



Outpatient Hysteroscopy

Information for patients
Spencer Private Hospitals

This leaflet is not meant to replace the information discussed between you and your doctor, but can act as a starting point for such a discussion or as a useful reminder of the key points.

What is a hysteroscopy?

Hysteroscopy is a procedure for looking inside the uterus (womb) using a thin telescope called a hysteroscope. This procedure is used for both diagnostic and therapeutic reasons.

Why do I need a hysteroscopy?

Hysteroscopy is necessary for a variety of reasons:

- abnormal bleeding
- bleeding between your period
- to take biopsies of the lining of the womb
- bleeding after the menopause
- heavy bleeding that has not responded to medical treatment
- irregular bleeding on hormone replacement therapy (HRT)
- locating, removing or inserting a coil
- occasionally for infertility or recurrent miscarriages.

Following a hysteroscopy most women are reassured that all is normal and no further hospital admission or general anaesthetic is needed.

Can I have a hysteroscopy as an outpatient?

A hysteroscopy can be performed as an outpatient with or without local anaesthetic, or as an inpatient under general anaesthetic. Outpatient hysteroscopy is suitable for most women but you and your doctor will decide which is most appropriate for you.

What should I do before I come to hospital?

It is sensible, but not essential, to bring someone with you so that you do not have to drive home yourself.

You do not need to stop eating and drinking before this procedure.

If you feel nervous you will be able to discuss your concerns with the doctor before the procedure.

Please bring a urine sample with you as we will need to ensure you are not pregnant before we can carry out this procedure.

During the procedure you may experience some period type pain. We advise you take Paracetamol 1gram (usually 2 x 500mg tablets) and/or Ibuprofen 400mg (usually 2 x 200mg tablets) with food approximately two hours before your procedure.

What will happen when I arrive at hospital?

Before the procedure the doctor will talk to you and answer any questions you may have and ask you to sign a consent form.

If you are of child bearing age you will undergo a pregnancy test to ensure you are not pregnant.

A trained nurse will be with you throughout the procedure.

You will be asked to remove your clothes below the waist and sat on a specially designed trolley to support your legs in the best position.

You will be asked a few questions by the nurses in the room to ensure we have all the information needed to undertake the procedure safely.

Please let us know if you have a heart murmur or have had heart surgery.

What will happen during the procedure?

After adequate lubrication the hysteroscope (a thin telescope about the diameter of a drinking straw) will be inserted through your cervix (neck of the womb) and into your womb itself. A speculum may be inserted in your vagina (as for a smear) to facilitate the procedure.

In order to get a good view a small amount of liquid is released through the hysteroscope into your womb. This can feel as if you are wetting yourself (please do not worry about this). The hysteroscopist needs to do this so that they are able to see the whole of the lining of your womb. A biopsy (a little bit of tissue) from the lining of your womb may be taken at this time. Occasionally small polyps may be removed or cauterised under local anaesthetic.

What will happen after the procedure?

After the examination the doctor will discuss your future management with you. If the decision is made for the procedure to be performed under a general anaesthetic a separate date for admission will be arranged. You will also be informed if you require any follow up outpatient appointments.

How do I receive the results of any specimens taken?

You will be informed of any noticeable issues or any further treatment required on the day of your procedure. If any pathology (tissue sample) is taken that can take up to 4 weeks for the results to be ready. A follow up appointment will be arranged so you can discuss the results with the consultant.

Does it hurt? How will I feel afterwards?

Most patients leave after the procedure saying it was not as bad as they expected. There may be a small amount of vaginal bleeding lasting two to three days following the procedure. Please contact your GP if you are worried.

What should I do when I return home?

When you arrive home you should rest for the remainder of the day.

Is the procedure safe?

Hysteroscopy is safe and complications are rare. Complications that have been noted include:

- injury to the cervix or uterus that may require further surgery (this is a rare complication leading to less than 1 in 1000 requiring surgery)
- infection
- bleeding
- Failed procedure (approximately 4%)
- adverse reaction to the anaesthetic.

These are all temporary problems and are easily treated. There should be no long term complications.

What are the advantages to having the hysteroscopy as an outpatient?

- There are no unwanted side effects of general anaesthetic.
- You can consult with the hysteroscopist during and immediately after the procedure.
- You will be able to go home soon after the procedure with a plan for future treatment as required.

Any further questions?

Please phone the Spencer Private Hospital ward 01843 234555.

Any complaints, comments, concerns, or compliments

A questionnaire is available to you should you wish to offer comments or suggestions relating to your stay with us. All comments good or bad are taken seriously and Spencer Private Hospitals has a formal procedure for dealing with the information that you give us. A member of the Senior Management Team is always available to see you.

Complaints Procedure

We have a formal procedure for investigating and reporting complaints. If you are not satisfied with any aspect of your stay with us please ask to speak to the Ward Manager.

If you wish to formally complain about any aspect of your care, please write to Lynn Orrin, Hospital Manager at Spencer Private Hospitals.

SHOULD YOUR COMPLAINT NOT BE SATISFIED?

If your care is funded by NHS, you should complain to the Clinical Commissioning Group using its complaints procedure.

If you are not happy with this reply you can ask the Parliamentary and Health Service Ombudsman.

Contact details:
Parliamentary and Health Service Ombudsman
Millbank Tower,
Millbank
London
SW1 4QP
www.ombudsman.org.uk

If your care is privately funded and you are not satisfied with the reply from the Hospital Manager you can contact ISCAS the Independent Sector Complaints Adjudication Service on the Association of Independent Healthcare Organisations website:

www.independenthealthcare.org.uk

After reading this information, do you have any further questions or comments? If so, please list below and bring to the attention of your nurse or consultant.

Would you like the information in this leaflet in another format or language?

We value equality of access to our information and services and are therefore happy to provide the information in this leaflet in Braille, large print or audio - upon request.

If you would like a copy of this document in your language, please contact the ward or department responsible for your care.

Pacjenci chcący uzyskać kopię tego dokumentu w swoim języku ojczystym powinni skontaktować się z oddziałem lub działem odpowiedzialnym za opiekę nad nimi.

Ak by ste chceli kópiu tohto dokumentu vo vašom jazyku, prosím skontaktujte nemocničné pracovisko, alebo oddelenie zodpovedné za starostlivosť o vás.

Pokud byste měli zájem o kopii tohoto dokumentu ve svém jazyce, kontaktujte prosím oddělení odpovídající za Vaši péči.

Чтобы получить копию этого документа на вашем родном языке, пожалуйста обратитесь в отделение, ответственное за ваше лечение.

We have allocated parking spaces for disabled people, automatic doors, induction loops and can provide interpretation. For assistance, please contact a member of staff.

This leaflet has been produced with and for patients

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