

Transvaginal ultrasound guided aspiration

Transvaginal aspiration

 **Information for patients**



In hospital and in the community

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What is a transvaginal ultrasound guided biopsy?

Based on the scans that you have had, it has been decided that the cyst in your pelvis can be drained off using the transvaginal ultrasound guided technique. This technique is usually successful at getting rid of your pelvic cyst / collection. However, as your doctor has explained to you, the cyst can come back in the future but it is not possible to predict when.

How is it done?

The technique involves using a special ultrasound probe (transvaginal probe) which has been designed to be inserted into the vagina. The part of the probe that is inserted into the vagina is approximately the size of a tampon. The probe is used to find the cyst and assists the safe passage of the drainage needle. When the needle is inside the cyst, the doctor will drain the fluid using a syringe. The needle will be removed after the cyst has been drained.

How long does the procedure take?

The technique itself takes 10 - 15 minutes depending on the level of difficulty of the procedure. Time is also taken to prepare for the procedure. You should expect to be in the radiology department for about 45 minutes.

What happens before I have the procedure?

You will be asked to remove all your garments from the waist down, change into a gown, and empty your bladder. You will then be taken to the room where the procedure is performed. A nurse or clinical assistant will be with you during the procedure. The doctor will explain the procedure and ensure that you understand what is going to happen to you.

What should I expect during the procedure?

You will be asked to lie on your back either on a special cushion or with your legs in stirrups. The probe is covered with an antiseptic cream to reduce the risk of infection. This makes the probe feel cold. After the probe is inserted into the vagina, you will notice some movement and pushing. A local anaesthetic is injected to numb the vagina. You may notice a sharp pain, very similar to when giving blood. This will sting at first. Once numb, a small needle will then be inserted to drain the fluid.

What happens after the procedure?

You will be left in the room to clean yourself and get changed. The nurse will stay with you until you are ready. You will then go back to the ward where the nursing staff will carry out routine checks, such as pulse and blood pressure.

Patients can normally go home after a few hours.

We would advise you to attend the hospital with another responsible adult and avoid driving on the day of the procedure.

Is bleeding after the procedure normal?

Yes. You will have a show of blood after the procedure for the first few hours. This should disappear by the next day. Some patients have said that the bleeding is similar to a light period.

What are the possible risks and complications?

The procedure is generally safe and, apart from the initial pain and minor bleeding, it is very rare to have a complication. Potentially, the bladder, bowel and blood vessels in the pelvis can get caught in the path of the needle but this is a rare occurrence.

Bleeding is very rare, and is usually detected within the first few hours after the procedure. If there is excessive bleeding, a blood transfusion may be required.

If an infection develops after the procedure, you may need to have antibiotics or be admitted to hospital. It can take up to 10 days before this can become a problem. Symptoms included fever, pain and feeling generally unwell.

Very rarely, another procedure or surgery may become necessary as a result of a complication.

Occasionally, it may not be possible to get access to the cyst / collection in the pelvis.

What are the alternatives to this procedure?

1) Not to do anything. The cyst in your pelvis can be observed over time using scans alone.

or

2) To have abdominal surgery if it is technically possible. This may not be possible due to the position of the cyst or the risk of the surgery.

You would need to discuss this with your doctor.

Where is the procedure performed?

The procedure is performed in the ultrasound department of the Royal Hallamshire Hospital.

Who performs the procedure?

The procedure is performed by a radiology (x-ray) doctor. There may also be a trainee doctor observing the procedure. You have the right to refuse to have the trainee doctor in the room.

Do I have a choice of a female doctor?

At present, there are no female doctors who can perform this technique in Sheffield. However, there will be a female nurse or a clinical assistant in the room who will be with you during the procedure.

Is there anything I should look out for when I go home?

Infections could occur up to 10 days after the procedure. Signs of infection include:

- fever,
- increasing pain,
- feeling generally unwell,
- new vaginal discharge.

If you have continuous bleeding, or if you think you are developing an infection, please see below for contact information.

What if I have a problem after the procedure?

You should contact the gynaecology ward where you were admitted after the procedure. However, if you feel very unwell contact your GP, phone 111 or visit the Accident and Emergency Department.

What if I have any questions?

If you have any questions about the information in this leaflet, or about the procedure itself, please ask the nurse who is looking after you. Alternatively, you can contact the department on the telephone number on your appointment letter.

We will do our best to make your visit to Medical Imaging as pleasant as possible.



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