

Frequently Asked Questions

What is sonohysterography?

Sonohysterography is a special kind of **ultrasound exam**. It also is called saline infusion sonography, or SIS.

Fluid is put into the **uterus** through the **cervix** using a thin plastic tube. Sound waves are then used to create images of the lining of the uterus. The fluid helps show more detail than when ultrasound is used alone.

This test can be done in the office of your **obstetrician-gynecologist (ob-gyn)**, a hospital, or a clinic. It usually takes less than 30 minutes.

For what reasons is a sonohysterography performed?

Sonohysterography can find the underlying cause of many problems, including **abnormal uterine bleeding**, **infertility**, and repeated miscarriage. It is able to detect the following:

- Abnormal growths inside the uterus, such as **fibroids** or **polyps**, and information about their size and depth
- Scar tissue inside the uterus
- Abnormal uterine shape
- Problems with the lining of the uterus
- Whether the **fallopian tubes** are open or blocked

This test is a safe way to find the cause of problems related to the uterus. Results can help your ob-gyn recommend the best treatment for you.

What is done to prepare for a sonohysterography?

Sonohysterography is not done if you are or could be pregnant or if you have a pelvic infection. You may be given a urine test to rule out pregnancy before the procedure. You may be asked if you are allergic to latex.

The test usually is scheduled at a time in your [menstrual cycle](#) after your period has stopped but before [ovulation](#) . If you are bleeding at the time of the test, the results may not be as clear. If you have off-and-on abnormal bleeding or bleeding that will not go away, you may be given a medication to stop the bleeding before the test.

Sonohysterography is done when your bladder is empty. You will be asked to undress from the waist down and lie on an exam table. Your ob-gyn may do a [pelvic exam](#) to see if you have any tenderness or pain. If your ob-gyn thinks you have an infection, you may need to take [antibiotics](#) to clear up the infection before you have the procedure.

The procedure can cause some cramping. You may want to take an over-the-counter pain reliever, such as ibuprofen or acetaminophen, beforehand. Ask your ob-gyn what would be best.

What are the main steps of a sonohysterography?

Sonohysterography has three main parts:

1. performing an initial [transvaginal ultrasound exam](#)
2. putting fluid inside the uterus
3. repeating an ultrasound exam

What is a transvaginal ultrasound exam?

For a transvaginal ultrasound exam, an ultrasound [transducer](#) —a slender, handheld device—is placed in the [vagina](#) . It is covered by a disposable sheath (like a condom). It

sends out sound waves that are used to make images of the internal organs. These images are shown on a screen.

How is the fluid put inside the uterus for a sonohysterography?

After the first transvaginal ultrasound exam, the transducer is removed. A **speculum** is placed in the vagina. It holds the vagina open. A swab is passed through the speculum to clean the cervix.

Next, a thin tube is inserted into the vagina and placed in the opening of the cervix or inside the uterus. The speculum then is removed.

The transducer is placed in the vagina again. A sterile fluid is slowly passed through the tube. Cramping may occur as the fluid goes into the uterus.

What happens after the fluid is put inside the uterus?

When the uterus is filled with fluid, ultrasound images are made of the inside of the uterus and the uterine lining. If the test is being done to assess your fallopian tubes, fluid containing bubbles is placed inside the uterus through the tube. The bubbles make the fluid easier to see. The pathway of the fluid through the fallopian tubes is noted on ultrasound.

What can I expect after a sonohysterography?

Most women are able to go home right away and are back to their normal activities that day. Some of the following symptoms may occur after the test:

- Cramping
- Spotting or light bleeding
- Watery discharge

What are the risks of a sonohysterography?

This test is very safe, but there is a rare risk of pelvic infection. Call your ob-gyn if you have any of the following symptoms:

- Pain or fever in the day or two after you go home
- A change in the type or amount of discharge

What are alternatives to sonohysterography?

Other tests may be used to diagnose problems of the uterus:

- **Hysterosalpingography** –This X-ray test is used to view the inside of the uterus and fallopian tubes and can show whether the tubes are blocked. It uses radiation and a fluid that contains a dye.
- **Hysteroscopy** –A slender, light-transmitting device with a small camera attached—the hysteroscope—is inserted into the vagina and through the cervix to look inside the uterus. It is used to diagnose and treat certain problems inside the uterus.
- **Magnetic resonance imaging (MRI)** –This imaging test is used to view the internal organs, but it does not show the inside of the uterus as clearly as sonohysterography does.

Glossary

Abnormal Uterine Bleeding: Bleeding from the uterus that is different from what is normal for a woman who is not pregnant. This bleeding may vary in how long, how regular, and how often it occurs.

Antibiotics: Drugs that treat certain types of infections.

Cervix: The lower, narrow end of the uterus at the top of the vagina.

Fallopian Tubes: Tubes through which an egg travels from the ovary to the uterus.

Fibroids: Growths that form in the muscle of the uterus. Fibroids usually are noncancerous.

Hysterosalpingography: A special X-ray procedure in which a small amount of fluid is placed in the uterus and fallopian tubes to find abnormal changes or see if the tubes are blocked.

Hysteroscopy: A procedure in which a lighted telescope is inserted into the uterus through the cervix to view the inside of the uterus or perform surgery.

Infertility: The inability to get pregnant after 1 year of having regular sexual intercourse without the use of birth control.

Magnetic Resonance Imaging (MRI): A test to view internal organs and structures by using a strong magnetic field and sound waves.

Menstrual Cycle: The monthly process of changes that occur to prepare a woman's body for possible pregnancy. A menstrual cycle is defined as the first day of menstrual bleeding of one cycle to the first day of menstrual bleeding of the next cycle.

Obstetrician–Gynecologist (Ob-Gyn): A physician with special training and education in women's health.

Ovulation: The time when an ovary releases an egg.

Pelvic Exam: A physical examination of a woman's pelvic organs.

Polyps: Abnormal tissue growths that can develop on the inside of an organ.

Sonohysterography: A procedure in which sterile fluid is injected into the uterus through the cervix while ultrasound images are taken of the inside of the uterus.

Speculum: An instrument used to hold open the walls of the vagina.

Transducer: A device that sends out sound waves and translates the echoes into electrical signals.

Transvaginal Ultrasound Exam: A type of ultrasound in which the device is placed in your vagina.

Ultrasound Exam: A test in which sound waves are used to examine inner parts of the body. During pregnancy, ultrasound can be used to check the fetus.

Uterus: A muscular organ in the female pelvis. During pregnancy, this organ holds and nourishes the fetus. Also called the womb.

Vagina: A tube-like structure surrounded by muscles. The vagina leads from the uterus to the outside of the body.

If you have further questions, contact your ob-gyn.

Don't have an ob-gyn? [Learn how to find a doctor near you.](#)

FAQ175

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