Sonohysterogram Information Sheet

NAME: ___________________________________________ DATE: __________________

Your doctor has referred you for a sonohysterogram to help determine why you are experiencing your current problems. This test sounds terrible, but for most women, having it is no big deal. During the sonohysterogram, we will analyze: your uterus, the uterine lining and, if visible, your ovaries. We begin with a transvaginal ultrasound exam. One of our technologists will help you insert a tampon-like ultrasound probe into your vagina. She will then study your uterus, measure the overall thickness of your lining and look for your ovaries and any masses that might be outside of your uterus.

After this portion of the exam, you will be asked to go to the bathroom to empty your bladder. Dr. Malley will then place a speculum just as you would experience for a pap smear. When he visualizes your cervix, he swabs it with Betadyne®, an iodine based soap to decrease your risk of getting an infection from the exam. Dr. Malley then slips a small spaghetti-sized plastic catheter through your cervix into your uterine cavity. The floppy catheter (with a consistency only a little stiffer than cooked spaghetti) is advanced with the tip into your uterine cavity. A tiny balloon is inflated to hold the catheter in place. Dr. Malley then takes the speculum apart and out of your vagina and the technologist will place the transvaginal ultrasound probe in your vagina just as you had for the first part of the exam. Dr. Malley will instill a small amount of sterile water through the catheter to slightly distend your uterine cavity so that he can report to your doctor the thickness of each layer of your endometrial lining and if there are any growths in your lining. After the exam, the catheter and transvaginal probe are removed and the exam is completed.

**What will you experience during the exam? Will it hurt?** The speculum exam is like a pap smear. You’ve already experienced plenty of those. Most women don’t feel the catheter being inserted. When Dr. Malley inflates the balloon on the catheter, a few women feel a little cramp. However, if you experience this, women say that it is less than a menstrual cramp and it doesn’t last long. Most women who have had an endometrial biopsy say that the sonohysterogram was nothing like that. In fact, most women afterwards don’t think it was painful at all. If something hurts during the exam, please tell Dr. Malley. He wants to make your exam as easy as possible. Most women, if they can adequately relax, don’t have any problem with the exam.

**What risks are there to the exam?** The two main risks are: spotting/bleeding and infection. Some women see a little spotting after the exam because there can be some irritation from the catheter going into the opening of your uterus. The catheter is very flimsy. It is extremely unlikely that it could cause any damage. The catheter bends on itself before it would make a hole in anything. Infection is another risk. In about 1,000 procedures, we have never had a patient get an infection. However, that doesn’t mean that it couldn’t happen to you. You can tell if you have an infection if after 2-3 days, you start having fever, chills and/or pelvic pain. If this happens, go to your doctor immediately for a pelvic exam. If your uterus hurts when your doctor examines you, this could mean that you have an infection of your uterine lining. To treat you, your doctor would give you oral antibiotics. If your uterus isn’t irritable during the exam, it probably means that you have the flu or some other problem which wasn’t caused by the exam.

**What else can be done if I don’t want to undergo this exam?** The only way your doctor can get similar information is if they take you to the hospital, have you put under general anesthesia, dilate your cervix with a dilator the size of your thumb, then put in a hysteroscope to directly visualize the lining. Obviously, there is a lot more cost with this procedure. The risks are higher because general anesthesia and dilation is involved. Sometimes, your doctor might have difficulty visualizing all of your endometrial lining. Additionally, they can’t see in the muscle of your uterus or look outside the uterus with this exam.

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Imaging for Women, 630 NW Englewood Road, Kansas City, MO 64118
Phone – 816-453-2700 ● Fax – 816-453-9943 ● Website – imaging4women.com
When will I find out the results of my exam? As usual, when you come to Imaging for Women, you will know your results after the exam. Dr. Malley is easy to talk with and will be talking with you during the procedure so that you know what is going on and what he is finding. After the exam, your doctor will receive a report usually within 2 hours after your procedure which will include the items which Dr. Malley discussed with you. You will need to follow-up with your doctor to determine the next course of action. If you do not have a follow-up exam scheduled and their office doesn’t call you within a week, please give them a call to determine what additional testing and/or treatment will be needed.

After the exam, you will need to wear a pad the rest of the day since the Betadyne® soap will stain your underwear if it gets on them.

If you have any questions about anything on this information sheet, please ask the technologist before you undergo the procedure.

1. I have read the above and understand the procedure. I understand the above risks and accept them. I agree to undergo this procedure.
2. I am not pregnant. *(If you could be pregnant, you should not be pregnant for this exam. Please talk with the technologist if you have any questions.)*
3. I am not allergic to Betadyne® or any iodine based products. *(Please tell the technologist if you have this allergy as an alternative product can be used.)*
4. I am not allergic to latex. *(Please tell the technologist if you have this allergy as an alternative product can be used.)*

_________________________________________  ________________  
(Signature)  (Date)

Witness: ____________________________________________

*Please bring this completed form with you to your appointment.*

**History Sheet**

1. What problem(s) are you experiencing: ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

2. Last Menstrual Period: ____________________________

3. Previous pelvic surgeries: ________________________________________________________________

4. # of Previous Pregnancies: _____  # of Live Births____  # of Spontaneous Abortions __

5. List any other medical problems: ________________________________________________________________