

I. Equipment *(May vary at different sites)*

- a. HSG tray from sterile processing
 - Sterile tongs
 - Glass or metal cups x 2
- b. Mayo stand
- c. Sterile towels
- d. Contrast (Isovue or Omnipaque)
- e. Betadine
- f. Sterile cotton balls
- g. 20cc luer lock syringe
- h. Sterile KY jelly
- i. Disposable speculum
- j. Speculum light
- k. Hand grips for stirrups (covered with wash cloths)
- l. Sanitary napkin + washcloth for bathroom
- m. Sterile gloves
- n. HSG catheters (size 5 + size 7)
- o. Chux
- p. Rolled up towel or bump to raise hips

II. Personnel

- a. Radiologist or Fluoroscopy Technologist
 - Places speculum
 - Administers contrast
 - Runs fluoroscopy using fluoro pedal
- b. Hospital Technologist
 - Calls patient \geq 48 hrs. prior to appointment to review *HSG TECH PRE-CALL QUESTIONNAIRE*
 - Checks patient order, confirms negative blood serum pregnancy test results (scans in Epic/PACS)
 - Assists the radiologist or RA during procedure
 - Captures images or takes spot images upon request
 - Provides patient with aftercare instructions

III. Procedure

- a. Verify negative results of blood serum pregnancy test
- b. Patient on table in modified lithotomy position
- c. Speculum placed
- d. Cervix cleaned w/ betadine x 3
- e. Hystero catheter placed

IV. Required Images

- a. Scout
- b. Minimal fill of uterine cavity
- c. Partial fill of uterine cavity
- d. Total fill of uterine cavity
- e. Oblique views of uterine cornua
- f. Contrast filled cervical canal with catheter removed

Approved by:	Keith Dangleis, MD
Role:	Physician Supervisor, RIA Fluoroscopy Technologists

Indications	Contraindications
<ul style="list-style-type: none"> - Infertility - Confirmation of tubal occlusion 	<ul style="list-style-type: none"> - <u>Pregnancy</u> or the <u>possibility</u> of pregnancy - Active pelvic bleeding - Allergy to iodinated contrast (requires 13-hour premedication & must be performed in a hospital setting) - Signs or symptoms of active pelvic infection including fever

V. Special Considerations

a. Scheduling/Timing:

- HSG's are to be scheduled within the first 10 days of the menstrual cycle. Cycle day 1 is considered the first day of menstrual bleeding.
- The patient is instructed to refrain from sexual intercourse from the onset of the menstrual cycle (day 1) until after the procedure is performed.

b. Pregnancy Test Requirement:

- A negative blood serum pregnancy test is required within 24 hours before the exam, **for all patients**, before HSG is performed. This includes patients who have had a Depo Provera shot for birth control.
- Patients should bring the results of their blood serum pregnancy test to their HSG appointment.
- If the patient arrives without results of a negative blood serum pregnancy test, or does not meet the 24-hour requirement, she will be sent to the hospital lab (*site specific*) to have a blood serum pregnancy test before proceeding. The HSG will not begin until a negative test is confirmed.
- Blood serum pregnancy tests will not be performed at Littleton Hospital. (Patient must have results from an outside lab)
- Patients requiring hospital blood serum pregnancy tests should arrive 1 hour prior to their scheduled appointment time for lab work.

c. Irregular menstrual cycle or amenorrhea:

- Require a blood serum pregnancy test within 24 hours of the scheduled HSG.

d. IUD (Intrauterine Device)

- If a patient has had an IUD removed recently, they must wait at least **2 weeks** before having an HSG exam.
- An HSG may be performed with an IUD present.

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