

Outpatient Hysteroscopy (OPH)

At Home:

- You may resume your normal activities on the same day, or the following day.
- Sexual intercourse can be resumed when bleeding and discomfort have subsided.
- During recovery you may experience mild abdominal cramping; this can be relieved by using pain medication, as per your doctor's orders.
- You may experience some spotting or light bleeding for a few days following the procedure. Spotting or light bleeding is normal; however, heavy bleeding should be immediately reported.

Note:

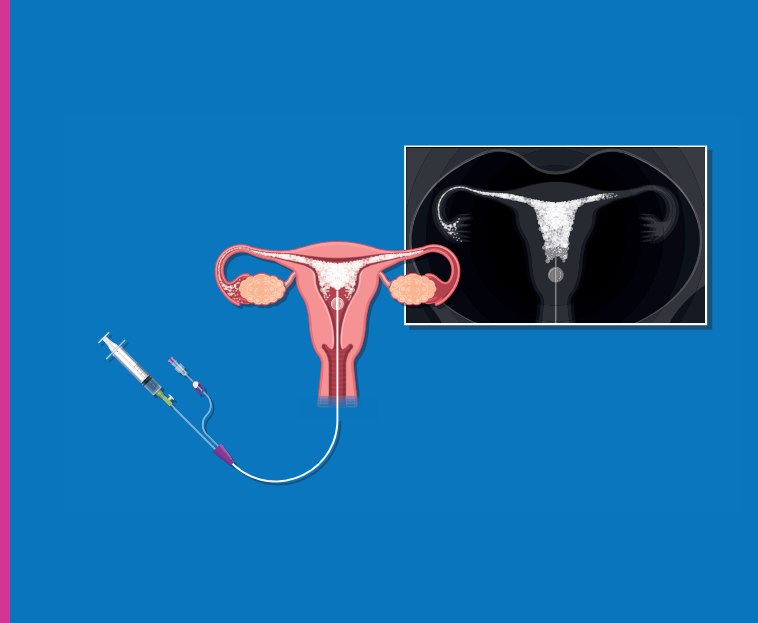
If symptoms persist, you should go to the Emergency Department at any time.

When to seek medical help

- If you have a fever ($^{\circ}$ 38C or $^{\circ}$ 100.4F).
- If you have heavy bleeding.
- If you experience foul-smelling vaginal discharge.
- If you have severe abdominal pain.

References

1. <https://www.nhs.uk/conditions/hysteroscopy/2018> [accessed on 2019/9/29]
2. www.rcog.org.uk/en/patients/other-sources-of-help [accessed on 2019/10/01]
3. <https://my.clevelandclinic.org/health/treatments/-10142hysteroscopy> [accessed on 2019/10/01]



Hysteroscopy Clinic

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Women's Wellness and
Research Center

Outpatient Department

مركز صحة المرأة والأبحاث
Women's Wellness and Research Center

عضو في مؤسسة حمد الطبية
A Member of Hamad Medical Corporation



Outpatient Hysteroscopy (OPH)

This leaflet outlines the Outpatient Hysteroscopy (OPH) procedure and has been designed to help you physically and psychologically prepare for this procedure.

Key Points

An Outpatient Hysteroscopy is a diagnostic or operative procedure done in an outpatient setting to investigate abnormal uterine bleeding, infertility issues, or family planning. As part of the procedure, a physician may also perform a pap smear, sampling or biopsy, insertion or removal of a lost IUCD, removal of polyps with or without local anesthesia, and may use an ultrasound.

What is an Outpatient Hysteroscopy (OPH)?

An OPH is an assessment procedure carried out in an outpatient clinic and involves the insertion of a thin telescope through your cervix to examine your uterine cavity. It is an important diagnostic tool and can be used to determine further required investigation and treatment options.

Why OPH?

This is achieved through the following advantages:

- Only one to two clinical visits required for a full assessment.
- Quick recovery as no general anesthesia is used.
- No hospital stay.
- Fewer complications.

Why Have I Been Referred for an Outpatient Hysteroscopy

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

- Postmenopausal bleeding.
- Menorrhagia (abnormally heavy bleeding during periods).
- Irregular bleeding.
- Thickened endometrium.
- Endometrial or multiple polyps.
- Infertility.
- Removal of lost coil or loop.

What Should I Do on the Day of My Appointment?

- You may eat and drink normally before the appointment.
- Bring a list of medications that you are taking.
- If pain relievers have been prescribed, they should be administered as per your doctor's instruction before leaving home.
- It is important to use contraception or avoid sex between your last period and your appointment to avoid the possibility of pregnancy.

On Arrival at the Women's Wellness and Research Center (WWRC) Outpatient Department (OPD) Hysteroscopy Procedure Room

You will be asked:

- About vaginal bleeding.
- About the date of your last menstrual period.
- To pass urine to take a sample for a urine pregnancy test.
- To consent to the procedure if you have not already provided written consent.

Note:

Your physician will assess you before the procedure to determine if you are bleeding heavily as it will be difficult to do the procedure if you are. Before having the procedure, you are encouraged to speak to the doctor or nurse about what to expect and about pain relief options.

What are the Possible Risks of an Outpatient Hysteroscopy?

- The uterus or cervix can be punctured by the telescope during the procedure.
- Excessive bleeding.
- Infection.
- Failed or unsuccessful hysteroscopy.

During the Procedure

A hysteroscopy can take up to 30 minutes in total, although it may only last 5 to 10 minutes if it is being done to diagnose a condition. A hysteroscope (fine pencil-like telescope) is passed through the cervix to view your uterus. You may feel wet due to the water used to stretch the uterine cavity which is done to provide a clear view inside. Along with this flushing, you may feel menstruation-like cramps, especially when the scope is approaching the uterine cavity. Tell your physician if the procedure becomes very painful. Occasionally, local anesthesia will be used; however, if the pain is intolerable, the procedure will be stopped. During the procedure, you may watch a screen attached to the hysteroscope. Photographs and recordings of the findings are taken and kept for documentation.

What Happens After the Procedure?

Your physician will discuss the findings and treatment options with you after the procedure is completed. If a smear, biopsy, or polyps are taken, reports will be reviewed on your next doctor's visit. If no problems are found, you will be advised accordingly. Following the procedure, you will be transferred to an observation area to rest for ten to twenty minutes before being discharged.