

Gynaecology, sexual health, reproductive and retroviral medicine

Having a hysteroscopy in the outpatient clinic (OPH)

Information for patients, relatives and carers

Introduction

This information is for you if you're planning to have a hysteroscopy procedure as an outpatient. Please feel free to ask our team any questions you have about the information below.

Key points

<p>What is a hysteroscopy in the outpatient clinic?</p>	<p>A small telescope is passed through your cervix to examine the inside of your womb (uterus). Your cervix is the entrance to your womb and connects to your vagina. You can have this in the outpatient clinic. We call this an outpatient hysteroscopy or OPH.</p>
<p>Reasons why you're having an OPH include:</p>	<ul style="list-style-type: none"> • investigation or treatment of abnormal bleeding, or both • removal of a small growth called a polyp seen on a scan • removal of a small growth called a fibroid seen on a scan
<p>You cannot have an OPH if there's any chance you're pregnant</p>	<p>So, it's important you use contraception or avoid sexual intercourse from your last period until your procedure has been done. We'll ask for a sample of your pee to do a pregnancy test.</p>
<p>The OPH procedure takes 5 to 15 minutes</p>	<p>Expect the whole appointment to take about an hour.</p>
<p>Take pain relief an hour before your appointment</p>	<p>Everyone's experience of pain is different. Most women say the OPH causes mild discomfort, but you may feel pain like period pain. So, take pain relief one hour before the procedure, such as ibuprofen 400mg and paracetamol 1g, unless you are allergic.</p>
<p>Tell us about your pain</p>	<p>If it's getting painful, we can use other painkillers during the procedure, if it safe for you.</p> <p>If it becomes too painful, we can stop at any time.</p>
<p>You can choose to have the hysteroscopy under general anaesthesia</p>	<p>This is done in the operating theatre, usually as a day case procedure. Please contact us to discuss this, using the contact details on page 5 of this leaflet.</p>

What is outpatient hysteroscopy (OPH)?

An outpatient hysteroscopy is a procedure which involves examining the inside of your womb.

What should I do before my appointment?

- eat and drink as normal
- take any prescribed medications on the day of your procedure
- **take pain relief (ibuprofen 400mg and paracetamol 1g, if you have no allergies) at least one hour before your appointment**

Can I have an OPH if I'm pregnant?

You **cannot** have an OPH if there's any chance you're pregnant. So, it's important you use contraception or avoid sexual intercourse from your last period until your procedure has been done. This also applies to women undergoing fertility investigation.

We also ask for a sample of your pee to do a pregnancy test before the procedure.

Can I still have an OPH if I'm bleeding?

It is possible to have an OPH when you're on your period. But it can be difficult if you are bleeding heavily. Please contact the department via the number or email address at the end of this leaflet if you're concerned about this.

What happens during the procedure?

You will meet your healthcare professional who will discuss the procedure and ask for your consent. Please take this opportunity to ask any questions you may have.

We'll give you a gown to wear during the procedure and ask you to undress from the waist down.

There will be two or three healthcare professionals in the room. One of them will support you through the procedure. They will help you to get positioned in a special chair and will keep you covered as much as possible.

We'll check your vagina before doing the hysteroscopy.

A thin tube with a small camera inside (hysteroscope) is inserted into your vagina, passed through your cervix and into your womb. No cuts are needed.

Fluid (saline solution) is passed down the tube to make it easier to see inside your womb. You will feel fluid in your vagina as it trickles out.

For most women, there is no need to use local anaesthetic. We are also unlikely to use the instrument called a speculum used for cervical screening. (This used to be called the 'smear test').

Some minor procedures can be done at this visit, such as:

- taking a sample from the lining of the womb. This is called an endometrial biopsy
- removing a polyp. A polyp inside the womb is a skin tag. It is formed due to the overgrowth of the lining of the womb. It can cause irregular bleeding
- insertion of a device which releases a hormone into the womb. These are called intrauterine systems or IUSs. Examples include the Mirena[®] coil
- removal of a coil from the womb when the threads are not visible

During the hysteroscopy your healthcare professional will view the inside of your womb on a monitor. You can also watch the monitor if you choose. Photographs of the findings are taken and kept in your notes.

A small sample called a biopsy may be taken from the lining of your womb. This will be sent to the laboratory for examination.

An endometrial polyp can sometimes be removed using a special medical tool called biopsy forceps. Or you may be booked to return for a slightly different procedure called MyoSure[®] to remove larger polyps. Your healthcare professional will discuss this with you.

Sometimes, we may offer you a local anaesthetic if your cervix is too narrow for insertion of the tube with the camera or Mirena[®].

Will OPH hurt?

For most women, OPH is quick and safe and is carried out without any, or with very little, pain and discomfort.

Normal saline is used to help visualise your womb lining. When the saline flows into your womb cavity, you can expect to have some period-like cramps.

However, everyone's experience of pain is different. If it is too painful for you, it is important to let your healthcare professional know, as the procedure can be stopped if you wish.

If needed, you can inhale a painkiller called Pentrox 99.9% (3ml inhalation vapour, liquid methoxyflurane).

What are the possible risks with OPH?

- **pain** after OPH is usually mild and like period pain. It is usually controlled with simple pain relief, like paracetamol and ibuprofen
- **severe pain, feeling or being sick or fainting** can affect a small number of women. But these symptoms usually settle quickly

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- **bleeding** is usually mild, watery and lighter than a period. It normally settles within a few days. It is recommended that you use sanitary towels, not tampons. If the bleeding does not settle or gets very heavy, please contact your GP or go to your nearest A&E
 - **infection** is rare. It happens to 1 in 400 women who have the procedure. So, it **does not** happen to 399 out of 400 women. It's not routine to give antibiotics unless otherwise indicated
 - **unsuccessful OPH** occurs if it is not possible to pass the tube with the camera inside your womb. This usually happens when the cervix is tightly 'closed' or scarred. If this happens your healthcare professional will discuss alternative options with you
 - **a hole being made in the womb (perforation)**. This could also damage nearby tissues. This happens to less than 1 in 1000 women who have OPH procedures. So, more than 999 women out of 1000 are not affected. It may mean that you need stay in hospital overnight. Usually nothing more needs to be done, but you may need a further operation to repair the hole. These risks are lower for OPH than hysteroscopy under a general anaesthetic

How long does the procedure take?

The actual procedure may only take 5 to 15 minutes. However, the total visit may take up to an hour including consultation, having the procedure and recovery.

How will I feel afterwards?

- you may experience some period-like discomfort, some spotting or fresh (bright red) bleeding which will be very watery and can last up to one week
- you can shower as normal
- you can have sex when any bleeding and discomfort has settled
- you can return to your usual physical activities when bleeding and discomfort have settled
- if needed, you can take pain relief, such as ibuprofen 400mg every 8 hours or paracetamol 1g every 6 hours. Or take your usual period pain tablets. You can combine these two groups of medication if you need stronger pain relief.

What will happen after the hysteroscopy?

You can rest in the outpatient clinic's recovery area for as long as you need (usually about 20 minutes), or you can leave once the procedure is complete.

You will receive your results in either writing or over the telephone.

Teaching, training and research

Our Trust is dedicated to teaching, training and research to sustain the development of health and healthcare. We may therefore have healthcare students observing the procedure for this purpose. You can choose to opt out if you do not wish students to be present during your procedure. We may sometimes ask you if you would like to be involved in our research. Again, you have the choice to not participate.

How do I contact the hospital?

If you have any questions or need to change your appointment:

For Queen Charlotte's & Chelsea and St Mary's hospitals, call: 020 3313 7320
opening times: 09.00 – 17:0

email: imperial.ophadministration@nhs.net

If you need advice at night or at the weekend:

call hospital switchboard: 020 3312 6666
ask to speak to the senior house officer on call for gynaecology

Further information

Look at these trusted websites for further information about hysteroscopy.

www.rcog.org.uk/en/patients/patient-leaflets/outpatient-hysteroscopy

www.nhs.uk/conditions/hysteroscopy/

How do I make a comment about my visit?

We aim to provide the best possible service. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**). The PALS team will listen to your concerns, suggestions or queries. They are often able to help solve problems for you.

call: **020 3313 0088** email: imperial.pals@nhs.net

Or, if you need to **complain**, contact the Complaints department.

call: **020 3312 1337 / 1349** email: ICHC-tr.Complaints@nhs.net

write: Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street, London W2 1NY

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team:
imperial.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

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