



Sonohysterogram

- **You do not need to come with a full bladder. You will be asked to empty your bladder during the scan.**

What is a Sonohysterogram?

A sonohysterogram is a transvaginal ultrasound that uses saline (salt water) to evaluate the contour of the uterine cavity. The exam is used to assess:

- your uterine cavity is a healthy and unobstructed if being treated for infertility
- to assess for any hidden polyps, fibroids or lesions that could be causing abnormal bleeding.



Sonohysterography fills the uterine cavity with saline, outlining the polyp which could not be discretely seen with routine ultrasound.

When should it be done?

The procedure is performed in the first 10 days of your menstrual cycle.

It must not be done when you are or could be pregnant, so it is best planned for the first half of your cycle. The test is ideally performed **between day 5 and day 10** of the menstrual cycle (day 1 is the first day of your period).

If there is no chance of pregnancy (e.g., you are on the oral contraceptive pill or have completely abstained from sexual intercourse since the first day of your period), we may be able to do the test later than day 10.

If there is any doubt regarding possible pregnancy, the test will be rescheduled for the following month. It should not be done if there is any chance of acute pelvic infection. Discuss this with your referring doctor.

What happens on the day?

The study is performed by our gynaecologist along with the sonographer.

You do not need to have a full bladder. A scan through the abdomen may be performed initially and you will then be directed to the bathroom to completely empty your bladder, put on a gown and undress from the waist down.

You will be positioned on the bed with your feet comfortably resting at a lower level. A transvaginal ultrasound is then performed, where we will assess the shape and appearance of your uterus, the endometrium (lining of the uterus) and the ovaries.

- A speculum is inserted into the vagina, similar to the one used during a pap smear.
- The upper vagina is cleansed with antiseptic and a very thin (2mm) tube or catheter, is passed through the cervix into the uterus.
- The speculum is then removed and replaced by the trans-vaginal ultrasound probe.
- A small balloon on the catheter is inflated to keep the catheter in place. The first part of the test involves injecting normal saline into the catheter, which gives us information about the inside of the uterus.

Our doctor will discuss the procedure with you in detail prior to commencing. You will be given the opportunity to ask questions or discuss concerns.

What happens afterwards?

Most women are able to drive after the procedure. However, as some women may experience faintness or cramping pain, it can be helpful to have someone available to drive you home.

Minor cramping and some watery discharge from the vagina may persist for up to 24 hours. Occasionally there may be light bleeding or spotting. Rarely, you may experience symptoms of infection these include; fever, loss of appetite, pelvic pain or unusual vaginal discharge. If you have any concerns, contact your doctor as soon as possible.

How long does it take?

The preliminary pelvic scan takes approximately 20 minutes and the Saline Sonohystography procedure takes approximately 15 minutes.

Allow 45-60 minutes for your appointment.

How much does it cost?

It does cost more than a normal pelvic examination. It is a consultant led pelvic examination using saline and equipment specifically for highlighting the lining of the uterus.

Unfortunately, the equipment required for this procedure is very expensive and this is reflected in our overall cost. Please contact our reception staff for more information.

Is the test painful?

Most women experience only mild discomfort. Others may experience period-type cramping during the procedure.

This can be minimised by taking two tablets of an anti-inflammatory medication such as Ibuprofen less than one hour before the procedure. Women who are unable to take anti-inflammatory medications may substitute by taking paracetamol.

Are there any risks involved?

Some women feel faint during or after the procedure. It is important to let us know if you are feeling unwell. Infection as a result of the procedure occurs in less than 1% of women, most commonly if there is a history of pelvic infection.

It is important to discuss with your referring doctor whether you may be at risk of infection, and, if so, obtain a prescription for antibiotics to be taken a few hours prior to the procedure.

Things you should know

- It is done as part of an assessment for infertility or abnormal uterine bleeding.
- You do not need a full bladder for this exam.
- The study is best performed in the first 10 days of the menstrual cycle
- There will be some bleeding after this should stop within 24 hours
- It must not be done if you think you may have a pelvic infection. Please contact your GP first.

