

## What is a hysterosalpingogram?

A hysterosalpingogram (HSG) is a radiologic procedure performed to show the anatomy of the fallopian tubes and uterine cavity to determine if their appearance is normal. The procedure is often performed to find out if the fallopian tubes are open and unobstructed. HSG is often requested by a doctor as part of a fertility exam but is not itself a fertility test. HSG can reveal abnormalities of the uterus as well as tubal complications such as blockage and dilation (hydrosalpinx). If sterilization reversal is planned, the point at which the tubes are blocked can be seen. This helps to plan the reconstructive process.

If the tubes are not blocked by scar tissue or adhesions, the dye will flow into the abdominal cavity. This is a good sign, but it does not guarantee that the tubes will function normally. It does give a rough estimate of the quality of the tubal structure and the status of the tubal lining.

An HSG may also identify endometrial polyps, uterine fibroids, intrauterine adhesions (scar tissue inside the uterus) or uterine cavity abnormalities. The exam may or may not be able to detect pelvic adhesions, small polyps, endometriosis, partial blockage of the fallopian tube or other abnormalities.

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★ Locations offering HSG

## HSG Exam

*What you need to know about your hysterosalpingogram exam*



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### Why is the hysterosalpingogram (HSG) test done?

A HSG is done to:

- Detect a blocked fallopian tube, often for women having difficulty becoming pregnant. Scarring of the fallopian tubes can block the tubes, preventing pregnancy.
- Identify problems of the uterus, such as an abnormal shape or structure, polyps, fibroids, adhesions or a foreign object in the uterus. These types of problems may cause painful menstrual periods or repeated miscarriages.
- Determine the success of tubal ligation.
- Determine whether surgery to reverse a tubal ligation has been successful.

### Does a HSG enhance fertility?

Although a number of women have become pregnant following an HSG, its purpose is for diagnostic reasons only and not for therapeutic reasons.

### How should I prepare for the test?

Generally, there is no special preparation needed for this test. Depending upon your diagnosis, you may need to take antibiotics to guard against possible infection, and prior to the procedure you may take anti-inflammatory medication. To help ensure that you are not pregnant, the study is done between day 7 and 10 of your cycle.

### Before a HSG, please inform us if you:

- Are or might be pregnant.
- Currently have a pelvic infection (pelvic inflammatory disease) or a sexually transmitted disease.
- Are allergic to the iodine used in the contrast material. Also, please tell us if you are allergic to any medications or have ever had a serious allergic reaction (anaphylaxis).
- Have bleeding problems or are taking blood thinning medications such as aspirin or warfarin (Coumadin).

### What happens during the test?

Prior to the exam, a technologist will explain the exam thoroughly and answer any questions you may have. The beginning of the test is very similar to having a regular pelvic examination. After emptying your bladder, you will be asked to lie down on an exam table under a fluoroscope (X-ray tube) in a position similar to the one during a pelvic exam. The technologist or radiologist will then examine your uterus and place a speculum into your vagina. Once your cervix is cleaned, either a small tube will be inserted into the opening of your cervix or a small suction cup will be attached to your cervix, depending on which method is best for you.

The uterus will be gently filled with a contrast material to help outline the cervical canal, uterus and fallopian tubes. Any abnormalities in the uterine cavity or fallopian tubes will be visible at this time. X-ray pictures will be taken, and the instruments will be removed. Frequently, side views of the uterus and tubes are obtained by having you change your position on the table. Some menstrual-like cramping may occur; however, after the instruments are removed the cramping will begin to decrease and generally will stop within 15 minutes. The procedure will take between 15 to 30 minutes. You will be able to return to normal activities immediately after the procedure.

**To schedule an appointment, please visit [www.ausrad.com](http://www.ausrad.com) or call our scheduling department at (512) 453-6100.**

