

What is a Hysteroscopy?

Hysteroscopy is a procedure carried out to look inside the uterus using a hysteroscope. This is a thin scope, attached to a camera that is inserted through the cervix and into the uterus. This instrument is then attached to a light source allowing the uterine cavity to be examined on a video monitor.



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This information sheet is a brief outline of this problem and is not intended to replace verbal communication with the medical or nursing staff.



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Hysteroscopy


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What are the benefits of having this surgery?

This surgery will enable the surgeon to view the internal structures of the uterine cavity without the need for a lengthy operation requiring an incision to the abdomen. The shape and lining of the uterus are examined. The uterus is also inspected for any evidence of intrauterine pathology (fibroids or polyps). Attempts are made to visualize the openings to the fallopian tubes (tubal ostia). During this procedure, it is possible to remove polyps and take samples of the lining of the uterus. Other benefits include increased pregnancy rates by 10-15%, after embryo transfers.

Do I need anesthetic?

Our doctors recommend anesthesia in the form of intravenous (IV) sedation for all our patients. This allows for a more thorough examination with a clearer view without causing discomfort. The procedure is typically done on an out-patient basis, where the patient does not require admission to the hospital, and lasts approximately 15-20 minutes. If an admission is necessary, our doctors will be able to discuss the benefits of which is most suitable for you.

What alternatives do I have?

Recommendations for alternatives depend on the reasons for having this investigation. Other possibilities may be an ultrasound scan or a surgery to view the pelvis. The doctor can discuss alternative investigations or treatment options if they are applicable to your case.

What happens following Hysteroscopy?

Sometimes, small tissue samples or biopsies are taken. You will be told if this is the case. These will be sent to the laboratory for examination. You will be advised of the results as soon as they are available.

Upon discharge, you will be advised to rest for 1-2 days. You may experience minimal bleeding for up to 7-10 days. Pain is usually mild and simple pain medication such as Advil, Motrin, or Tylenol are effective in most cases. If the doctor thinks you require stronger pain medication, he will prescribe this for you before you leave.

What are the risks involved with a Hysteroscopy?

Hysteroscopy is a fairly safe procedure with minimal risks for complications. The most common complications include prolonged bleeding and infection. As a way to prevent infection, all of our patients take a course of antibiotics. If abdominal discomfort, foul smelling discharge, or a fever develops, these are signs of infection. Please contact the office immediately.

Other complications, although very rare, may include perforation of the uterus, bowel, or bladder. This will usually heal without surgical intervention but may result in you needing hospitalization so that you may be observed closely.

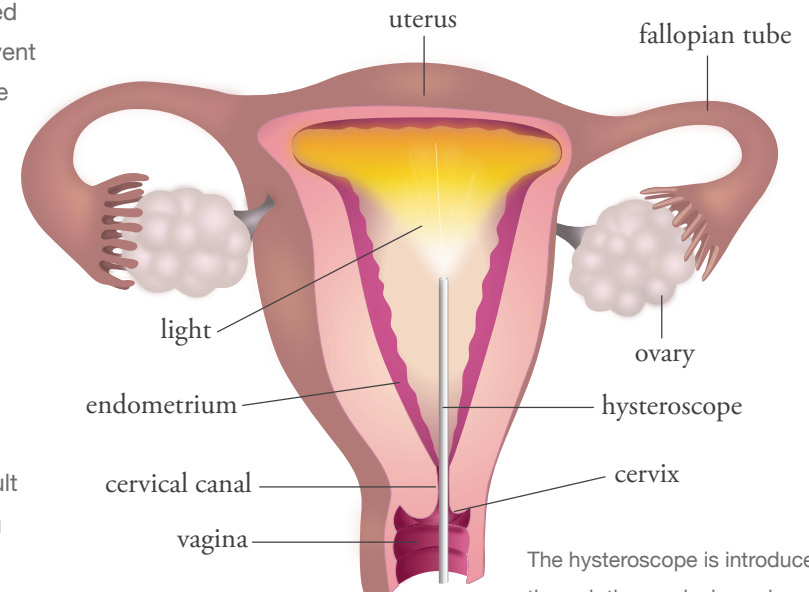
An extreme rare complication is weakening of the fibers and muscles of the cervix (neck of the uterus). If this does happen, it can increase the risk of late miscarriage.

It is important to note that there is a small possibility that the surgery cannot be completed. This depends on findings at the time of surgery. If this occurs, you will be informed of the reason for inability to complete the surgery.

When will I be back to normal?

You should be able to return to work in 1-2 days after surgery. If you feel unable to resume normal activities after this time, please contact our medical staff.

On discharge home, you are advised not to have intercourse for at least 7 days to avoid the risk of infection. Please follow-up with our office on the date instructed.



The hysteroscope is introduced through the cervical canal and into the uterus. No incision is necessary.

