

Pearl W. Yee, M.D. Inc.

Obstetrics • Gynecology • Medical Aesthetics Fertility • Menopause • Urinary Incontinence Advanced & Minimally Invasive Female Surgery

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Patient Education and Informed Consent for Endometrial Biopsy

An endometrial biopsy (EMBx) is a minor office procedure used to sample the lining of the uterus call the endometrium. This procedure is commonly used to evaluate abnormal bleeding or a thickened endometrial lining on ultrasound. Many patients prefer this simple office procedure under local anesthesia to avoid a full dilation and curettage which requires going to an operating room. If general anesthesia is desired, or significant polyps or tissue need to be removed, a D&C would be offered instead of an endometrial biopsy.

A thin plastic catheter will be passed through the cervix into the uterine cavity. Most patients tolerate this very well with only mild cramps. Postmenopausal patients may need to prepare and soften a stenotic cervix with Misoprostil (2 pills inserted into the vagina the night before with water moistened fingers). Misoprostil may cause cramping and mild bleeding within 2 hours after insertion; if this occurs, feel free to take some Tylenol or Motrin.

We recommend for patients to take 3-4 Advils or Motrin 200 mg approximately 1 hour before the procedure. A warm heating pad can be applied to the lower abdomen for your comfort. After preparation and cleaning, the cervix will be numbed with a local anesthetic. A thin plastic catheter is passed into the uterus for 3 seconds to remove the biopsy specimen. Allow yourself 30 mins for the visit, most patients are able to leave immediately or after a short rest on their own. Afterwards, patients may experience cramping for several hours. We recommend Motrin or Advil up to 800 mgs, 3 times a day as needed. The post procedure spotting and mild discharge may persist for a few hours to two days. Our office will provide a peri-pad for your convenience after the procedure. Please notify us immediately if you experience bleeding heavier than a period, fever, vomiting, worsening pain, or an allergic reaction.

EMBx is the most common procedure performed in the office. Complications are rare, however include: perforation of the uterus, infection, excessive bleeding, and allergic reactions to local anesthetic. Inform us if you have a: severe anemia, blood clotting problem, heart disease, pelvic infection, extreme anxiety, pregnancy or a health condition that I have not informed you about yet. If so, you have been cleared medically before the procedure.

Endometrial biopsies are 97% accurate. There is no guarantee as to the results of this procedure and that pathology could not co-exist and not be detected. Not all endometrial biopsies can be completed in the office. If cervical stenosis is significant, a hospital cervical dilation and hysteroscopy D&C will be recommended.

Please ask us if you have any further questions or concerns. Your care, comfort and safety are our priority. The results from the pathology department should be available within 5 working days. The results assist us in making recommendations regarding treatment options for any persisting abnormal bleeding. Please make your next follow-up appointment within 2 weeks. If you wish to be informed regarding the results of the pathology report before your next visit, please call us 5 working days after your procedure to leave a message and expect a call back within 2 days.

Patient Signature: X	Date:
Patient Name Printed:	DOB:
Witness / MD Signature:	

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