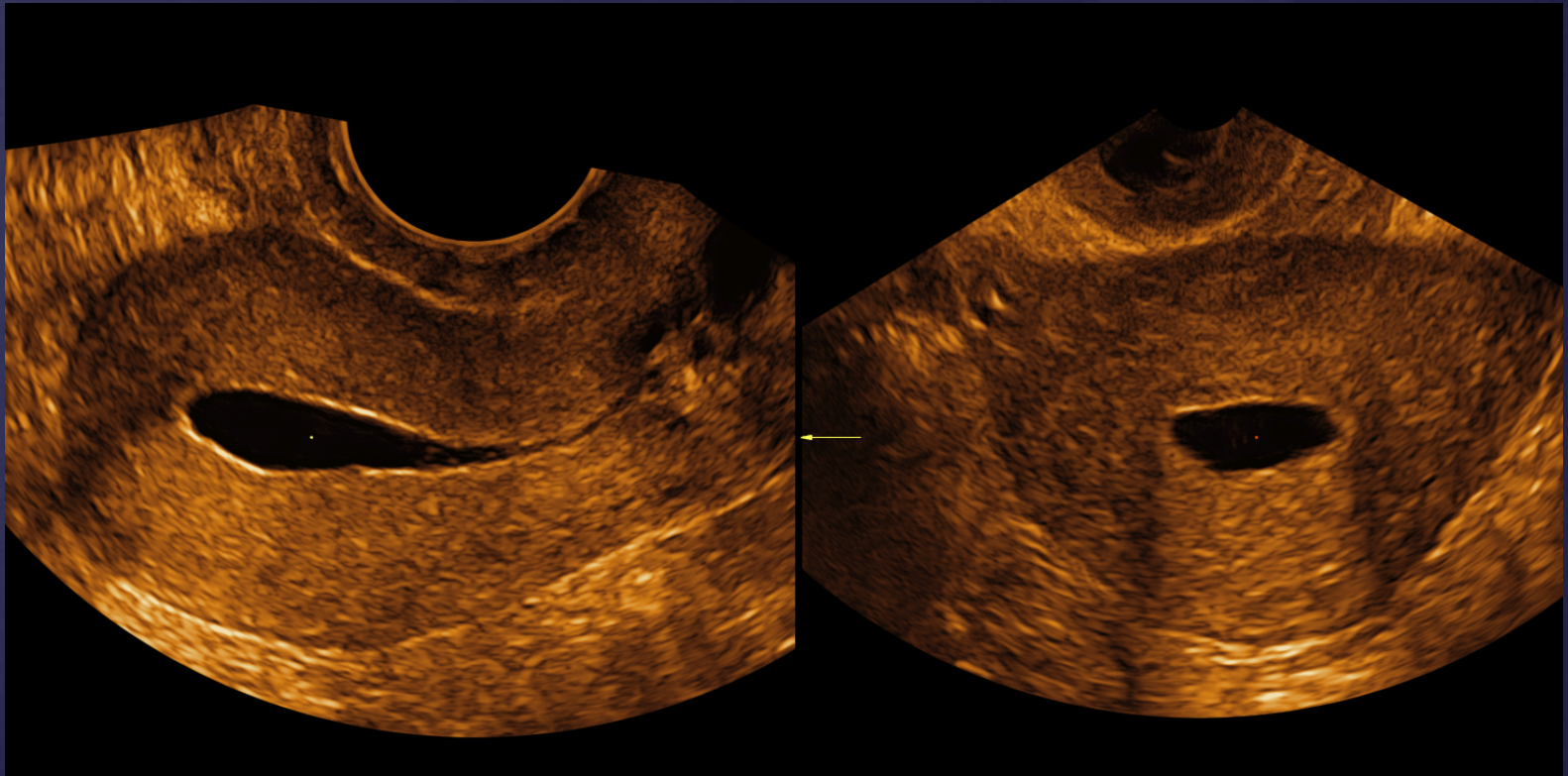
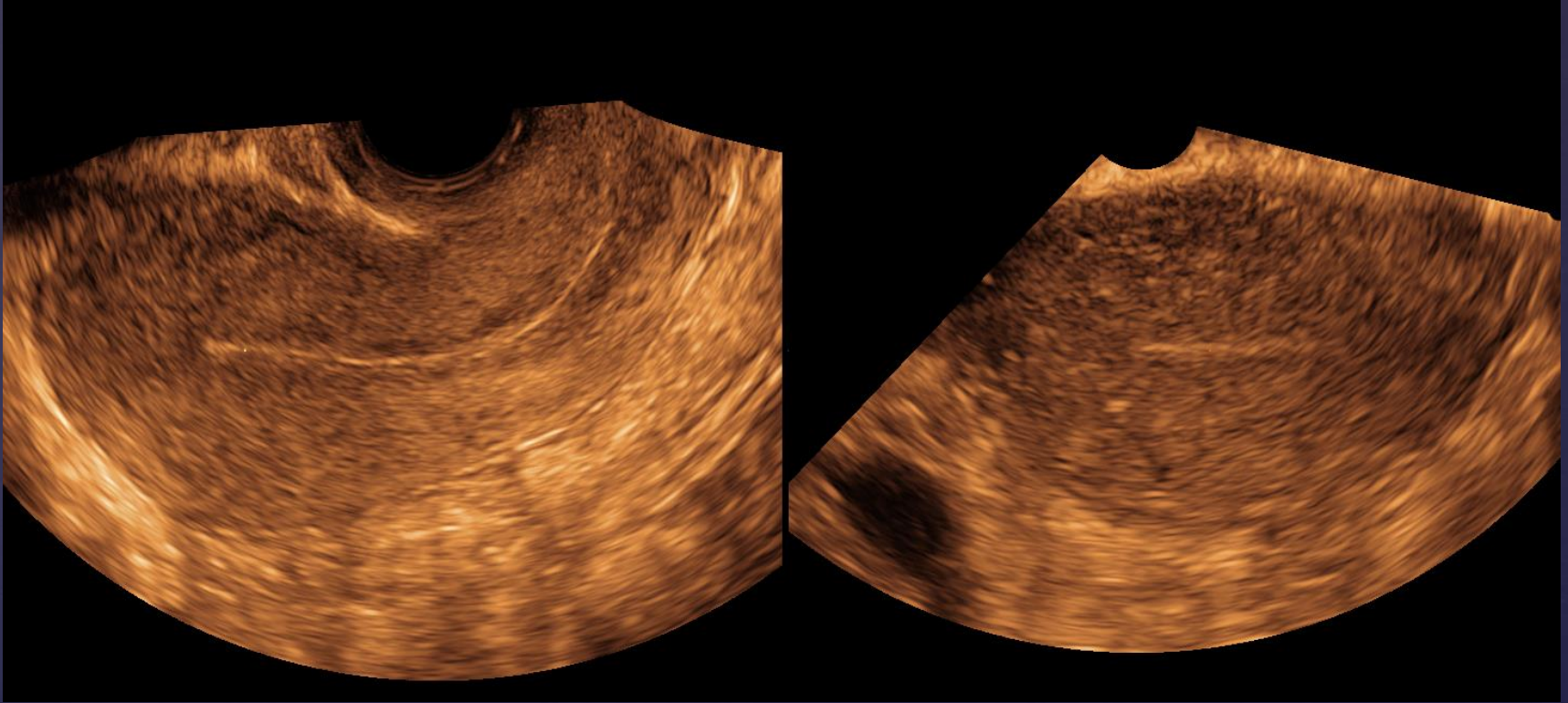


# *AIUM Image Library: Sonohysterography*

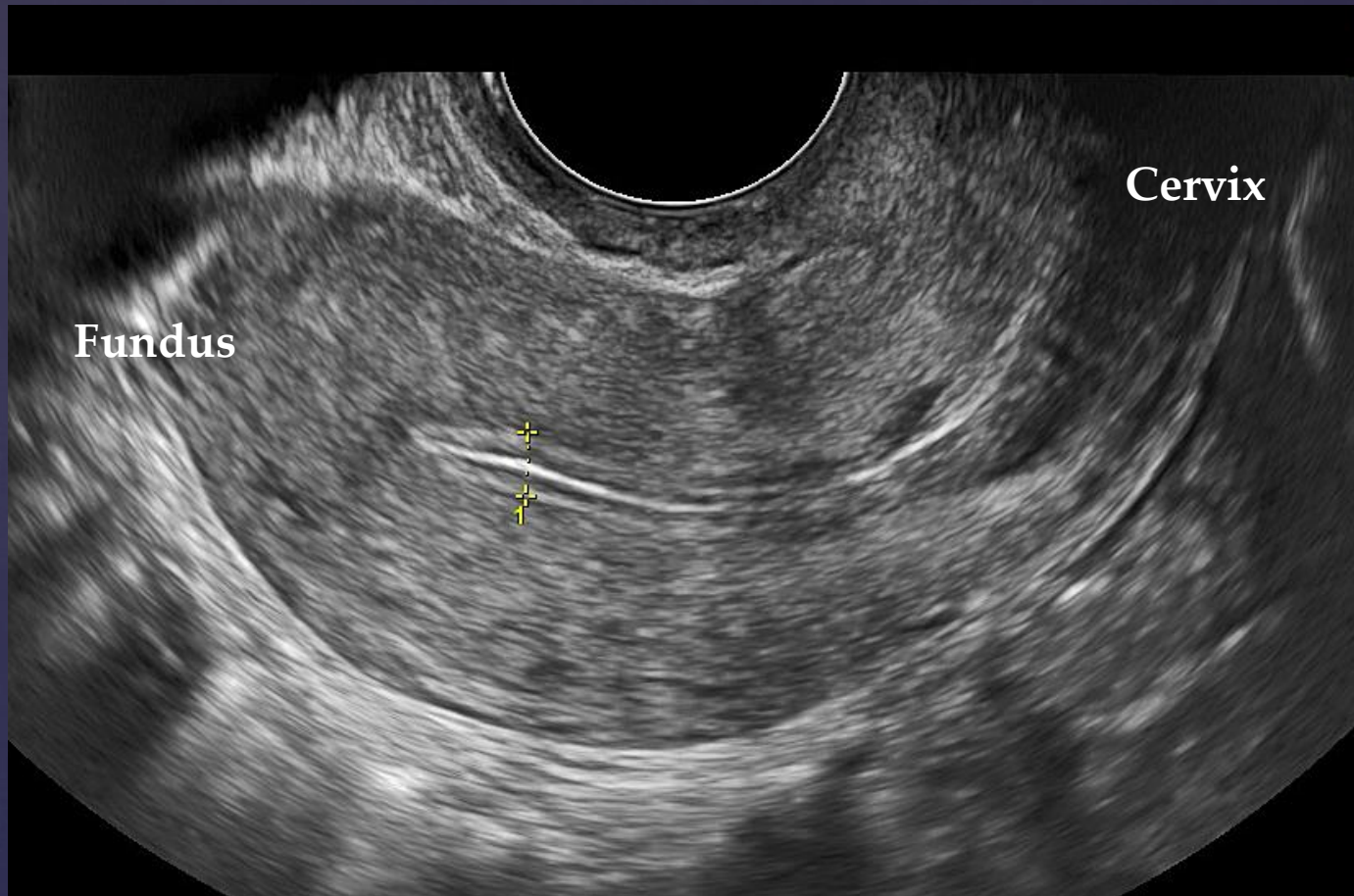


# *Preparation*



Preliminary endovaginal sonography of the uterus, endometrium and ovaries should be performed before sonohysterography. Precatherization images should be obtained and recorded, in at least 2 planes, to demonstrate normal and abnormal findings.

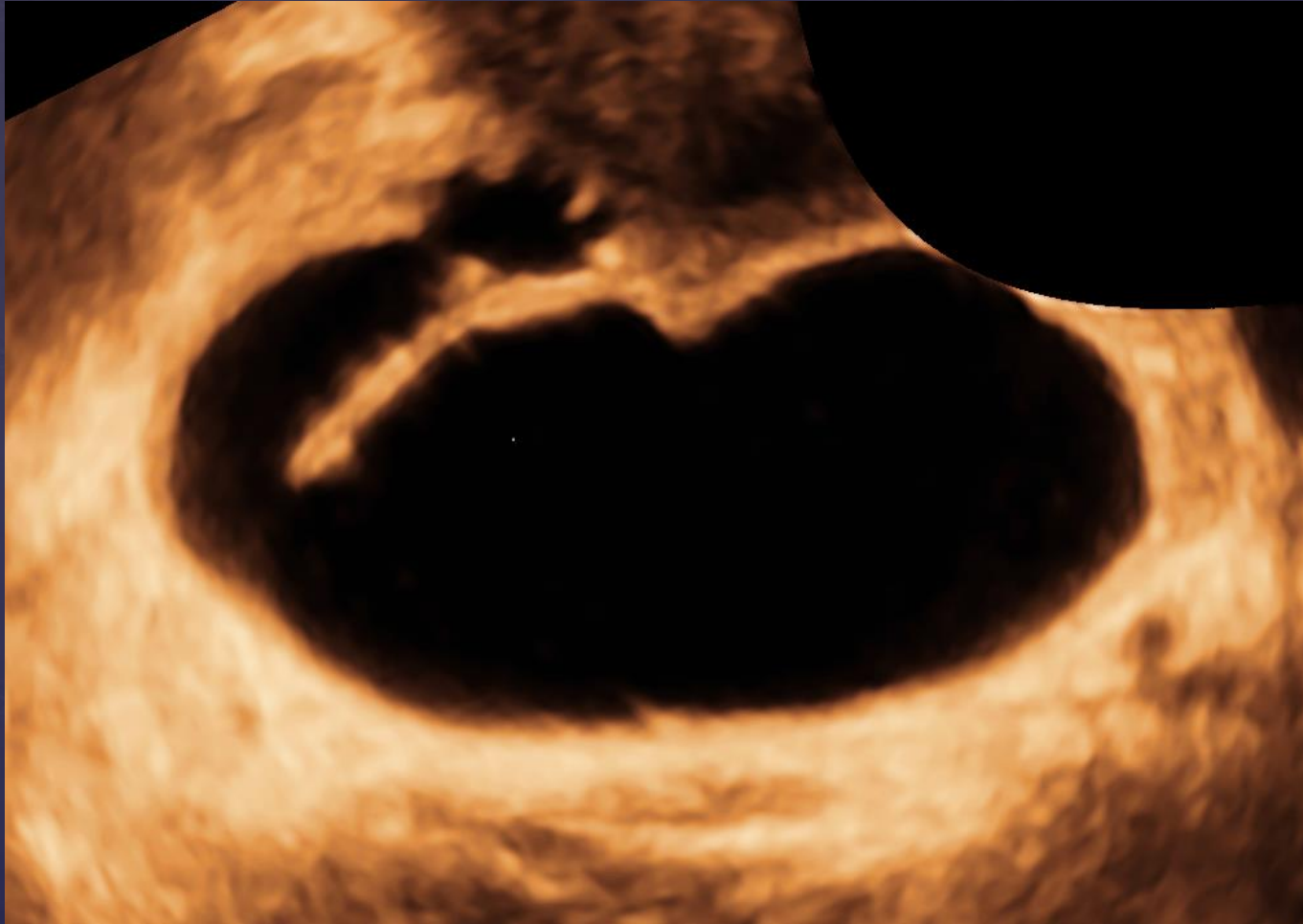
# *Preparation*



Sagittal scan of the uterus demonstrates a thin endometrium. In a patient with regular cycles, sonohysterography should not, in most cases, be performed later than the 10th day of the menstrual cycle.



# *Preparation*



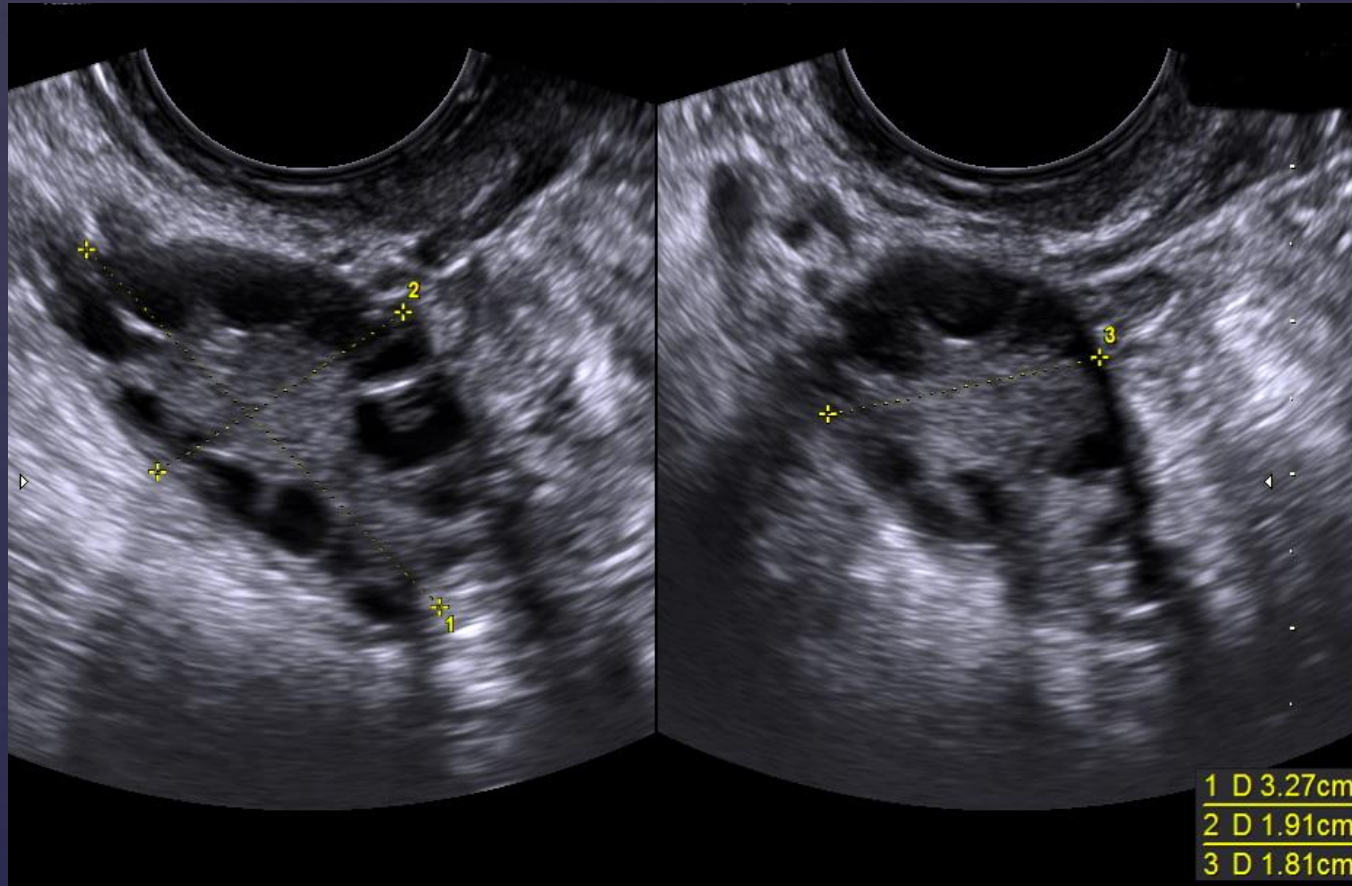
Transvaginal image of a hydrosalpinx. In the presence of nontender hydrosalpinges, consideration may be given to administering antibiotics at the time of the examination.

# *Endometrium*



Images of the uterus should include the thickest bilayer endometrial measurement on a sagittal image if possible.

# Ovaries



TV scan of an ovary showing measurements in three perpendicular planes.

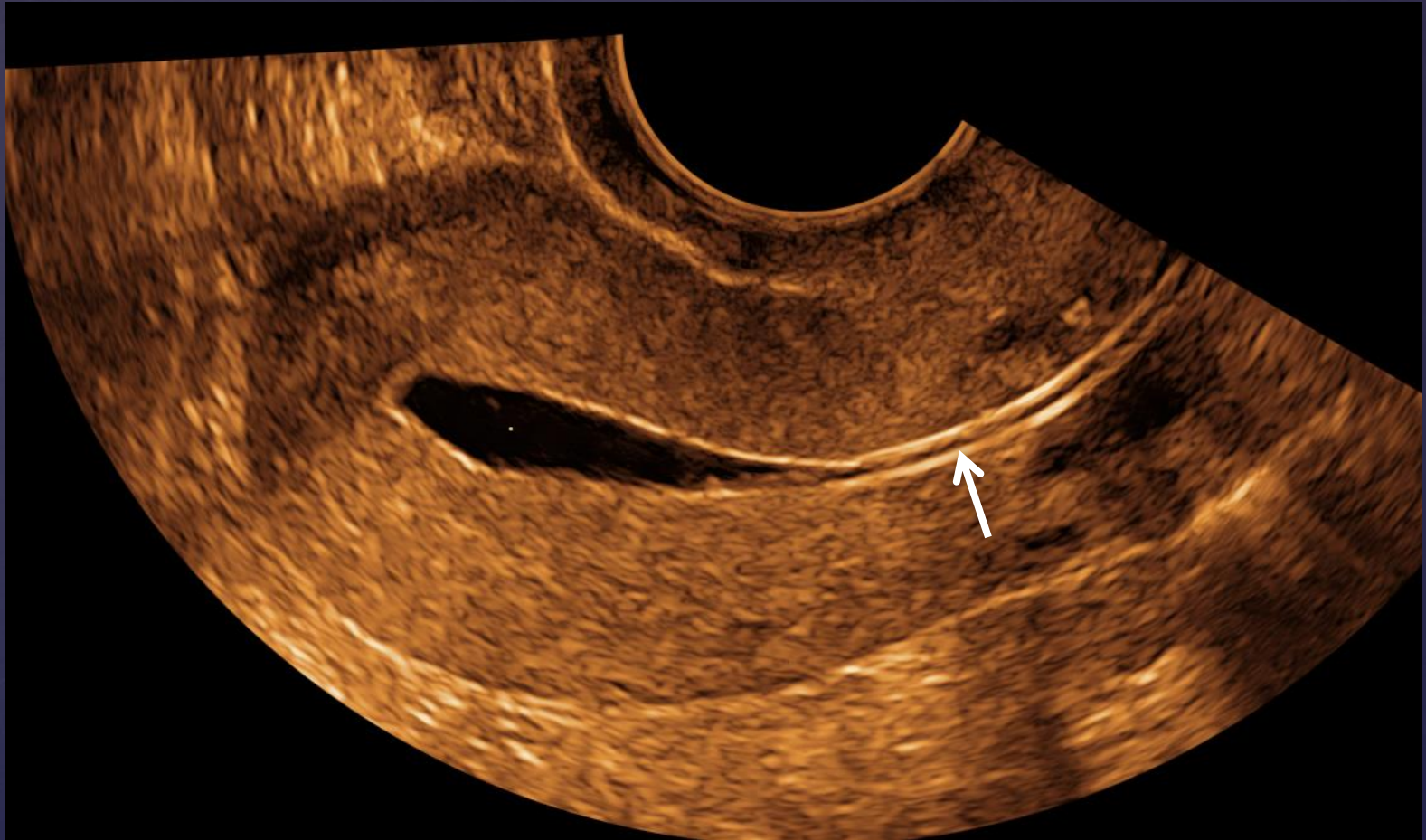


# *Cul de Sac*



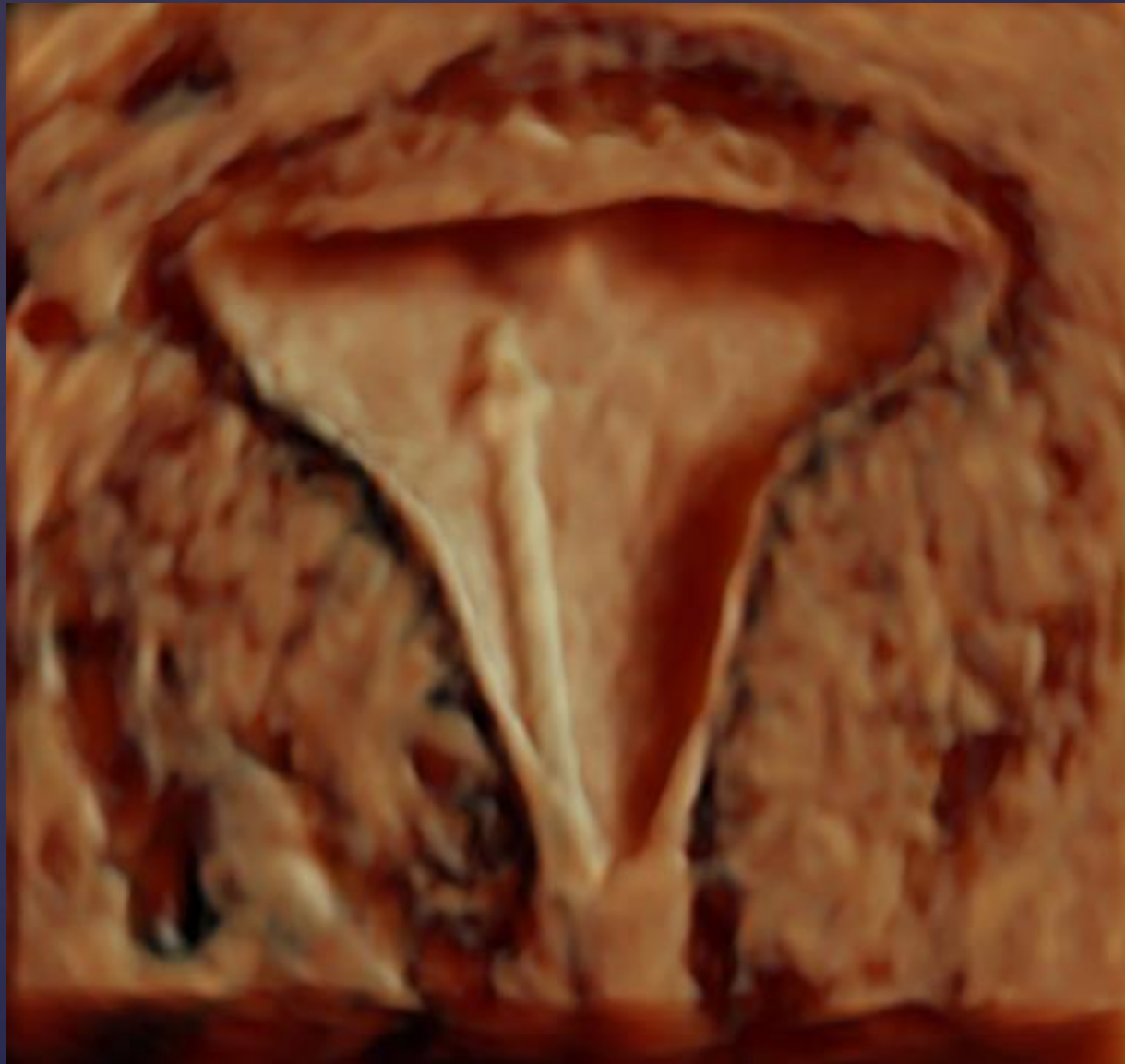
Evaluation should include the presence or absence of free fluid within the cul-de-sac.

## *Filling & Distending the Endometrial Cavity*

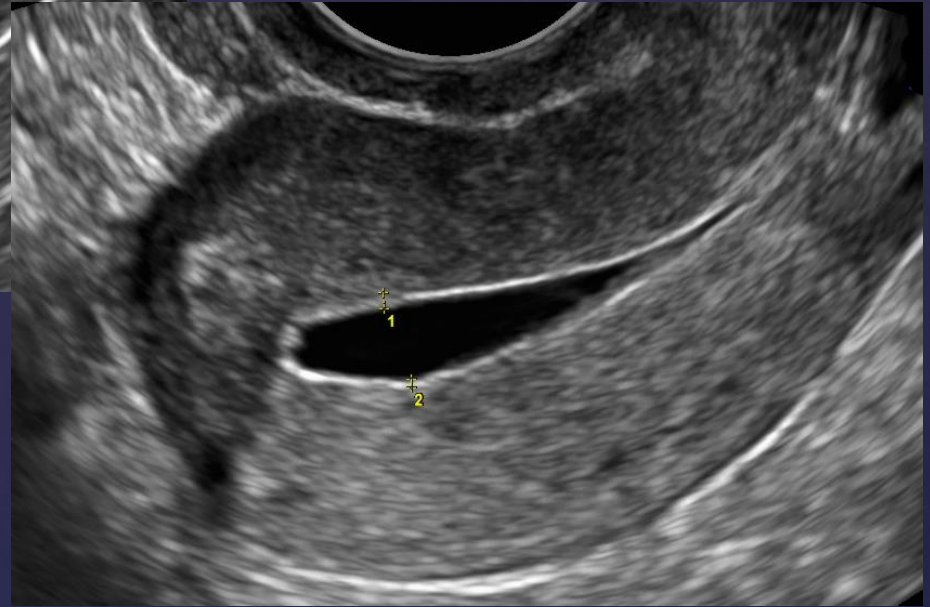
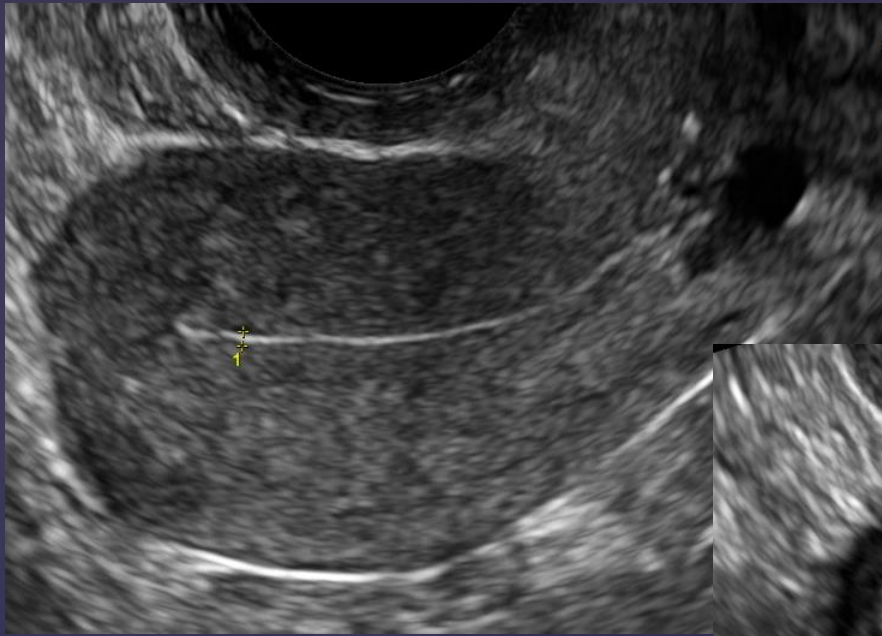


Appropriate sterile fluid, such as normal saline or water, should be used for sonohysterography. Note the double echogenic line of the catheter within the cervix (arrow).

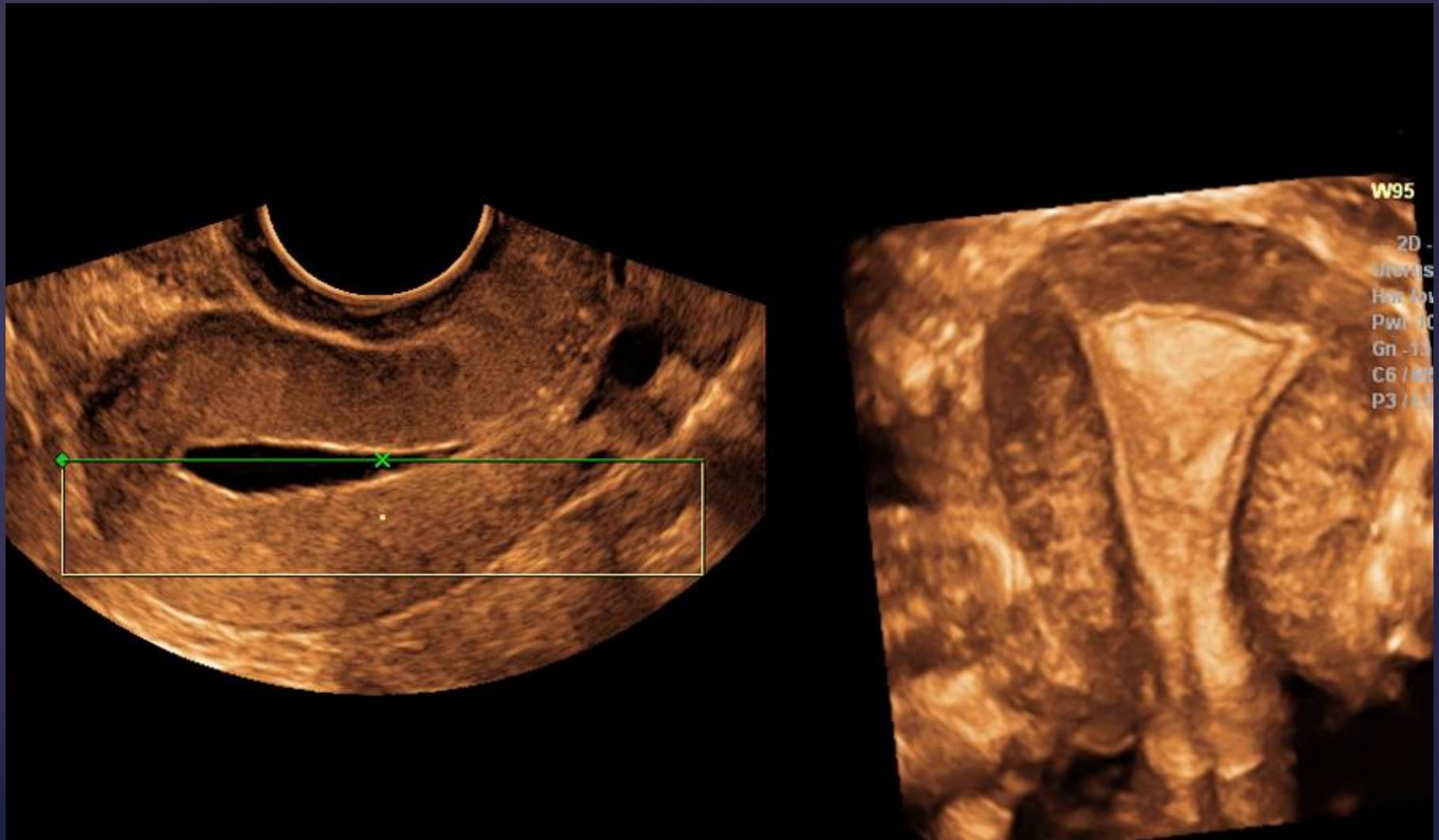




A coronal view of the uterine cavity using 3D ultrasound and *Hdlive* surface rendering. Note the catheter tip within the endometrial cavity.



Sagittal images of the endometrial cavity pre- and post-distension.

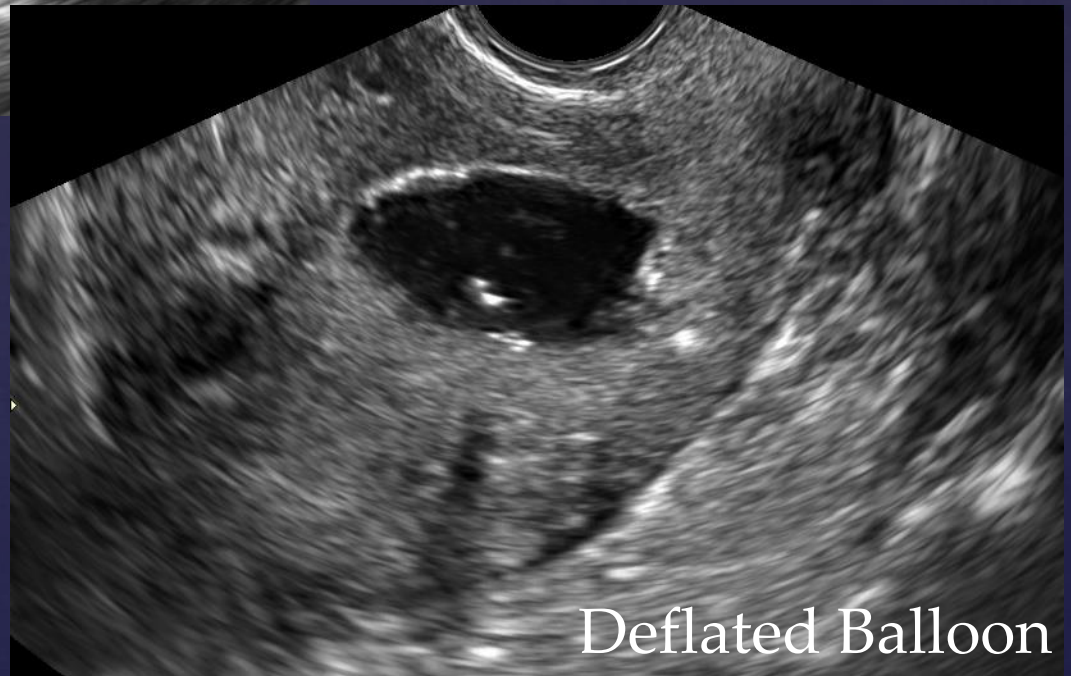


3D rendered coronal images of the endometrial cavity post-distension.

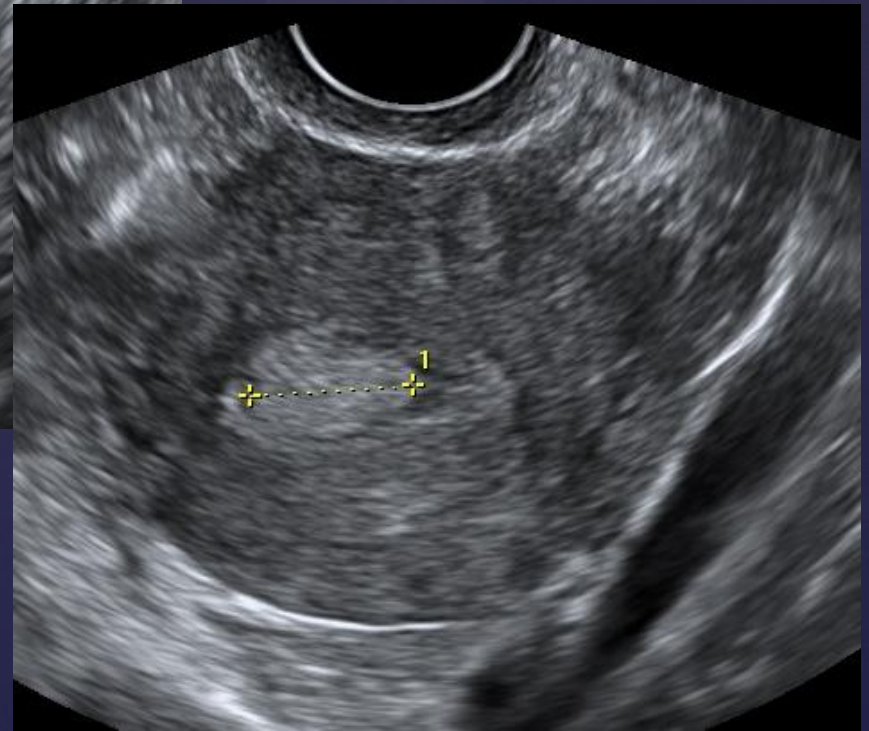
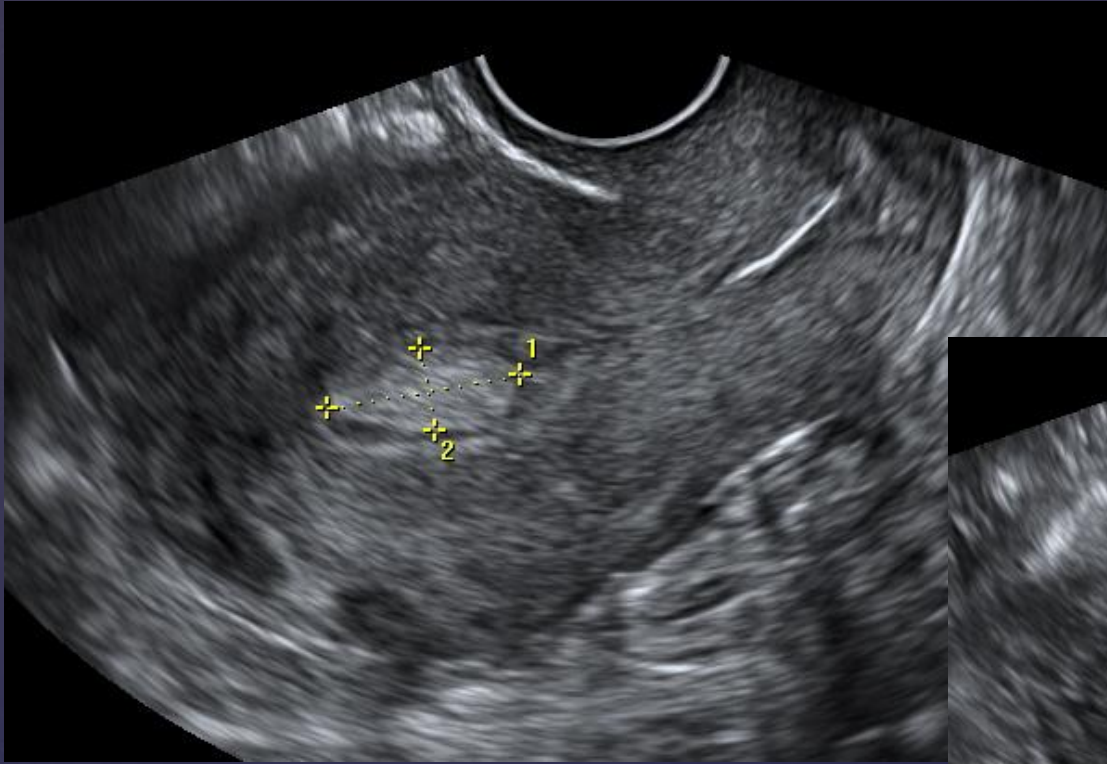




Whenever a balloon catheter is used, document its removal.



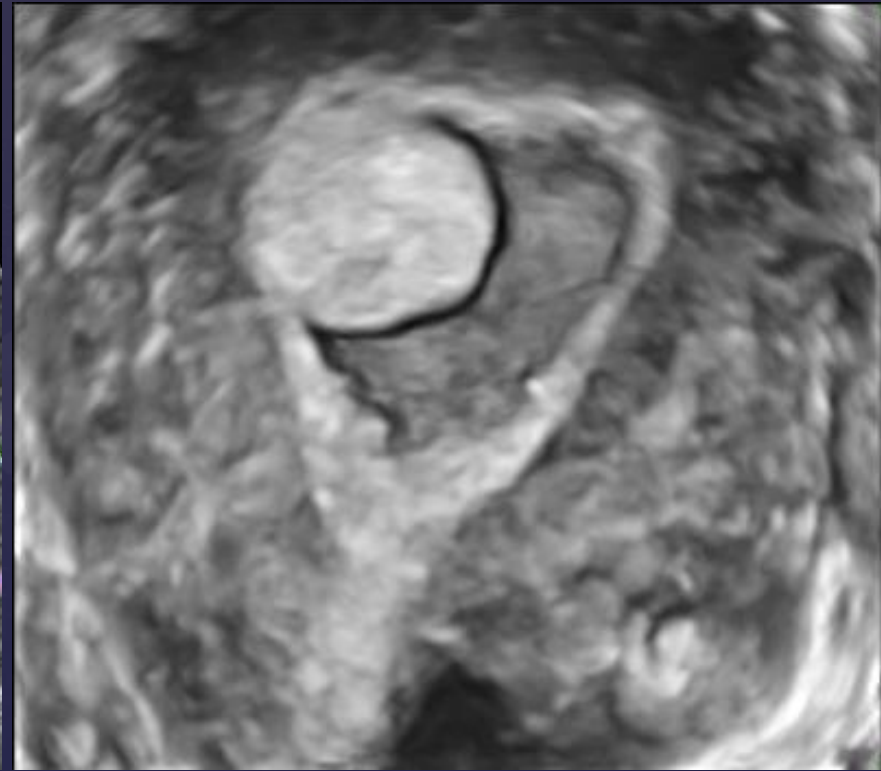
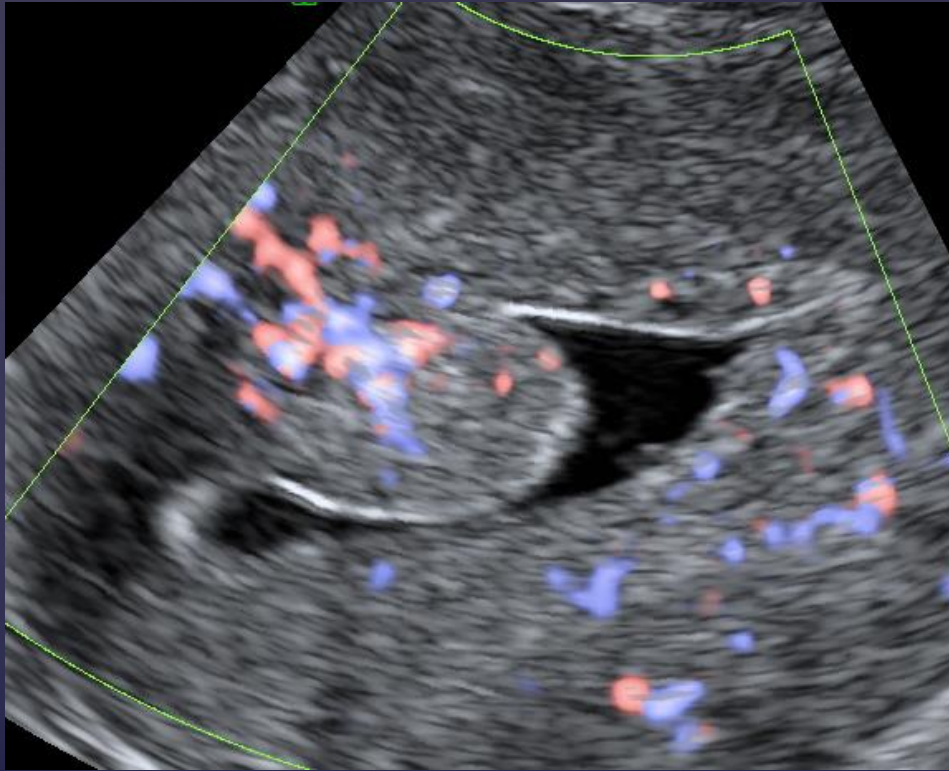
# *Case Presentation 1*



Precatheterization images as obtained and recorded in a patient with an endometrial polyp. The abnormality should be measured in at least 2 planes.







Additional techniques, such as color Doppler and 3D imaging, may be helpful.

# Case Presentation 2

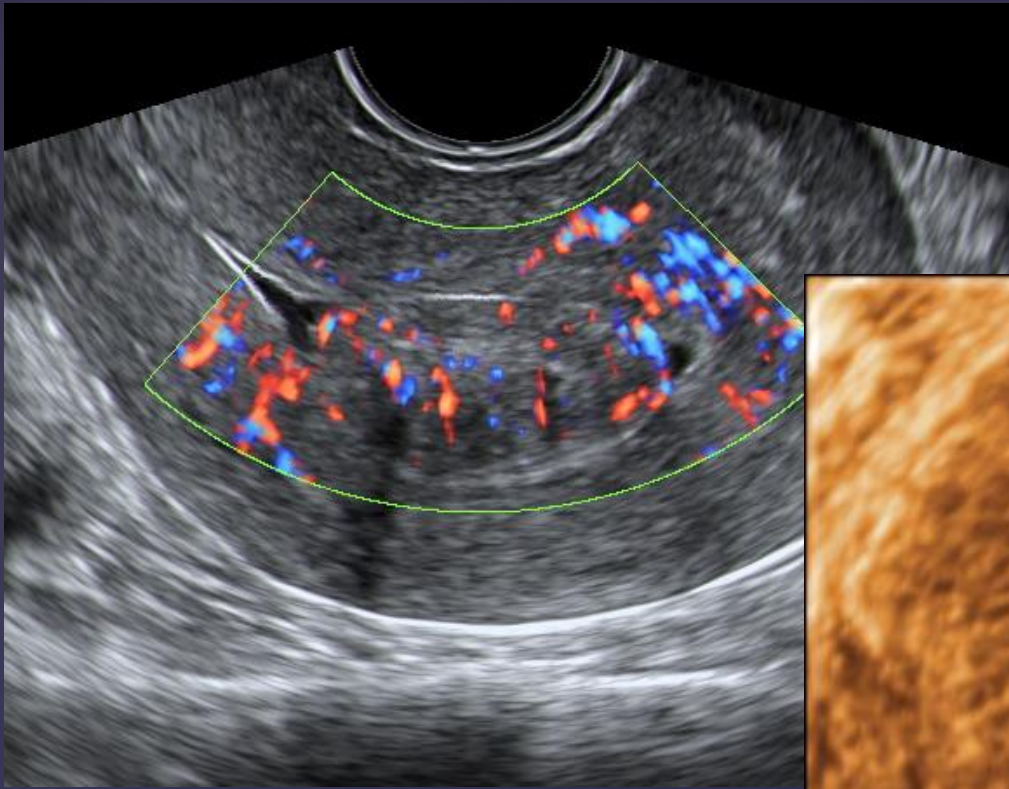


Retroverted uterus with a centrally located fibroid obscuring the endometrium.

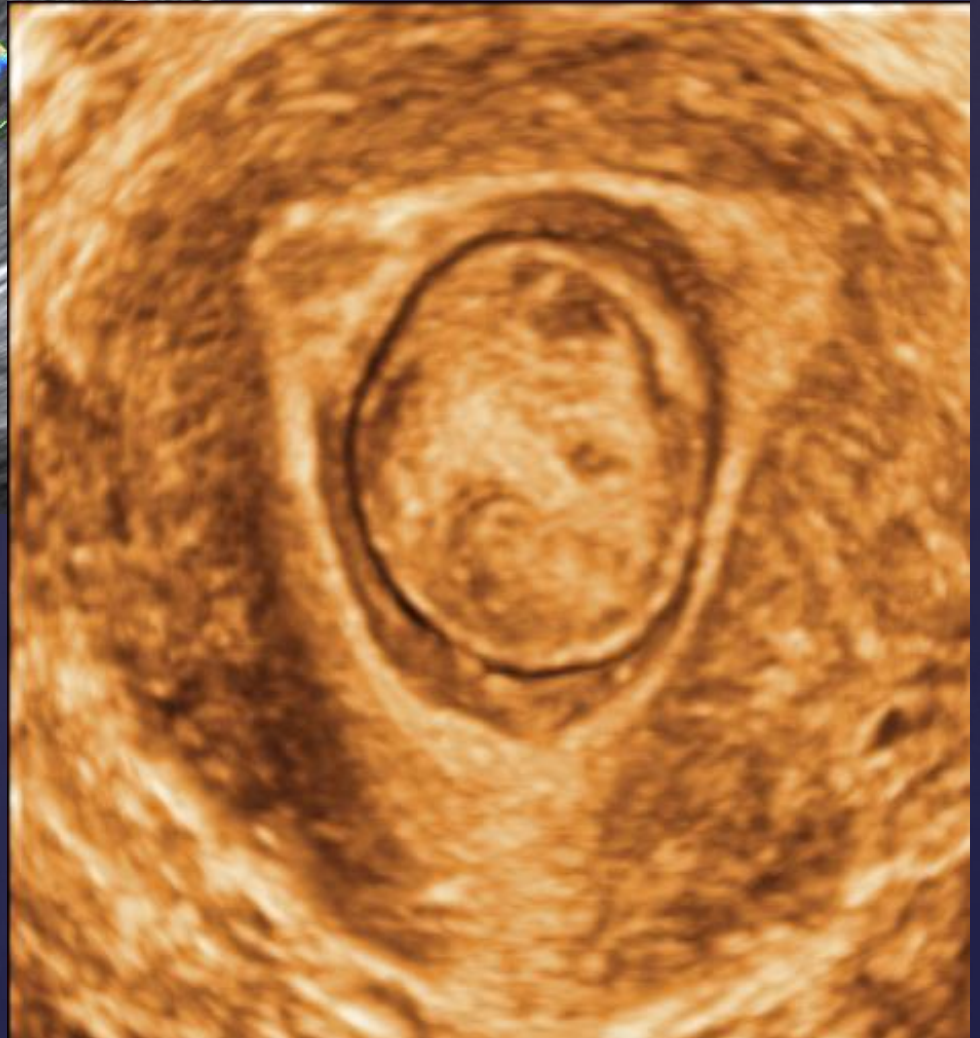
Sonohysterography demonstrates the submucosal location of the fibroid. The endometrium was normal.







Color Doppler and 3D imaging  
aid in evaluating the fibroid.

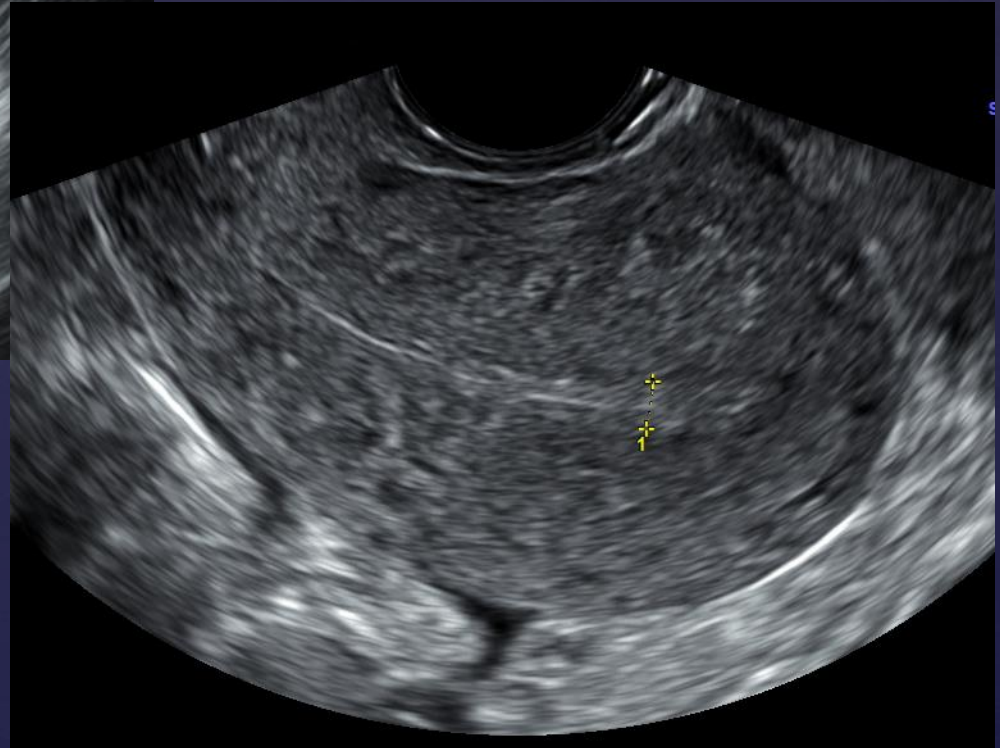


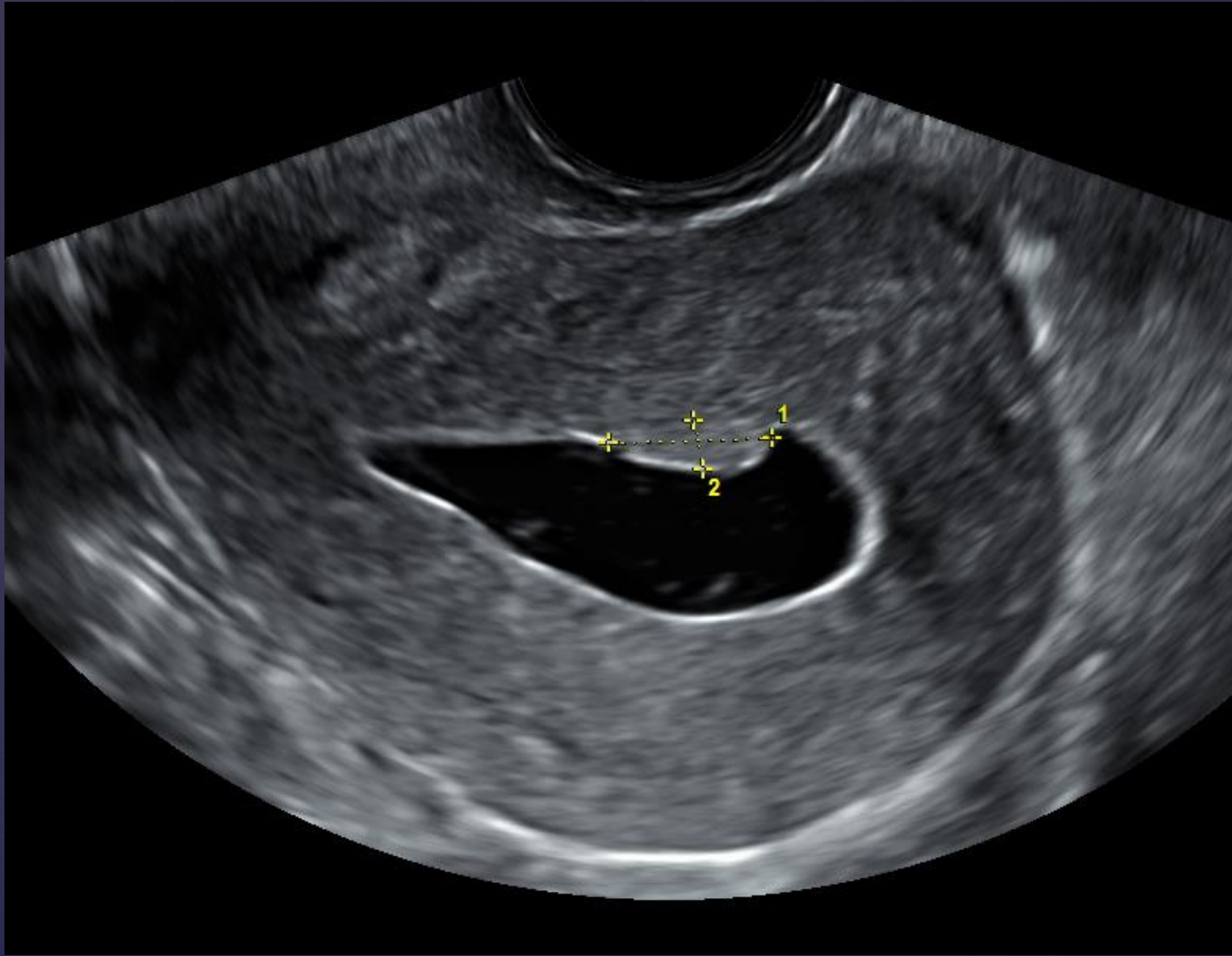


# *Case Presentation 3*



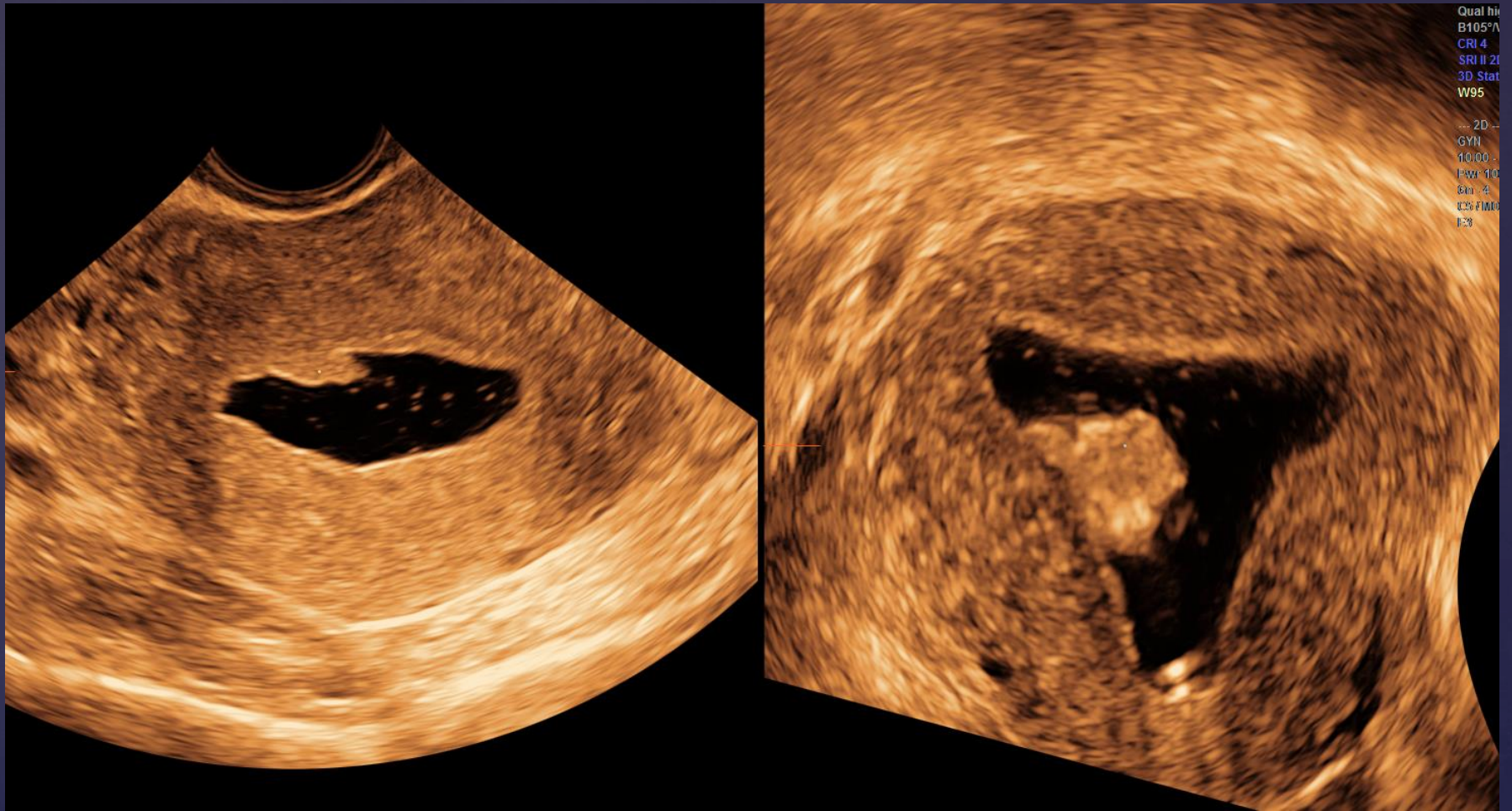
Patient referred for irregular bleeding. Transvaginal exam of the uterus did not reveal any abnormalities of the endometrium.





Sonohysterography in the same patient reveals a small endometrial polyp.





3D evaluation demonstrating the polyp in the same patient as in prior 2 scans.



# *Case Presentation 4*



Intrauterine adhesions (synechiae) demonstrated by sonohysterography.