

# Ultrasound guided transvaginal biopsy



## Information for patients

Radiology





Your consultant has asked for you to have an ultrasound guided biopsy to investigate a suspicious area in your pelvis. Based on the scans that you have had, it has been decided that the area in your pelvis can be sampled (biopsied) using the transvaginal ultrasound guided technique. This technique is usually successful at obtaining a tissue sample.

## **What is the technique?**

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 area to be sampled and assists the safe passage of the biopsy needle.

## **How long does the procedure take?**

The technique itself takes 10-15 minutes and 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 clothes from the waist down, change into a gown, and empty your bladder. You will then be shown 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 before going numb. The biopsy needle will then be inserted to take a tissue sample. This may need to be repeated 2 or 3 times. After the sample has been taken, the needle and probe will be removed. The tissue sample will be sent to the laboratory.

## **What happens after the procedure?**

You will be left in the room to wash and get changed. The nurse will stay with you until you are ready. You will be shown back to the ward where the nursing staff will carry out routine observations such as pulse and blood pressure. You should be able to go home after a few hours.

We would advise you to attend the hospital with another responsible adult and to 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.

If you have excessive bleeding, you may need a blood transfusion.

If an infection develops after the procedure, you may need to have antibiotics or be admitted to hospital.

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

Occasionally, it may not be possible to get a sample or the sample taken may not give the diagnosis.

## **What are the other alternatives to this procedure?**

To do nothing, in which case the abnormality in your pelvis cannot be diagnosed, or

To have abdominal surgery if technically possible. This may not be possible due to the position of the abnormality or the risk of the surgery.

## **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.

As a teaching hospital, we have a responsibility to train future doctors, nurses and other health professionals. This means that students may be present during your treatment and be involved in your care. All our students work under the supervision of a qualified member of staff.

By allowing students to be involved in your care you can make a valuable contribution to their training. If you prefer not to, please tell a member of staff as soon as possible. You have a right to do this, and your decision will not affect your treatment in any way.

## **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?**

You should contact your own doctor or the hospital if you have any of the following: continuous pain, bleeding, new vaginal discharge, feeling hot and sweaty with a temperature, or having difficulty passing urine.

## **Who should I contact if I think there is a problem after the procedure?**

If you have any problems after the procedure, you should contact the gynaecology ward where you were admitted.

In case of emergency either contact your GP, call 111 for advice or visit the Accident and Emergency department.

If you have any questions about the information in this leaflet or about the procedure itself, please ask the nurse that is looking after you. We will do our best to make your visit to radiology as pleasant as possible.



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