



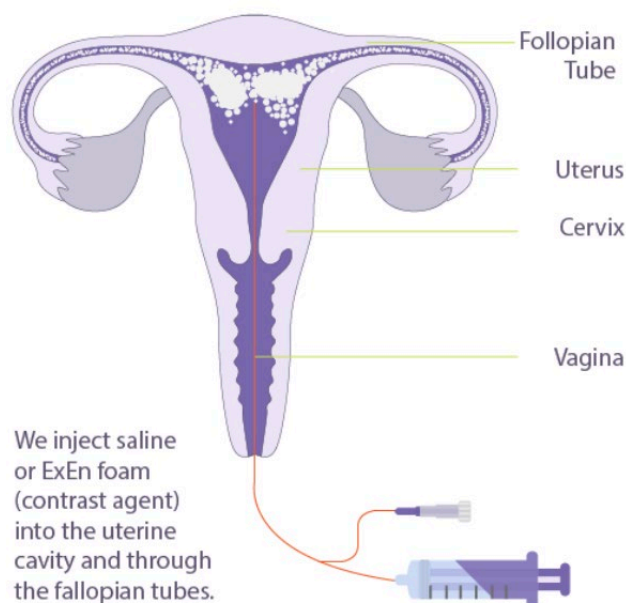
Hysterosalpingo Contrast Sonography

- ☑ **You do not need to have a full bladder.**
- ☑ **You need to be in day 7-10 of your cycle.**

What is hysterosalpingo Contrast Sonography?

HyCoSy (hysterosalpingo contrast sonography) is an ultrasound technique that assesses if the uterus and if fallopian tubes are open or blocked. It is usually requested by your doctor as part of an assessment of fertility or prior to treatment of infertility, even if another cause for infertility is known or suspected.

The procedure is performed by introducing fluid containing small bubbles into the uterine cavity, and watching with ultrasound to see if the fluid flows through the fallopian tubes and spills around the ovaries. The fluid/bubble mix we use is either normal saline mixed with air, or a fluid called ExEm foam gel, which is specifically designed to be used for this test.



When should it be done?

It is important that this test is not performed when you are, or could be pregnant, therefore, it is best planned for the first half of your cycle, ideally between **day 7 and day 10** (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. 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?

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.

We then inject a solution of tiny bubbles, which shows up intensely white on the ultrasound image. If the fallopian tubes are open, we can see the fluid passing through the tubes and spilling around the ovaries.

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 can 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 including fever, loss of appetite, pelvic pain, or unusual vaginal discharge. If you have any concerns, contact your doctor as soon as possible.

Is there an increased likelihood of pregnancy?

It is safe to try for pregnancy in the days and weeks following the procedure. In fact, it has been found that spontaneous pregnancy rates are higher in the cycle that the procedure is completed.

How long does it take?

Please allow 45-60 minutes for your appointment.

The preliminary pelvic scan takes approximately 20 minutes and the HyCoSy procedure takes approximately 15 minutes. Our doctor will discuss the results with you on the day and a more detailed report will be sent to your doctor.

How much does it cost?

It technique does cost more than a normal pelvic examination. It is a consultant led pelvic examination using special contrast and equipment specifically for highlighting the fallopian tubes and uterus.

Unfortunately, the contrast and 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 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

- This ultrasound done as part of an assessment for infertility.
- The study is best performed between **day 7 and day 10** of the menstrual cycle .
- There will be some bleeding after this which should stop within 24 hours.
- It must not be done if you think you may have a pelvic infection. Please contact your GP first if you feel you have developed an infection.

