Procedure Name: Hysterosonography

Updated: 4/24/17, 01/30/12, approved 9/2011

Indications:
Most common indication is irregular bleeding but may include but not limited to pelvic pain, questionable mass, or for any other valid medical reason. Main items to evaluate for are endometrial polyps, abnormal endometrial thickening and submucosal fibroids.

Patient Preparation:
There is no preparation required for this examination.

Equipment selection and settings:
Select EV (endovaginal) from preset menu.
An endovaginal probe will be used for this examination. Adjustments in gain, depth and transmit zone settings are required for optimized images. Fill out any applicable impression or worksheet upon completion of exam.

Prepare the probe following the protocol “Preparation and Disinfection of Endocavitary Probes”.

Set up tray under sterile conditions; fill both syringes with saline solution.
Soak one box of 4 x 4 with betadine for the swabs (may use presoaked swabs instead), apply KY jelly to another 4 x 4.

Tray will contain the following items:
--7 French catheter (HSG catheter set)
--medium speculum (metal type most common but radiologist choice)
--5cc syringe, to replace syringe that comes with catheter set
--20cc Luer-Lok syringe
--4 x 4 gauze sponges (2 boxes)
--KY jelly packets (sterile)
--saline solution
--18 gauge needle
--sterile gloves
--betadine for swabs or use presoaked swabs

Explain the examination to the patient. If not already done, get patient history, LMP and pregnancy history and image this information on the first frame.
Position the patient in the supine position, legs bent and feet flat on the table with a pad under their bottom to raise them off of the table, this position will be used throughout the procedure.

Labeling all images, perform the examination in an orderly fashion as preferred by attending radiologists. Image patient data (demographics page).

1) **Uterus:** Several longitudinal and transverse images with measurements in longitudinal, AP, and transverse planes. Include images of the entire endometrial strip with measurements of the strip. Include upper, lower, and lateral uterine regions. Include cervix and vaginal canal if possible. Image cul-de-sac.

2) **Ovaries:** Longitudinal and transverse images with measurements in three planes. Additional images and measurements of follicular cyst(s) if indicated. Use color Doppler to show profusion.

3) **Adnexa:** Several images of both adnexal regions.

Take additional images and measurements of any/all pathology. Utilize color flow to aid in the determination of any possible abnormality and to demonstrate blood flow.

Once the endovaginal examination is complete, show images to the radiologists, if the radiologist is satisfied with images then the remainder of the exam can be completed.

Saline will be injected into the uterine cavity. Additional EV images should be taken of the endometrial cavity post injection as well as a cine clip that documents the change from pre-injection to post-injection appearance of the uterine cavum.