

Information about the  
**Gynaecology One Stop Clinic**



# Information about the One Stop Clinic in Gynaecology

We have sent you an appointment for the One Stop Clinic. Before your appointment, please read this leaflet which provides you with some information about the clinic and an idea of what to expect.

## Summary:

- Please arrive for your appointment on time
- Please take oral painkillers 60 minutes before your appointment time
- We may offer you one or more tests at your clinic appointment
- You are in control and can ask for a test to be stopped or refuse a test at any time

## What is a One Stop clinic?

It is a clinic for the assessment of women who have gynaecological problems such as:

- abnormal vaginal bleeding (heavy or irregular bleeding in between periods or after sex, bleeding after the menopause)
- pelvic pain, a lump or swelling in your tummy
- coil issues
- investigations after a previous scan - e.g. an ovarian cyst (lump associated with the ovary), a polyp (a skin tag or outpouching from the lining of the womb or the neck of the womb) or a fibroid (a non-cancerous lump in the muscle of the womb).

The aim and benefit of a One Stop clinic is to have investigations and any treatment in one clinic visit, if possible. This will avoid additional hospital visits and stays, unnecessary anaesthetics and additional waiting time for any recommended investigations and, or treatments.

## **What will happen at the clinic?**

A doctor will see you and ask you questions about the problem that you have. The doctor will discuss with you what tests they think you need in order to investigate your problem and what to expect when having the test. They will also give you a chance to ask questions and discuss alternative options. You will be able to use the toilet and change into a hospital gown in private before the staff take you to the nearby examination room. A nurse will be present at all times from this stage onwards.

Some women will need only one or two tests whilst others may need a few. **You do not have to have the tests suggested to you and after discussion, you can decline one or all of them if you do not feel they are acceptable to you.**

## **What tests might I have?**

### **Vaginal scan (transvaginal ultrasound scan)**

A vaginal scan lets us look at the pelvic organs, including the ovaries, the womb and the lining of the womb. This allows us to diagnose certain conditions which could be causing your symptoms and can determine the need for further investigations. To do this test, the nurse will ask you to lie on a couch and will place your legs gently into leg rests with your legs drawn upwards, your knees slightly bent and your legs opened a little. The nurse will ensure that you are comfortable. If you have mobility issues, we can adjust the couch to suit you. Your tummy and pelvic area will be covered at all times. The scan probe is long and narrow and will be gently inserted into your vagina.

It can be slightly cold (a gel is used for lubrication) and associated with a bit of pressure or stretching. It is not usually painful, even for those who are not currently sexually active or have not had any vaginal births. Most women find that a vaginal scan is easier to tolerate than a speculum (instrument inserted into the vagina for a smear test). Very occasionally, this test is not possible if the opening of the vagina is too narrow or the test is too sore for you. If you find the test too uncomfortable, you should let the doctor or nurse know and the examination will be stopped immediately. The doctor will explain the findings of the test once completed.

## **Endometrial Biopsy**

Depending on your symptoms and scan findings, the doctor may opt to do an endometrial biopsy. This is a test for taking a sample from the lining of the womb (endometrium). It is performed with the use of a speculum. A small straw is then inserted into the womb to collect the sample. You may feel cramps in your lower tummy, similar to bad period pains. This should only last for a few seconds. Occasionally, the pain may last a little longer and you may feel a bit dizzy, sick or faint. This can be unpredictable and if you feel like this, it is important that you let the clinical team know. The doctor will stop the test immediately. We will offer you water, some pain relief and a chance to lie in the recovery area until you feel better. The test takes less than ~ 2 minutes.

## **Hysteroscopy**

This is a test to allow us to look directly inside your womb and detect any abnormalities that could be causing your symptoms e.g. polyps, fibroids, a lost coil, a thickening in the lining of the womb. It is safe and usually lasts less than 10 minutes. A thin telescope fitted with a small camera is passed through the vagina and neck of the womb (cervix) to allow us to see inside the womb.

Fluid (saline) is used during the test and you will feel wet and may hear some trickling of fluid. As the fluid passes into the womb, it stretches the inside gently so that we can see the lining of the womb. If you wish, you can also see the screen image. This test may be very brief (a few minutes) or a little longer if a direct biopsy needs to be taken.

Alternatively, an endometrial biopsy may be taken as described above. The fluid going into the womb may be painless for some women but it is common to have period-like cramps during the test. For some, the pain can be severe (1 in 3 women) but this usually passes quickly once the telescope is removed. Occasionally, the pain may last a little longer and you may feel a bit dizzy, sick or faint. If you feel that the procedure is too painful at any point, please let the nurse or doctor know and they will stop immediately.

In a small number of patients, the neck of the womb may be narrowed (stenosed) or difficult to enter with the telescope. In this circumstance, the use of local anaesthetic (an injection into the neck of the womb) can help with dilatation (opening) of the neck of the womb. Occasionally, something may be found during the test e.g. a polyp, which will require another visit for treatment.

## **Insertion of the Hormonal Coil**

For some patients, the option of insertion of a hormonal coil may be beneficial for treatment of bleeding problems (heavy periods, bleeding on HRT) or for use as the progesterone component of combined HRT. It may also be recommended when a biopsy shows an overgrowth of cells (hyperplasia).

## **Risks and what to expect after the procedure**

In addition to the discomfort or pain described above, other possible risks with this test include bleeding (it is usual to have some light bleeding for ~ 24-48 hours after the test), infection and uterine perforation (a small hole in the muscle wall of the womb) with the potential to damage surrounding structures. Perforation is very rare in an outpatient setting and occurs in less than 1 in 1000 cases. The main benefit of having tests in the clinic is to avoid you having to wait and then return for the test in an operating theatre under anaesthetic.

Tests other than a scan will not be performed if there is any chance that you are pregnant. To avoid this possibility, if you have not reached the menopause, it is important that you use contraception or avoid sex between your last period and your appointment. We may offer you a urine pregnancy test on arrival at your appointment.

The doctor will write to you at your home address with the test results, usually within 4-6 weeks after the test.

## **Alternative options**

Factors which may influence whether or not you wish to go ahead with a hysteroscopy or biopsy in clinic:

- if you faint during your period because of pain
- severe pain during a previous vaginal examination
- very difficult or painful cervical smear tests in the past
- a previous traumatic experience which might make the procedure difficult for you
- if you do not wish to have the examination when awake

Please discuss any concerns with your doctor before coming to a final decision.

The staff can make arrangements for the proposed procedure to be carried out under general anaesthetic (asleep) or regional anaesthesia (involves an injection in your back similar to an epidural).

**For further information, please read the links to:**

🌐 <https://www.bsge.org.uk/wp-content/uploads/2018/12/PI-Outpatient-hysteroscopy.pdf>

Audio for RCOG: 🌐 <https://www.rcog.org.uk/for-the-public/browse-all-patient-information-leaflets/outpatient-hysteroscopy/#>

## **What should I do before my clinic appointment?**

You should eat and drink normally. You do not require to fast (starve).

It is recommended that you take some pain relief approximately 60 minutes before your clinic appointment time as this will often reduce cramps associated with the procedure. Oral tablets such as Ibuprofen (400mg) and, or paracetamol (1g) are ideal. You can use whatever pain relief you find useful for period pains. Some women may wish to continue pain relief in the 24 hours after their test.

It does not matter if you are bleeding on the day of your appointment. Please still attend.

You do not need to bring anyone with you to the appointment but some women find it helpful to have a family member or friend nearby. During all of the tests, you will always have a nurse with you to provide one to one support. Before any test, the doctor will ensure that they have your consent to go ahead.

Please remember if you do not want any of the tests described, you do not have to agree to them. It is still important for you to attend your appointment which will allow the doctor to assess your symptoms and arrange another management plan that is acceptable to you. You are always in control of the process. We may ask if a medical student can be present during your appointment. This is valuable for their learning and appreciated but you can refuse.

There may be up to five clinics using the same waiting room and so it may feel like patients are being taken into clinic out of order. Appointments last ~ 15-20 minutes. Please enquire at the reception desk if you are waiting longer than 20 minutes. We ask that you arrive on time for your appointment and give yourself plenty of time to park, if driving. If you are more than 15 minutes late, we may ask you to reschedule your appointment.

The majority of women who attend the One Stop clinic find it a positive experience. We look forward to seeing you at your appointment.

