



Patient Information

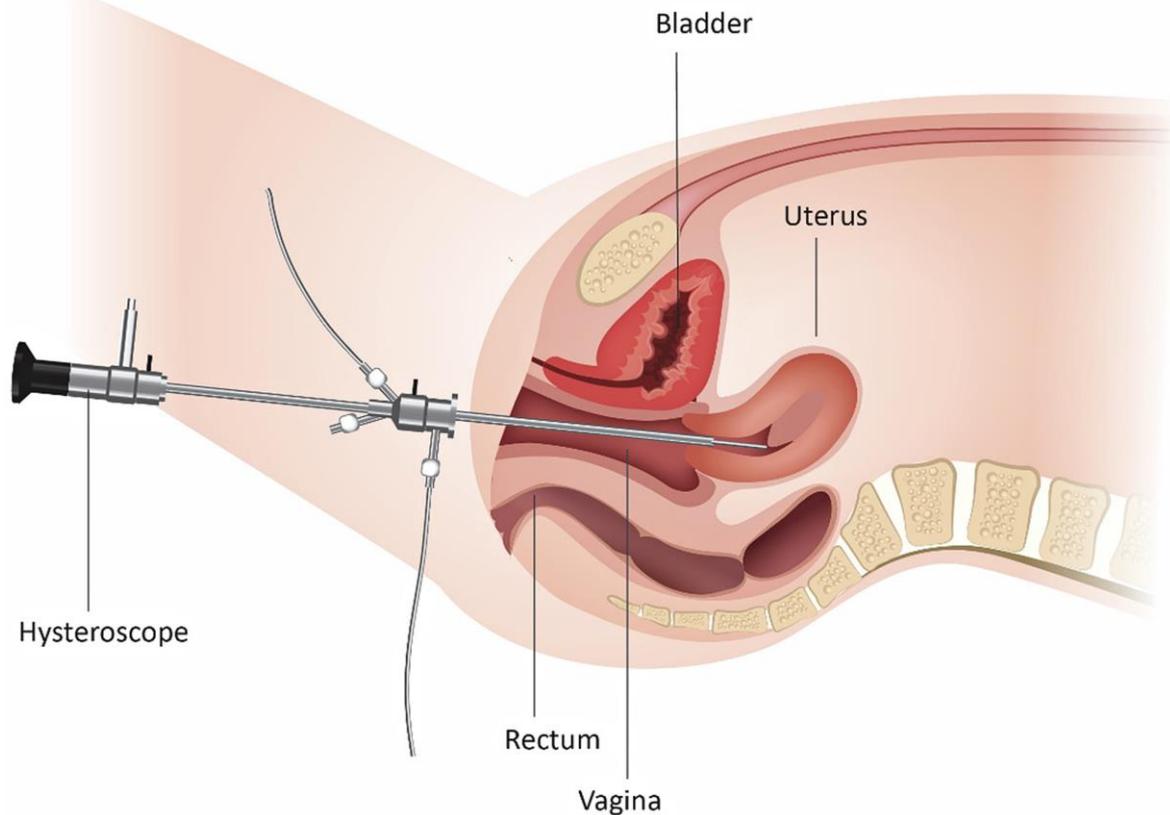
Consent form for Women Attending Outpatient Hysteroscopy

This information is for you if you have been offered hysteroscopy as an outpatient. It may also be helpful if you are a partner, relative or friend of someone who has been offered this procedure. A glossary of medical terms is available on the RCOG website at: www.rcog.org.uk/en/patients/medical-terms

KEY POINTS

- Outpatient hysteroscopy (OPH) is a procedure carried out in the outpatient clinic that involves examination of the inside of your uterus (womb) with a thin telescope
- There are many reasons why you may have been referred for this procedure such as to investigate a change to your bleeding, to remove a polyp seen on scan or to remove a coil with missing threads
- The actual procedure only takes between 5-10 minutes
- You may feel pain or discomfort during OPH. It is recommended that you take your usual pain relief 1-2 hours before the procedure
- If it is too painful it is important to let your healthcare professional know as the procedure can be stopped at any time
- You may choose to have the hysteroscopy under general anaesthetic. This will be done in an operating theatre and usually as a daycase procedure
- Possible risks of the OPH include pain, feeling faint or sick, bleeding, infection and rarely uterine perforation (damage to the wall of the womb) however this is less likely during OPH when compared to hysteroscopy under general anaesthesia.

Consent form for Women Attending Outpatient Hysteroscopy



An OPH is a procedure that involves examining the inside of your uterus. This is done by passing a thin telescope-like device, called a hysteroscope that is fitted with a small camera through the neck of your uterus (cervix). The healthcare professional doing the procedure can then see whether there are any problems inside your uterus that may need further investigation or treatment.

What happens during outpatient hysteroscopy?

On arrival you will meet your healthcare professional who will take a history and discuss the procedure with you. Your consent will be asked for. Please take the opportunity to ask any questions you may have.

There will be other nurses in the room; one of them will support you throughout the procedure. Occasionally there may be a trainee doctor or medical student present but only with your consent. Your chaperone/support nurse will help you get positioned onto a special chair and will keep you as covered as possible.

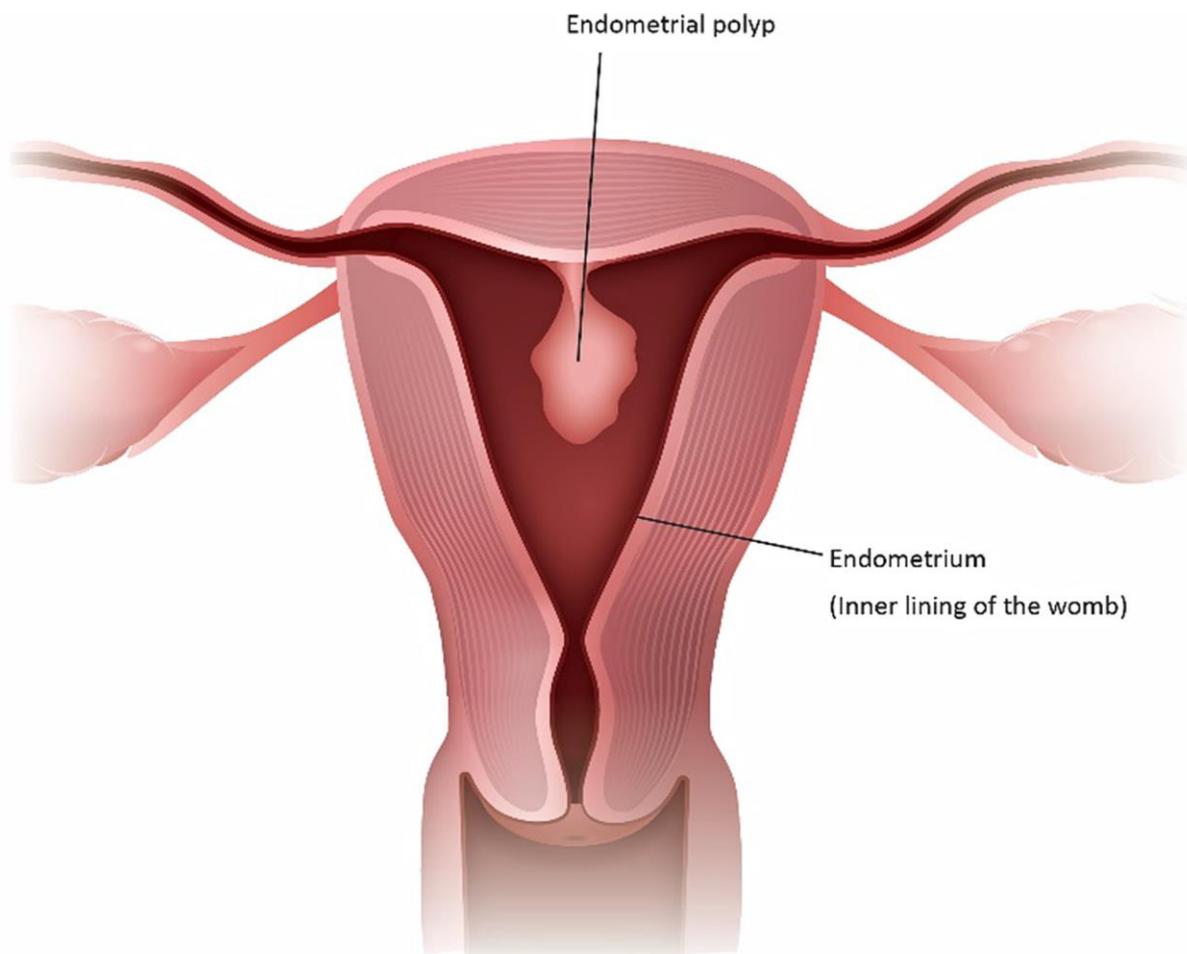


Consent form for Women Attending Outpatient Hysteroscopy

The hysteroscope is passed through the cervix to obtain a clear view of the inside of your uterus; certain landmarks need to be viewed which lets us know the procedure has been successful. No cuts are made. Fluid (saline solution) is used to help see the inner lining of your uterus and you will feel wet as it trickles out. During the OPH you will be able to watch the procedure on the screen if you wish and photographs of the findings are taken and kept in your medical notes.

If no problems are found, the actual procedure will only take between 3-5 minutes. Usually a biopsy is taken (a small sample from the lining of the uterus), this will be sent to laboratory for testing and the results can take between 3-6 weeks to come back. The biopsy can be painful but the pain should not last long.

If a small fibroid or polyp is found this can sometimes be removed at the first visit however it is more likely you will be offered another appointment for this. This can be done using local anaesthetic or sometimes under general anaesthetic as a day case and depends on how you tolerated the OPH and the size and position of the polyp/fibroid.





Consent form for Women Attending Outpatient Hysteroscopy

Why have I been referred for outpatient hysteroscopy?

You may have been referred for OPH for one of the following reasons:

- bleeding after the menopause (postmenopausal bleeding)
- very heavy bleeding or changes to bleeding
- bleeding between periods
- irregular bleeding whilst on hormonal treatment
- removal of a coil when the threads are not visible at the cervix
- fertility concerns
- to investigate something seen inside the uterus on an ultrasound scan such as endometrial polyp or fibroid

The purpose of your appointment is to find the cause of your problem and to plan or undertake further treatment if required however, your healthcare professional will discuss your options and whether OPH is right for you.

Minor procedures can also be done at the same visit such as:

- endometrial biopsy (taking a sample from the lining of the uterus using a thin tube which is passed through the cervix)
- Removal of a coil from the uterus when the threads are not visible
- Insertion of a hormone-releasing intrauterine device such as the Mirena

Important information to consider prior to hysteroscopy examination

- eat and drink normally, do not starve yourself prior to the appointment
- take pain relief at least 1 hour prior to your appointment
- bring a list of medications with you
- this procedure must not be performed if there is any chance that you are pregnant. It is therefore important you use contraception or avoid sex between your last period and your appointment. If there is uncertainty, a pregnancy test will be offered
- If you are bleeding please attend, sometimes if the bleeding is too heavy then your appointment may need to be rescheduled but we will let you know.

Will outpatient hysteroscopy hurt?

For most women, OPH is quick and safe and is carried out with little pain or discomfort however, everyone's experience of pain is different and some women will find the procedure **very** painful. If it is too painful for you, let your healthcare



Consent form for Women Attending Outpatient Hysteroscopy

professional know as the procedure can be stopped at any time you wish. Your healthcare professional may offer local anaesthetic injection into your cervix however, it is important to know that whilst it may numb the cervix, it may not prevent the uterus from cramping.

You may be offered nitrous oxide (Entonox or 'gas and air') to help with your pain. In this case you may be asked to sit in the recovery room for a short while before you can drive.

If you feel anxious about the procedure, please call **gynaecology outpatients on 01793 605252** and speak to one of our nurses.

What are the possible risks?

- **Pain during or after OPH** – it is usually mild and similar to period pain. Simple pain relief medications can help. On occasion, some women may experience severe pain
- **Feeling sick or fainting** – Can affect a small number of women. However, these symptoms usually settle quickly. Let your healthcare professional know if you are feeling unwell during or straight after the procedure
- **Bleeding** – Is usually very mild and watery but lighter than a period settling within a few days. It is recommended you use sanitary towels, not tampons. If the bleeding does not settle or gets worse call us on the above number. Out of hours you may need to attend your nearest walk in centre
- **Failed/unsuccessful OPH** – Occurs for a few reasons such as if it is not possible to pass the telescope inside your uterus, if there is too much bleeding or for some reason the landmarks cannot be clearly seen.
- **Damage to the wall of the uterus (uterine perforation)** – rarely, a small hole is accidentally made in the wall of the uterus. This could also damage nearby tissues. It happens in fewer than 1 in 1000 diagnostic hysteroscopy procedures but is slightly more common if someone has a polyp or fibroid removed. It may mean that you need to stay in hospital overnight. Usually nothing needs to be done but on occasion a further operation may be required to repair the hole.

How long does the visit take?

The consultation and examination will take approximately 30 minutes; the consultation will take approximately 20 minutes although the examination will take between 5-10 minutes

If you feel unwell you will be asked to rest in the outpatient recovery area for a short while



Consent form for Women Attending Outpatient Hysteroscopy

How will I feel afterwards?

You may get some period-like pain for 1-2 days and also some spotting or fresh red, watery bleeding that may last up to 1 week. Use pads not tampons

Normal activity including sex can be resumed when bleeding/discharge has settled. If needed take simple pain relief as recommended on the packet.

Any questions or concerns please contact gynaecology outpatients on 01793 605252 but in an emergency please call out of hours or attend the Emergency Department.

What happens next?

If no problems are found you will be discharged back to the care of your GP. If you had a biopsy taken, you will receive the results between 3-6 weeks following your appointment and your healthcare professional will discuss any further treatments with you.

About intimate examinations

The nature of gynaecological and obstetric care means that intimate examinations are often necessary. We understand that for some people, particularly those who may have anxiety or who have experienced trauma, physical or sexual abuse, such examinations can be very difficult. If you feel uncomfortable, anxious or distressed at any time before, during, or after an examination, please let your healthcare professionals know. If you find this difficult to talk about, you may communicate your feelings in writing. Your healthcare professionals are there to help and they can offer alternative options and support for you. Remember that you can always ask them to stop at any time and that you are entitled to a chaperone to be present. You can also bring a friend or relative if you wish.



Consent form for Women Attending Outpatient Hysteroscopy

Personal Details (Please complete)

Name:

Address:

I have read and understood the information sent to me

I consent to outpatient hysteroscopy examination

I am aware of my choice to have this procedure under general anaesthetic but choose to have it as an outpatient procedure

I am aware of the risks of the OPH including pain, feeling faint or sick, bleeding, infection and rarely uterine perforation (damage to the wall of the womb)

I understand that a photograph may be taken which will be filed in my notes and is for medical use

I consent for these images to be used for audit, training and teaching purposes

I understand that a biopsy of tissue may be taken

I consent to insertion of a Mirena IUS

Signature:

.....

Date:

.....



Consent form for Women Attending Outpatient Hysteroscopy

From 1st January 2019 smoking will not be permitted on any NHS site in England. Smoking will not be permitted within any of our buildings or anywhere outside on our sites. Smoking facilities will not be provided. Please be considerate of others when vaping in hospital grounds.

This information sheet is available to order in other languages and formats. If you would like a copy, please contact us on 01793 604031 or email gwh.pals@nhs.net

Document Control

Division: Women & Children's
Department: Gynaecology
Approved Date: 21 March 2019
Next Review Date: April 2022
Document Number: W & C PIL-0067