

Pre and Post-Operative in Office Hysteroscopy Instructions

Terms to know:

Hystero –

Of or denoting the womb

(uterus)

Scopy –

Examination with an instrument for improved viewing, often with magnification and directed lighting

Biopsy –

An examination of tissue removed from a living body



Hysteroscopic procedures are performed on an outpatient basis in the operating room or in the office. All involve threading instruments through the cervix to diagnose and/or treat various problems.

This can give your gynecologist a direct visualization of the uterine cavity to examine the lining of the uterus, look for polyps, fibroids, and blockages of the fallopian tubes. Hysteroscopies can also be used as a method to collect a sample of tissue for examination or to remove an object, such as an intrauterine device.

Pre-Operative Instructions:

- Take 1-5 mg of Valium 1 (one) hour prior to our procedure. Your gynecologist will prescribe this medication to your local pharmacy on file.
- Take 3 (three) 200 mg of Advil 30 (thirty) minutes prior to procedure.
- Have someone drive you to your appointment. (Public transportation is not advised. (I.e. Uber, Lyft, etc.))
- Your appointment will last approximately 30 minutes.

****After taking the prescribed Valium, DO NOT operate heavy machinery or perform anything that requires coordination or personal judgement for 8 hours****

Post-Operative Instructions:

- Expect to have some spotting or vaginal bleeding for 3-5 days. This should slowly taper off. If it increases, or your pain increases instead of improving, please call the office.
- Avoid using tampons or douching, and only use pads until discharge/bleeding stops.
- Avoid sexual intercourse for 10 days after your procedure.
- Resume normal activity as soon as you feel comfortable, usually in 24-48 hours.
- Some cramping can be expected for up to 48 hours; take pain medication as directed by your doctor.
- Resume a normal diet as tolerated.

This information is for educational purposes only and should not be relied upon as medical advice. It has not been designed to replace a physician's independent judgement about the appropriateness or risks of a procedure for a given patient.