



## **OFFICE HYSTEROSCOPY**

**H**ysteroscopy is a way to look inside the uterus. A hysteroscope is a thin, telescope-like device that is inserted into the uterus through the vagina and cervix. It will help us diagnose or treat a uterine problem. Office hysteroscopy is a minor procedure that may be done in a doctor's office with little or no anesthesia. The procedure poses little risk for most women. Hysteroscopy may be used for diagnosis, treatment, or both.

### **Some of the reasons for performing an office hysteroscopy are:**

**Abnormal Uterine Bleeding.** A woman has this condition if she has heavier or longer periods than usual, bleeds between periods or after intercourse, or has any bleeding after her periods have stopped at menopause. Hysteroscopy may help us find the cause of abnormal bleeding that other methods have not found. It may also be used to take a biopsy.

**Infertility.** A couple may not be able to achieve pregnancy for a number of reasons. Sometimes the cause of female infertility is related to a defect in the shape or size of the uterus. One example of this is a septate uterus (a thin sheet of tissue divides the inside of the uterus into two sections). Hysteroscopy may find these problems.

**Repeated Miscarriages.** Some women, although able to get pregnant, lose the fetus to miscarriage - the loss of a pregnancy before 20 weeks. Hysteroscopy can be used with other tests to help find the causes of repeated miscarriage.

**Adhesions.** Bands of scar tissue, or adhesions, may form inside the uterus. This is called Asherman syndrome. These adhesions may cause infertility and changes in menstrual flow. Hysteroscopy can help locate adhesions.

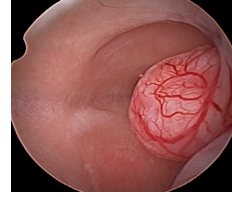
**Abnormal Growths.** Sometimes benign growths, such as polyps and fibroids, can be diagnosed with the hysteroscope. Hysteroscopy may also help us to biopsy a growth in the uterus to find out whether it may be cancer or may become cancer.

**Displaced IUDs.** An intrauterine device (IUD) is a small plastic device inserted in the uterus to prevent pregnancy. In some cases, it moves out of its proper position inside the uterus. It can then embed itself in the uterine wall or the tissue around it. Hysteroscopy can be used to locate an IUD.

### **Possible complications**

Office hysteroscopy is usually a very safe procedure. Problems such as injury to the cervix or the uterus, infection, heavy bleeding, or side effects of medication used occur in less than 1% of cases.

**Cont./**



### **Before Surgery**

Hysteroscopy is best done during the first 10 days after a menstrual period, but can be done at other times also. Taking pain medication one hour before the procedure will make you more comfortable. Examples of appropriate medication to take are: Motrin/Ibuprofen/Advil - 400-600mg or Extra strength Tylenol – Two tabs (1000mg). If you desire you can also be prescribed a dose of Valium 5-10mg, to take 30-60 minutes before the surgery, however if you do so someone will need to bring you and take you home after your appointment.

### **The Procedure**

Occasionally before a hysteroscopy, the opening of your cervix may need to be dilated (made wider) with a special device (dilator). The hysteroscope is then inserted through the vagina and cervix and into the uterus.

Liquid (saline solution) is passed through the hysteroscope to expand the uterus so that the inside can be seen better. A light shone through the device allows us to view the inside of the uterus and the openings of the fallopian tubes into the uterine cavity. The procedure is watched on television, and you can watch as it is preformed if you wish.

The procedure usually takes less that 5 minutes.

### **Recovery**

You will be able to go home in a short time. Some mild cramping or bleeding is not unusual after the procedure and will usually not last more than 24-48 hours. You can go back to work the next day. You should not have sex until the bleeding has stopped, usually 3 days. Contact us if you have:

- A fever
- Severe abdominal pain
- Heavy vaginal bleeding or discharge

### **Consent**

I have read the above information concerning office hysteroscopy and its potential risks and complications. I have had the opportunity to ask any questions and have received acceptable answers to my questions.

I consent to the procedure.

Patient Signature \_\_\_\_\_ Date \_\_\_\_\_

Physician Signature \_\_\_\_\_