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Preparing for your Hysteroscopy

What is a Hysteroscopy?

Hysteroscopy is procedure that allows your physician to examine the interior cavity of the uterus along with the cervical canal through a viewing scope. The scope is inserted through the vagina and into the cervical opening. Hysteroscopy is one procedure that helps Dr. Varkey to evaluate and/or treat a number of different conditions, including abnormal vaginal bleeding, polyps or tumors inside the uterus, anatomic abnormalities, scarring following previous surgical procedures such as dilation and curettage (D&C), and retained placenta. It can also be used for surgical sterilization and to guide the physician to localize an area for endometrial (uterine lining) biopsy.

Sometimes, hysteroscopy can be performed without anesthesia via hydro-dilation. Local anesthetic can also be used topically or given by injection. In some cases, dilation of the cervical opening with surgical instruments may be necessary. A vaginal speculum is inserted prior to the procedure to facilitate insertion of the hysteroscope through the cervical os (opening). After insertion of the hysteroscope, fluid (sterile water) is injected into the uterine cavity to distend the uterus and thus improve visualization.

How do I prepare for Hysteroscopy?

You will be asked to sign a consent form before the procedure. Any concerns regarding the need for the test, its risks, how it will be done and what the results will mean will be discussed prior to the procedure.

Some mild cramping may be experienced during the procedure. Short-acting pain control and or sedative medications may be given if requested.

Pre-procedure options:

1. Norco, Valium and Motrin- These medications are taken together and act as a “medication cocktail”. They will allow you to be relaxed and minimize discomfort during your procedure. Dr. Varkey will prescribe these medications if you would like after discussing it with you. Some patients do not want to take narcotics or relaxants. **These medications are not needed in order to have the procedure.**

2. In some cases, instead of Motrin we will give an office injection called Tordol which is an NSAID (non-steroidal anti-inflammatory drug) and does not contain any narcotics. Dr. Varkey will discuss this option ahead of time.
3. You will sign a consent form the day you sign up for the procedure or at a pre-op visit, prior to the procedure.

Endometrial Preparation:

The ideal time to schedule this procedure is Day 4-10 of your menstrual cycle if it is predictable. In some cases, Dr. Varkey may ask you to take progesterone prior to the procedure. There are two options for the endometrial preparation we may use:

1. Prometrium 100 mg 1 tablet twice daily for _____ days.
2. Aygestin 5 mg 1 tablet twice daily two days prior to the procedure.

These medications are used to stop your menstrual cycle and to help thin out your endometrial lining. This will ensure that an optimal view of the uterus is achieved.

The day of your Hysteroscopy:

Please arrive on _____ at _____ for check in.

We have scheduled you to arrive to the office 15 minutes prior to your appointment for check in.

If you have elected to take pre-procedure medications then you will take them 1 hour prior to your procedure. Someone will need to drive you to and from our office if you elected to take Valium or Norco.

Post Hysteroscopy:

It is normal to experience light vaginal bleeding and some cramping for up to 1 week after the procedure. In most cases, most patients return to normal activities following the procedure. However, if any of the following occur, please notify Dr. Varkey immediately:

- Heavy vaginal bleeding or discharge
- Severe abdominal pain
- Fever