

Hysterosalpingogram (HSG)

This fact sheet tells you what a hysterosalpingogram (HSG) is, and what is involved. Please read this sheet before having your procedure. If you have any questions, ask your doctor.

What is a hysterosalpingogram (HSG)?

This is an X-ray examination of your uterus (womb) and fallopian tubes. A special dye called contrast is injected into the uterus to highlight the uterus and fallopian tubes.

A moving X-ray, called fluoroscopy, helps to find uterine problems, blocks in the fallopian tubes and, sometimes, the reason for infertility.

What is involved?

You will be given instructions on how to prepare for your scan, such as when is the best time during your period cycle to have the scan.

Before the scan, you should tell your doctor and the imaging staff if you are pregnant or think you might be pregnant. Having the procedure while pregnant may potentially harm your foetus (unborn baby) or result in a miscarriage.

For the scan, you will lie on the X-ray table in a position similar to having a pap smear: with your legs bent at the knees or your feet in stirrups. You will be covered with a sterile towel and the skin around your vagina will be cleaned to prevent infection.

The radiologist (a specialist doctor) will insert a speculum to help widen the opening of your vagina, and then will insert a thin tube into your uterus. This might feel uncomfortable, but is not usually painful.

A contrast dye (see separate fact sheet) will then be injected through the tube into the uterus. When the dye is inserted, you may feel some fullness and discomfort, but, again, this is not usually painful.

On a special camera screen, the radiologist will watch the movement of the dye through the uterus and fallopian tubes, and take images with the camera.

You will be asked to remain still and hold your breath for these snapshots. This procedure takes about 30 to 45 minutes.

What happens after the hysterosalpingogram?

Some women experience discomfort in the lower stomach area or have period-type cramping pain. You can take your usual period pain medicine for this pain.

You may also get some light bleeding or spotting after this procedure. It is best to avoid tampons and intercourse for 24 hours after the hysterosalpingogram.

The radiologist will assess the images and send the results to your doctor.

Are there any risks?

Risks and problems are not common, but may include:

- allergic reactions to the contrast dye (see the *Contrast* fact sheet)
- an infection, which is rare and can be treated with antibiotics
- bleeding or fever – if this happens, contact your doctor or go to the nearest emergency department.

For this procedure you will be exposed to a small amount of radiation. The benefits of picking up injury or disease is generally much more important than the potential risk from receiving such a small dose of radiation. The amount of radiation used will be kept as low as possible, especially if you have lots of radiology procedures.

For more information

Radiology Info by the American College of Radiology and Radiological Society of North America: www.radiologyinfo.org

The Australian Radiation Protection and Nuclear Safety Agency: www.arpansa.gov.au

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