

Hysteroscopy Guidelines

Hysteroscopy is an exam that allows a doctor to look inside your uterus. It uses a hysteroscope, which is a thin, lighted camera. It is inserted through the vagina and cervix into the uterus. No incisions (cuts) are made.

This exam is helpful in finding the cause of health problems such as:

- Abnormal bleeding.
- Scar tissue or growths.
- Trouble getting pregnant.

Sometimes it can also be used to treat these problems.

This exam takes about 60 minutes or less. It depends on how complex the exam is. It can be done in the office under local anesthesia (while awake) or in the operating room under sedation (asleep).

Before the Exam

It is important that you are not pregnant. You must meet one of these requirements to have this exam:

- It has been less than 7 days after start of a period.
- You have **not** had sex since the start of a period.
- You use a reliable method of birth control.
- It has been less than 7 days after a miscarriage or abortion.
- It has been less than 4 weeks after a birth, or 6 months if fully breastfeeding and no period.

Hysteroscopy (In Office)

- Take 800mg of ibuprofen one hour before the exam with food. This will help with cramping after.
- You may eat as normal the day of the exam.
- You should have a light snack within 1-2 hours of the procedure. Do not arrive fasting.
- Most people can drive themselves home (unless taking anti-anxiety medicine).
- If you take anti-anxiety medicine, you will need to arrive 45 minutes before your appointment time. You will sign a consent form before taking the medicine. You will need someone to drive you home.

Hysteroscopy (Operating Room)

- **No** solid food after midnight. A pre-op nurse will contact you before the procedure for further instructions.
- You will stay in the recovery area for 2-3 hours. Nurses will watch you during this time to be sure you are safe to go home.
- Most people go home the same day. You will need someone to drive you home.
- **Do not** drive for 24 hours.
- It is safe to resume normal activities within 1-2 days. Most patients return to work, school, and normal routine in this time.

After the Exam

You may have:

- Mild nausea from medicines.
- Lower abdominal/pelvic cramping for 24-48 hours.

These symptoms will improve over time.

Bleeding

Bleeding may range from like a normal period to only a small amount of watery discharge. Some patients will not bleed at all.

Light, irregular bleeding may occur for several days to a few weeks. It may begin as a watery discharge that is red/pink in color and change to more of a rust or brown colored discharge which is normal. Small clots and bits of tissue are normal.

This exam affects the uterine lining and may change the normal timing of your next period. You may get your period earlier or later than normal (anywhere from a few days to several weeks).

Diet

If you feel sick to your stomach, start out slowly with liquids such as broth, tea or Jello. Add solid foods to your diet as you feel better.

Pain Relief

If you have pain or cramping, take up to 1000mg of acetaminophen every 8 hours (such as Tylenol®) and/or ibuprofen 400-600 mg every 4-6 hours (such as Advil® or Motrin®). Your doctor may also prescribe stronger pain medicine for you.

Do not take more than 3000mg of acetaminophen or 2400mg of ibuprofen in a 24-hour period.

Activity

- **Do not** use tampons until discharge stops. You may use pads.
- Swimming or sitting in a hot tub is okay. You may want to avoid if actively bleeding.
- **Do not** have sex until after the bleeding or discharge stops.
- **Do not** douche.

Results

If tissue is removed, it is sent to the lab for review. You will receive follow up communication from your provider or clinic with results or at a scheduled follow up visit with your OB/GYN provider.

Follow Up Visit

If a visit is needed, it will be scheduled 2-3 weeks after your procedure.

When to Call

- A fever over 100.4°F for two readings taken 4 hours apart
- Severe abdominal pain not relieved by pain medicines or other comfort measures (heating pad)
- Heavy bleeding, soaking through a pad every hour for 2-3 hours in a row
- Foul smelling, cloudy or greenish discharge
- Severe nausea and vomiting where you are unable to keep down food and liquids

Who to Call

If you have any questions or concerns, call your doctor or nurse: _____