Ambulatory gynaecology clinic
This leaflet explains more about the ambulatory gynaecology clinic in the McNair Centre at Guy’s Hospital. It gives details of the services the clinic provides and what you can expect at your appointment. If you have any questions or concerns, please ask a doctor or nurse caring for you.
What is the ambulatory gynaecology clinic?
The ambulatory gynaecology clinic is a service which provides simple, minor procedures without the need for a general anaesthetic or admission to hospital. The procedures currently offered in the ambulatory service include hysteroscopy and removal of endometrial polyps or fibroids from the lining of the womb.

What is a hysteroscopy?
A hysteroscopy is a procedure that allows your doctor to look inside your womb (uterus). This is done using a special telescope called a hysteroscope, which has a tiny camera at its tip. It is put in your vagina and through the neck of the womb (cervix). This enables the doctor to examine the inside of your womb.

A hysteroscopy is the most accurate way of examining the inside of your womb. This procedure can also be used to remove small fibroids and polyps which can reduce the amount of bleeding during periods. It may also be carried out as an outpatient procedure.

What are the benefits of having a hysteroscopy as an outpatient?
A hysteroscopy can be performed without the need of general anaesthetic. As an outpatient, this means you:

- recover much more quickly
- can go home after the procedure
- can start doing your normal activities sooner.
What are the risks?

- **Bleeding:** Most women have a small amount of bleeding after the procedure. If it becomes heavy – you are passing large clots or you need to change your sanitary pad more than twice an hour over a two hour period – you should seek medical advice.

- **Infection:** You may need a one-off dose of antibiotics after the procedure to reduce your risk of infection. The doctor/nurse will discuss this with you.

- **Uterine perforation:** This is where a hole is made through the wall of the womb. This risk is very small because you are awake during the procedure.

- **Fluid overload:** This is where the fluid we use to help us see inside your womb is absorbed into your blood stream. We check this carefully, and if you are absorbing too much fluid we will stop the procedure.

- **Discomfort:** Some patients may find the procedure uncomfortable.

What are the alternatives?

In some cases we can control your symptoms using medicines. If polyps or fibroids are causing your symptoms, you normally need to have them removed.

Giving my consent (permission)

We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.
How can I prepare for a hysteroscopy?

- Take a simple painkiller such as paracetamol or ibuprofen (avoid any drugs you are allergic to) one hour before the procedure.
- Eat and drink as normal before the procedure.
- Use contraception if you have sexual intercourse one month before the procedure – you must use an effective form of contraception from the time of your previous period until you have the hysteroscopy. We will ask you for a urine sample so we can do a pregnancy test before the procedure.
- Bring water to drink on the day.
- Bring sanitary towels as you will have some vaginal bleeding and discharge after the procedure.
- Bring a friend or relative to support you (optional).

If there is a chance you could be pregnant, you must tell the nurse or doctor and you will be given a new appointment.

If you are a smoker and would like support to stop smoking, please contact the Trust stop smoking service. 

**t:** 020 7188 0995  
**e:** stopsmoking@gstt.nhs.uk

What happens during the procedure?

When you arrive at the ambulatory gynaecology clinic you will first be seen by the doctor/nurse. You will then be asked to sit in the procedure chair. We will make sure you are comfortable and maintain your dignity as much as possible at all times. You will have an experienced nurse to support you at all times.
An instrument called a speculum may be used to open up the walls of the vagina, in the same way it is used during a smear test. This enables the doctor/nurse to see your cervix.

The surface of your cervix will be cleaned with an antiseptic solution and you may have a local anaesthetic injection to the cervix. You can discuss this with your doctor/nurse before the procedure.

The hysteroscope will be gently put into your vagina and then into the womb. You may get period-like cramps during the procedure. You can watch the procedure on a nearby television screen, if you wish.

The doctor/nurse will then take out any polyps or fibroids that you need to have removed.

This is done by the following methods.
- **Hysteroscopic morcellation**: This involves cutting the polyp or fibroid into very small pieces and sucking them out through the hysteroscope.
- **Diathermy**: Using electrical energy, the polyp is cut off and then gently removed from the womb using forceps (graspers).

**How long is the procedure?**
The procedure will last between 15 to 30 minutes but you should plan to be in the clinic for about two hours.
What happens after the procedure?
After the procedure the doctor/nurse will explain the findings as well as any treatment you have had.

You will have some vaginal bleeding and may have some period-like pain after the procedure. To overcome these symptoms you can take simple painkillers such as paracetamol or ibuprofen.

After the procedure, you will remain in clinic until you feel well enough to go home. Most people feel well enough after 30 minutes to one hour. However, you should have no plans for the rest of the day. Do not go to work after your appointment.

When can I return to normal activities?
Most women can return to their regular activities after a few hours. However, you will have some light vaginal bleeding for up to two weeks. As there is a small risk of developing an infection after your hysteroscopy, we recommend that you:

- use sanitary towels rather than tampons until the bleeding has stopped
- do not have sexual intercourse for one week afterwards or until the bleeding has stopped
- do not go swimming until the bleeding has stopped.

When will I find out the results?
After the procedure the doctor/nurse will explain any findings to you. If you have had a sample of tissue removed, you will be given the contact number and email address so you can get the results.
Contact us
If you wish to discuss anything before your appointment, please call the gynaecology helpline on t: 020 7188 3023, Wednesdays, 2pm to 4pm.

If you need to change or cancel your appointment please contact the outpatient supervisor on t: 020 7188 3687 as soon as possible. Out of hours, please contact the gynaecology ward on t: 020 7188 2703 or t: 020 7188 2704.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit w: www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.
t: 020 7188 8748, Monday to Friday, 9am-5pm.

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
t: 020 7188 8801 (PALS)  e: pals@gstt.nhs.uk
t: 020 7188 3514 (complaints)  e: complaints2@gstt.nhs.uk

Leaflet number: 4309/VER2
Date published: July 2019
Review date: July 2022
© 2019 Guy’s and St Thomas’ NHS Foundation Trust
A list of sources is available on request