

Hysterocontrastsonography (HyCoSy) / Saline Hysterosonography (Cavity Check) Patient information.

The aim of this information sheet is to answer some of the questions you may have about having Hysterocontrastsonography (HyCoSy) / Saline Hysterosonography (Cavity Check). It explains the benefits, risks and alternatives of the procedure as well as what you can expect when you come to hospital. If you have any further questions and concerns, please speak to a doctor, nurse or healthcare specialist caring for you.

What is Saline hysterosonography?

Saline hysterosonography examines the uterine cavity. It can be used to demonstrate pathologies such as polyps, submucous fibroids and intrauterine adhesions. It can also highlight uterine abnormalities such as septae.

What is HyCoSy?

HyCoSy is an examination of your fallopian tubes. The fallopian tubes are the place where the female egg meets with the male sperm to create a baby.

It is important that your fallopian tubes are open so this can happen - if there is a blockage, it might stop you becoming pregnant. Fallopian tubes can become blocked i.e. following a pelvic infection, or after surgery.

What are the benefits of having a HyCoSy?

HyCoSy can show if your fallopian tubes are open or closed. The test also allows us to examine the cavity of your uterus (womb) to check that there are no problems that might affect a pregnancy as it develops.

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Are there any risks associated with a HyCoSy?

There is a small risk of a pelvic infection from this test. You will be prescribed metronidazole 1g suppository to be inserted PR and Azithromycin 1gm orally, starting on the day of the test.

You may feel some pelvic discomfort during HyCoSy (it's like a mild period cramp). We suggest you take two Ibuprofen 200mg tablets (or two 500mg tablets of Paracetamol) one hour before the procedure, in order to reduce the amount of discomfort you may experience.

Occasionally this test may cause you to bleed slightly once it has finished. The bleeding will not be heavy and should settle down in a day or two.

In about 5% of HyCoSy tests, the pictures produced are unclear. If this is the case, you may need further tests.

Are there any alternatives?

There is another test called a hysterosalpingogram (HSG), which looks at the tubes using X-rays instead of ultrasound. This test is used for patients who have had previous pelvic infections or pelvic surgery.

The fallopian tubes can also be assessed by a simple operation called a laparoscopy, which involves a general anaesthetic. This test is reserved for patients with severe pelvic pain, or, as a further test when the ultrasound or X-ray test is unclear.

What do I need to do to prepare for a HyCoSy?

On the first day of your period, telephone medical secretary **02078812027** between 9.00am and 4.00pm to book your test. Please ring on Monday if this falls on a weekend. The test will usually be done 1 to 2 weeks after your period starts but if there is a shortage of appointments, you may be asked to ring back when your next period starts.

Once you have an appointment date, please use protection (a condom) if you have sex. You need to do this from the time you book the test, until the test. Please note that the test cannot be carried out when you are on your period

You may eat and drink normally before and after your appointment.

As already mentioned you may have slight vaginal bleeding after the test, and you are advised to bring a panty-liner or sanitary towel.

Asking for your consent

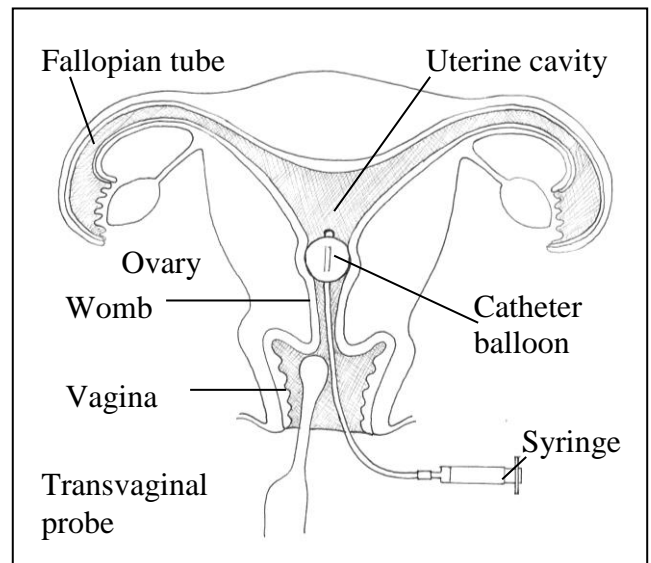
We want to involve you in all the decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This confirms that you agree to have the procedure and understand what it involves.

What happens during the HyCoSy test?

The person who carries out the test will be an ultrasonographer or a doctor or nurse. He or she will:

1. Ask you empty your bladder and lie down (the first part of the test is very similar to a smear test). Your legs will be supported in stirrups and we will ensure you are comfortable at all times.
2. Gently insert a speculum into your vagina (a speculum is a plastic device to allow us to see the neck of your womb).

3. Slowly insert a narrow plastic tube (catheter) through the neck of your womb (cervix).
4. Slowly inflate a tiny balloon on the catheter in order to keep it in position.
5. Pass a small amount of water through the catheter to show up the lining and cavity of your uterus. We will then carry out an internal ultrasound scan of the uterus.
6. Pass a special ultrasound fluid called Foam through the catheter to show the outline of your fallopian tubes. We will then carry out an internal ultrasound scan of the fallopian tubes. ExEm Foam will be absorbed by your body after the scan.



The test takes 15 to 20 minutes. It takes place in the Lister fertility clinic, Lister Hospital, first floor. If you have any questions or concerns before the examination, please phone medical secretary on 02078812027.

What happens after the test?

At the end of the test we can usually let you know the findings. If any further tests need to be done we will organise them on the same day.

If your fallopian tubes are blocked, or there are problems with your uterus, your doctor will explain the treatment options you have.

What do I need to do after I go home?

You can go home immediately after the test. You can carry out normal daily activities, and continue having sexual intercourse as normal. You can resume having unprotected sex if you choose.

Will I have a follow-up appointment?

As mentioned already, we can often give you results of the test on the day as well as information on any further tests or treatment that you may need. This means that in many cases a follow-up appointment is not needed. If an appointment is required, this will be arranged for you before you leave the department.