

**Useful resource:**

- The Royal Australian and New Zealand College of Obstetrics and Gynaecology  
<http://www.ranzcog.edu.au/treatments/hysteroscopy.html>



# Hysteroscopy and Endometrial Sampling

Tena koutou katoa, Kia orana, Talofa lava,  
Malo e lelei, Fakaalofa lahi atu, Taloha Ni,  
Ni Sa Bula Vinaka,

Greetings and Welcome to the  
Women's Health Gynaecology Service

The National Women's Health website  
[www.nwhealthinfo.co.nz](http://www.nwhealthinfo.co.nz)

A Hysteroscopy with endometrial sampling is the technique used to investigate any unusual bleeding.

Hysteroscopy allows the doctor to look directly into the uterus. A thin telescope called a hysteroscope is inserted into the uterus. This allows the doctor to inspect the uterine cavity and the fallopian tube openings.

The D&C (dilation and curettage) describes the process where the cervix, (entrance to the uterus) is stretched or dilated. This allows the passage of instruments used for looking inside the uterus and removing a sample of the lining. Curettage is the name of the procedure where some of the uterine lining is scraped off and checked in the laboratory to check it is healthy. Often we only sample the endometrium which is less invasive.

Polyps and small fibroids may also be removed from inside the uterus during this procedure. The tissue that is removed is also sent to the laboratory for examination.

The procedure can be done without any anaesthetic, sometimes sedation, local anaesthetic or general anaesthetic is used if indicated.

**It is important to arrange for someone to drive you home after your procedure.**

**Please let us know if you need a medical certificate for time off work.**

## **Complications**

Although uncommon, possible complications when having a hysteroscopy include difficulties with carrying out the procedure such as, perforation of the uterus, excessive bleeding and infection.

This will be discussed with you before the procedure and there will be an opportunity to ask any questions and discuss any concerns you have.

## **Discharge advice**

### **Pain relief:**

You may get some discomfort for the next 1-2 days. You may find Panadol helpful as pain relief. If this does not control the pain contact your G.P.

### **Preventing and detecting infection:**

We recommend that you

- Complete taking any antibiotics that have been prescribed for you.
- Use sanitary pads rather than tampons until the bleeding has stopped
- Avoid sources of possible infection such as spa pools and swimming pools for 2 weeks after the procedure, or until bleeding has stopped. Shower instead of bath.
- Contact your G.P straight away if you develop flu like symptoms, have a tempera-

ture over 38 degrees C, have pain or difficulty passing urine or if bleeding becomes heavy and you pass clots or have smelly vaginal discharge.

### **Sexual Activity:**

We advise you not to have sexual intercourse for 2 weeks or until the bleeding has stopped.

### **Follow up appointment:**

Usually the doctor will call you for a follow up phone call instead of you needing to attend a clinic.

Sometimes you may be given an appointment for the gynaecology outpatient's clinic at Greenlane Clinical Centre to discuss the results of the procedure and any further treatment that may be necessary.