



BASIC INFORMATION

DEFINITION

The hysteroscope is a small lighted telescope used for visual examination of the cervix and the uterus to help diagnose and treat infection or abnormalities within the genital tract.

REASONS FOR PROCEDURE

- Evaluation and treatment of abnormal uterine bleeding.
- To view the status or location of an IUD (intrauterine device).
- Infertility.
- Habitual abortion.
- Uterine polyps, fibroids or adhesions (e.g., Asherman's syndrome).
- Obstructed fallopian tubes.
- Congenital malformations.
- Staging of cancer.
- Placement of silicone plugs for tubal sterilization.

RISK INCREASES WITH

- Active uterine bleeding.
- Current infection.

DESCRIPTION OF PROCEDURE

- The procedure may be performed in the doctor's office, an outpatient facility or a hospital. A general or a local anesthetic is used.
- The urinary bladder is drained and the cervix is gradually dilated.
- Fluid or carbon dioxide gas (CO₂) may be used to distend (enlarge) the uterine cavity to improve visualization and allow any operative manipulations to be achieved.
- The hysteroscope is passed through the vagina and cervix into the uterine cavity for viewing. Video monitoring is often used at the same time.
- A variety of instruments are available for use in hysteroscope procedures including microscissors, special clamps with electrocautery attachment, wire loops for excision and lasers when needed.
- The examination and any surgical measures will be performed.
- The hysteroscope is withdrawn.

EXPECTED OUTCOME

- There may be some discomfort following the procedure.
- Hysteroscopic diagnostic studies may rule out a medical problem or indicate the need for further evaluation and treatment.
- Hysteroscopic treatment or surgical procedures have a high success rate.

POSSIBLE COMPLICATIONS

- Uterine perforation.
- Excessive bleeding.
- Pelvic infection.
- Allergic reaction to the fluid used to distend the uterus.



POSTPROCEDURE CARE

GENERAL MEASURES

- Following the procedure, the medical workers will monitor your vital signs for a period of time. Have someone drive you home.
- There may be some slight bleeding and cramping. Use sanitary napkins for the bleeding.

MEDICATION

- Medicine is usually not necessary following the procedure. In some surgical procedures, estrogen may be prescribed to promote regrowth of the uterine lining.
- You may use nonprescription drugs, such as acetaminophen for minor pain.

ACTIVITY

- Rest at home the rest of the day. Additional restrictions may be required depending on the extent of the surgical procedure.
- Avoid sexual intercourse for 2 weeks or as directed.

DIET

No special diet.



NOTIFY OUR OFFICE IF

Any of the following occurs:

- Excessive bleeding.
- Signs of infection develop: headache, muscle aches, dizziness or a general ill feeling or fever.
- New, unexplained symptoms develop, such as nausea, vomiting, constipation or abdominal swelling.