

### Will it be painful?

The hysteroscopes we use are very fine so most women will experience minimal or moderate pain. Some women may experience cramp-like discomfort (like a period-pain) during the procedure and for up to 48 hours afterwards.

This can be relieved with analgesia such as paracetamol (or the one that you normally take). We will stop the procedure if it is too uncomfortable for you.

### After the examination

- You will be asked to rest in the clinic for a further 15 to 30 minutes. You will get a small amount of bleeding afterwards for about two to three days.
- Please bring a sanitary towel with you.
- The doctor will discuss the findings from your procedure before you leave and advise you about any treatment needed.
- A biopsy report will take a little longer, the result of which can be discussed in the out-patient clinic or telephone clinic.
- Please make arrangements for a friend or a relative to take you home as we advise you not to drive yourself.

- You should be able to return to your normal activities the next day. Please note that you cannot have this examination while you are having a heavy period, or if you are pregnant. It is best to perform the hysteroscopy in the week after your period has finished.

#### Patient advice and liaison service (PALS)

If you have a question, compliment, comment or concern please contact our PALS team on 020 7288 5551 or [whh-tr.whitthealthPALS@nhs.net](mailto:whh-tr.whitthealthPALS@nhs.net)

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3182. We will try our best to meet your needs.

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## OUTPATIENT HYSTEROSCOPY

### A patient's guide



This information is for women who are having an examination of the womb known as a hysteroscopy. It explains what the procedure is, what is involved and any significant risks that there may be.

### **What is a hysteroscopy?**

A hysteroscopy is an examination of the inside of the womb (uterus). This is a diagnostic test and can help find the cause of your heavy or abnormal bleeding.

### **The following are the most frequent findings:**

- Fibroids – small bundles of muscle, which if small may be removed during the examination.
- Polyps – little finger like tags of tissue (skin tag) which may be removed during the examination.
- Thickening of the lining of the womb (endometrium), which may be biopsied during the examination.
- Cancer, which can be diagnosed by biopsy (a tiny sample of tissue sent to the laboratory for tests).
- Heavy bleeding – can sometimes be treated with the insertion of 'mirena coil' (hormone coil).

### **What preparation do I need?**

- It is very important that you do not have unprotected sex between your period and your hysteroscopy as you cannot have this procedure if you are pregnant. You will be asked to give a urine sample, of which a pregnancy test will be performed in all premenopausal patients.
- On the day of the procedure you can eat and drink as normal and take your usual medications. We recommend you take two paracetamol or Neurofen/ Ibuprofen if not allergic, 30 to 60 minutes before your appointment. This will help prevent any period-type pain afterwards.
- The doctor/nurse will explain the procedure and will ask you to sign a consent form to confirm that you understand the procedure and agree to go ahead with it.

### **Dignity and privacy**

You may bring a friend, relative or partner into the treatment room if you would find this helpful. If the procedure is performed by a male doctor, a female chaperone will be always present. If you wish to request a female doctor, please phone in advance, before you come to the clinic, on **0207 288 5279**.

### **What does it involve?**

The procedure will be performed under local anaesthetic in the out-patient unit. It normally takes between 10 to 15 minutes.

- You will be given a gown to change into and taken into the treatment room.
- You can watch the examination on a TV monitor.
- You will be positioned as you are when you are having your smear test. A Speculum will be introduced into the vagina. Then a small telescopic instrument (a Hysteroscope) is passed into the womb.
- A harmless salty fluid is run into the womb to expand it so that the doctor can see the lining more clearly.
- A biopsy of the endometrium (the lining of the womb) is usually taken at the same time.
- If small polyps or fibroids are found they may be removed. The procedure time will be slightly increased.
- Sometimes pictures are taken during the procedure, which you can ask to see. These will be kept in your notes.