

Information for patients and carers

Hysteroscopic Tissue Removal & Retrieval

Decorative graphic at the bottom of the page consisting of three horizontal, wavy bands of blue. The top band is a light blue, the middle is a medium blue, and the bottom is a dark blue.

Hysteroscopy is a technique that allows the inside of the womb to be examined using a device called a hysteroscope.

Your gynaecologist has arranged an outpatient appointment for hysteroscopic tissue removal and retrieval. Please read this leaflet carefully as it contains important information and instructions.

What is hysteroscopic tissue removal and retrieval?

The hysteroscope is passed very gently through the vagina, cervix (the neck of the womb) and into the womb. Fluid is introduced into the womb to distend the womb cavity to make it easier for the healthcare professional to see. The tissue removal and retrieval device is then passed down the channel of the hysteroscope to remove the abnormal tissue under direct vision via a monitor/screen.

A hormone releasing intrauterine system (coil) can also be fitted at the end of the procedure if required. The whole procedure takes approximately 10-25 minutes depending on the size and nature of what needs removing.

There are different pain relief options in the outpatient clinic including Entonox (gas and air) and local anaesthetic. These will be discussed and offered by the healthcare professional at the time of the procedure. They will not be necessary for all patients. It is advisable however for all patients to take simple pain relief about 1 hour before your appointment.

You may choose to have the procedure under general anaesthetic; this will be done in an operating theatre, usually as a day case procedure.

Why do I need hysteroscopy tissue removal and retrieval?

You may need hysteroscopic tissue removal and retrieval procedure for treatment of:

- Endometrial polyp (a growth of the inner lining of the womb)
- Fibroid (a benign growth of the muscular layer of the womb)
- Scar tissue
- Uterine septum (a wall of thin tissue separating the womb cavity in two)
- Retained pregnancy tissue

Possible risks with hysteroscopic tissue removal and retrieval

- Pain
- Feeling sick
- Feeling faint
- Bleeding
- Infection

Very rarely, the instruments inserted into the womb may make a small hole in the cervix or wall of the womb, possibly also damaging nearby tissues. If this happens you may need to stay in hospital overnight for observation and sometimes a further operation may be needed.

What should I do before my appointment?

Eat and drink normally, there is no need to fast before the outpatient appointment. Bring a list of any medications you are taking with you. You may also wish to have a friend or family member accompanying you.

Can I still have the procedure if I am bleeding?

It is best to keep the appointment. Occasionally it can be difficult to do the procedure if you are bleeding heavily. If you have any concerns, please ring and speak to your healthcare professional

Preparing for a hysteroscopic tissue retrieval and removal

Contraception

Before the procedure, you should continue to use your usual contraception.

- If you are not currently using any contraception, please ensure that you use a barrier method (condoms) from now and until after the procedure. If you fail to do this it may be necessary to cancel your appointment until after your next period
- If you are using a coil, this may need to be removed as part of the procedure. To ensure we do not compromise your contraception, please use a barrier method for 7 days before the procedure. If a coil is removed, we will reinsert one at the end of the procedure if you wish us to

If you have any queries, please telephone the hysteroscopy helpline:
01257 247123

Pain Relief

Approximately 60 minutes before your procedure, we recommend that you take two paracetamol or ibuprofen tablets, or whatever you would normally take for a headache.

Consent form

Please ensure that you bring your consent form with you when you attend for the procedure.

NB: Do not worry If the consent procedure has not been completed before the day of appointment – it will be explained when you meet your healthcare professional. Please take this opportunity to ask any questions you may have.

What should I expect?

You will meet your healthcare professional who will talk through the procedure and answer any questions you may have. On entering the procedure room, you will be asked to remove your clothing from the waist down and be covered with a hospital sheet. You will need to lie on an examination couch with your feet resting on side supports near the end of the couch. There will be three or four healthcare professionals in the room with you which usually consists of the healthcare professional performing the procedure, a nurse, a healthcare assistant (HCA) and an additional nurse or HCA.

Very gently, a hysteroscope is placed into the vagina and through the cervical canal to reach the womb. Fluid (saline solution) is used to help see the inner lining of your uterus and you will feel wet as the fluid trickles back out. You may wish to watch the examination on the nearby monitor/screen.

A cramping feeling may be felt within the lower part of the tummy, not unlike period pain. If it is too painful, it is important to let your healthcare professional know, as the procedure can be stopped at any time. If necessary, a local anaesthetic may be given.

The healthcare professional will explain their findings to you at the end of the procedure. It may be necessary for samples to be sent to the laboratory for testing. As a teaching hospital, we may have medical students and trainees present for the clinic. We will always ask if you feel comfortable having any additional members present during the procedure.

After the procedure

Most patients stay in the recovery area for 15-20 minutes following a procedure to rest and have a hot drink before returning home. Make sure you feel ok before you leave. You can drive, but we recommend you arrange for someone to take you home. Once you have rested

at home for the remainder of the day you should feel able to return to work the next day.

Some women experience discomfort, similar to period pain, but this is generally mild in nature and settles after a few hours. If needed, mild pain relief tablets like paracetamol can be taken.

Infection is uncommon (1 in 400 women), but may appear as a smelly discharge, fever or severe pain in the tummy. If you develop any of these symptoms, contact your healthcare professional urgently.

Vaginal bleeding is usually light, but if this persists or you notice a discharge, you may need a course of antibiotics. Please see your GP if you are concerned about this. You will need to wear a sanitary pad following the procedure due to the fluid/bleeding. You can bring your own if you wish or one can be provided.

You can shower or bath as you would normally. You may resume intercourse when you feel comfortable.

If any of your symptoms become significantly worse, mainly pain and bleeding, please contact the gynaecology and early pregnancy assessment unit (GEPAU).

Any biopsy results will be sent to you and your GP by post. If necessary, a further appointment will be arranged.

Contact details

If you have any more questions, please discuss these with the doctor or nurse looking after you on the day.

Other useful contact numbers:

Hysteroscopy appointment booking team: **01257 247123**

Gynaecology Outpatient Clinic Nurses: **01772 524386**

Gynaecology and Early Pregnancy Assessment Unit (GEPAU)
(emergencies): **01772 524415**

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.accessable.co.uk

www.patient.co.uk

www.lancsteachinghospitals.nhs.uk/veteran-aware

<https://bepartofresearch.nihr.ac.uk/>

NHS information on hysteroscopy:

www.nhs.uk/conditions/hysteroscopy/what-happens

NICE (2018) Heavy menstrual bleeding: assessment and management.
[NG88]. <https://www.nice.org.uk/guidance/ng88/informationforpublic>

RCOG (2025) Outpatient hysteroscopy <https://www.rcog.org.uk/for-the-public/browse-our-patient-information/outpatient-hysteroscopy/>

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patientexperienceandinvolve@LTHTR.nhs.uk

Department: Gynaecology
Division: Women and Children
Production date: November 2025
Review date: November 2028
JR 1408 v1