication, or tampons for at least 24 hours prior to the procedure.

What are the risks of colposcopy?
- Very low rate of infection
- Bleeding
- Possible discomfort similar to menstrual cramps

How do I take care of myself after the procedure?
- You may take over-the-counter medication such as ibuprofen or acetaminophen should you experience any pain or cramping after the procedure.
- Your medical provider may have applied a medication to the biopsy site(s) to stop any bleeding. Do not be alarmed by a brownish-black vaginal discharge. This is due to the medication and is to be expected. It may last up to 1 week.
- It is common to have some spotting similar to the spotting that occurs during the last 2 days of your menstrual period. This discharge is from the biopsy site(s) and will stop when healing is complete (usually within 4 to 7 days). Use a sanitary pad rather than a tampon.

Call your medical provider if the following occurs:
- Bleeding greater than one sanitary napkin/hour
- Spotting longer than 7 days
- Bright red bleeding
- Temperature greater than 100 degrees F
To allow the cervix to heal:

- No sexual activity or douching while spotting or as directed by the gyn specialist.
- When healing is complete, sexual activity may be resumed with preferred methods of STI prevention and/or birth control. If you use a hormonal birth control method, continue your daily schedule without interruption during this healing process.