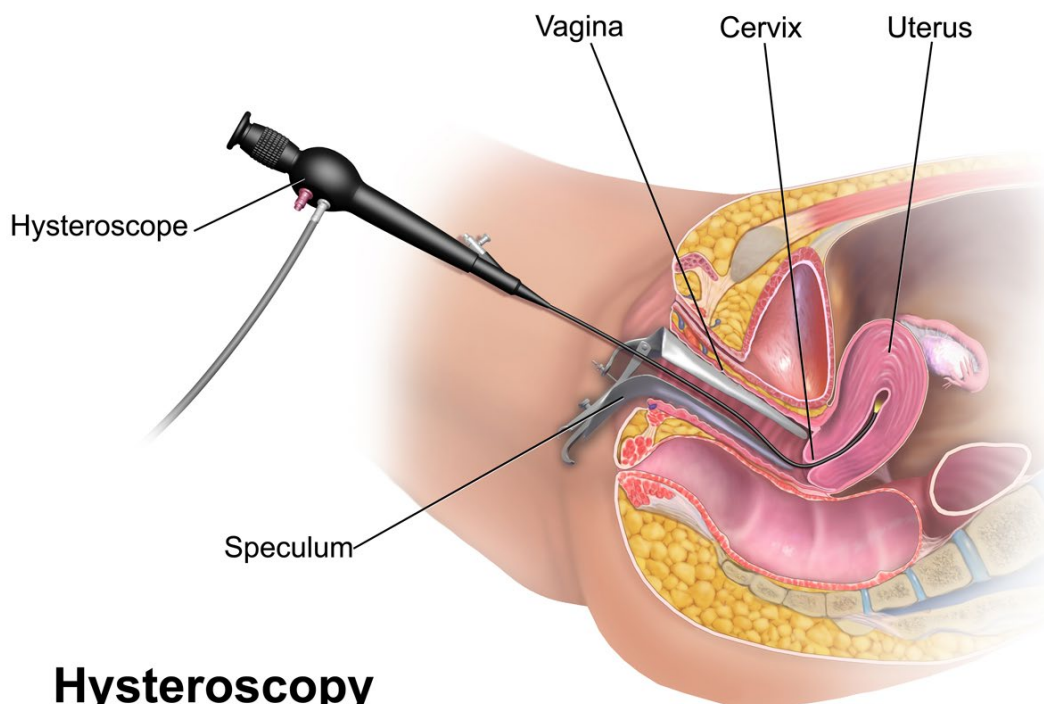


What is an office hysteroscopy?

This is a procedure where a doctor uses a thin tube with a tiny camera to look inside the uterus. There are no incisions. Saline solution is used to expand the uterus to look inside.



Hysteroscopy

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Why is this procedure used?

The procedure allows us to see if there are any abnormalities in your uterus such as polyps, fibroids or scarring. Hysteroscopy can also be used to remove an intrauterine device.

How do I prepare for the procedure?

- Schedule a good time. The hysteroscopy **cannot** be performed **during your menstrual cycle** or if you **may be pregnant**.
 - The best time to have this procedure is within the 7 days after your period ends. If you are actively bleeding 2 days before the procedure, please call (734) 763-6295 to reschedule your appointment.
- There are no restrictions on activity or diet before the hysteroscopy unless otherwise instructed by your doctor.
- You may take 600 mg of ibuprofen 1-2 hours before the procedure if necessary unless otherwise instructed by your doctor. Most people tolerate the hysteroscopy without any medication.
- If you have problems with pelvic exams, please talk with your referring doctor before scheduling an appointment for hysteroscopy. The doctor who recommended hysteroscopy can contact our office to determine if this procedure can be done in the office.

What can I expect when I arrive at the clinic?

1. You will check in at the clinic front desk.
2. Your blood pressure, heart rate and temperature will be checked before you are taken to a room in the clinic.
3. You will be asked to change into a gown.
4. Your provider will talk to you about your individual circumstances, but a urine pregnancy test will be performed on the day of your procedure.

What can I expect during the procedure?

Your blood pressure and heart rate may be checked again during the procedure, if necessary. Anesthesia is not normally used for this office procedure. Most people experience little or no discomfort.

- Hysteroscopy typically lasts 5 minutes or less.
- A speculum is placed in the vagina just like during a routine pelvic exam. The cervix (entrance to the uterus) is cleaned with iodine or another cleansing solution.

- The thin tube with a tiny camera is inserted through the cervical opening into the uterus. If you wish, you can watch the procedure on a television monitor. Any findings will be explained to you during the procedure.

What are the possible risks from this procedure?

A hysteroscopy is a very safe procedure that rarely causes problems. Although there can be problems that result from this procedure, we work very hard to make sure it is as safe as possible.

However, problems can occur, even when things go as planned. You should be aware of these, how often they happen and what will be done to correct the situation. Risks include:

- Bleeding
- Pain
- Infection
- Puncturing the uterus

Rare complications include damage to the vagina or cervix or scarring of the cervix or uterus. It is also possible that we may not find what is causing your existing problem.

What happens after the procedure?

- You may take 600 mg of ibuprofen every 6 hours after the procedure
- You may experience mild cramping which should end when the procedure is finished.
- You may experience spotting or watery discharge following the procedure.
- A report about the results of the hysteroscopy will be sent to your referring doctor.

What problems should I pay attention to after the procedure and once I'm at home?

- Call our office if you experience:
 - Excessive bleeding
 - Cramping
 - Fever
 - Chills
 - Abdominal (belly) or pelvic pain

Will I have any limitations afterwards?

Please refrain from sexual intercourse and do not put anything in your vagina for 24 hours. There are no other restrictions on activity or diet following the hysteroscopy, unless otherwise instructed by your doctor.

Will I have a follow-up appointment?

- After the hysteroscopy and before you leave the clinic you may need to make an appointment with your primary health care provider to review the findings and discuss your future care.
- **If you have any further questions or concerns about preparing for the hysteroscopy, or the procedure itself, please talk with your doctor.**

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