SMB
Hysterometer/Probe
Code : SSP/DSP

CE 2862

INSTRUCTIONS FOR SOUNDING THE UTERUS

The Probe should be used under the supervision of a Gynaecologist / Physician

GENERAL INFORMATION

The Probe / Hysterometer are intended for probing a woman's uterus through the cervix, to measure the length and direction of the cervical canal and uterus, to determine the level of dilation, or to induce further dilation. SMB Hysterometer / Probe is a slender flexible sound with a small projection at its tip. It is used to estimate the size and caliber of the uterine cavity. There are centimeter graduations marked on the shaft for depth measurements. Due to bulbous rounded tip, the SMB Hysterometer / Probe may be used to dilate the cervical canal to allow entry into the uterus primarily for evaluation of the uterine cavity.

BRIEF OVERVIEW OF THE PROCEDURE:

- Insert a Speculum to visualize the cervix.
- Clean the cervix and vagina.
- Apply a tenaculum to the cervix.
- Gently pull the tenaculum to align the uterus, cervical opening, and vaginal canal.
- Insert the sound into the vagina and through the cervical opening.
- Advance the sound into the uterine cavity until a slight resistance is felt.
- Remove the sound and assess the level of mucus/blood to determine the depth of the uterus.

RATIONALE:

This procedure is recommended for all IUD insertions to ensure high fundal Placement of the IUD. Sounding the uterus also enables the provider to:

- Confirm the position of the uterus and check for obstructions in the cervical canal
- Identify the direction of the cervical canal and uterine cavity so that the insertion tube can be angled appropriately to follow the canal
- Assess the depth from external cervical os to the uterine fundus so that the depth-gauge on the insertion tube can be set at the same distance, there by ensuring that the IUD will be placed as high in the uterine fundus as possible (without perforating the uterus)

USING GENTLE, "NO-TOUCH" (ASEPTIC) TECHNIQUE THROUGHOUT, PERFORM THE FOLLOWING STEPS:

STEP 1 :

PREPARE THE CLIENT:

Give the women a brief overview of the procedure (as shown above), encourage her to ask questions, and provide reassurance as needed.

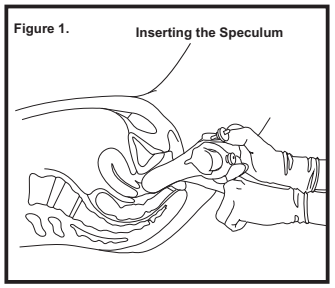
Remind her to let you know if she feels any pain.

STEP 2 :

Put new / clean examination or high-level disinfected surgical gloves on both hands (if not already done).

STEP 3 :

Insert the high- level disinfected (or sterile) speculum and visualize the cervix **(**if not already done**) (**Figure 1)



If the cervix bleeds easily when touched, or purulent cervical discharge or other abnormal signs are found, do not insert the IUD.

STEP 4:

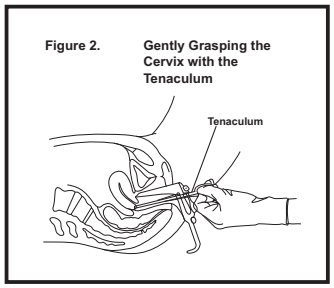
Cleanse the cervix and vagina with an appropriate antiseptic:

Thoroughly apply an appropriate antiseptic (e.g., Povidone iodine or chlohexidine) two or more times to the cervix and vagina. If povidone iodine is used, ensure that the women is not allergic to iodine and wait 2 minutes for the solution for the act.

STEP 5:

Gently grasp the cervix with the high-level disinfected (or sterile) tenaculum and apply gently traction :

Gently grasp the cervix with the tenaculum (Figure 2) and apply gently traction (i.e., Pull gently), which will help straighten the cervical canal for easier insertion of the IUD. **Close the tenaculum Only to the first notch to minimize discomfort**.



STEP 6:

Carefully insert the high-level disinfected (or sterile) sound :

While mainataining gentle traction on the tenaculum, carefully insert the tip of the sound into the cervical os. **Be careful not to touch walls of vagina or the speculum blades with the tip of the sound**.

STEP 7:

Gently advance the sound into the uterine cavity, and STOP when a slight resistance is felt:

- Advance the sound carefully and gently into the uterine cavity at the appropriate angle (based on your assessment of the position of the uterus during bimanual examination).
- Continue to pull steadily downward and outward on the tenaculum, which should enable the sound to pass through the os more easily.
- If any resistance is felt at the level of the internal os, use a smaller sound, if available. Do not attempt to dilate cervix unless well qualified to perform this procedure.
- If the woman begins to show signs of fainting, STOP advancing the sound into the uterine cavity.

  Do not use force at any stage of this procedure.
- When you feel a slight resistance, STOP advancing the sound into the uterine cavity. (A slight resistance indicates that the tip of the sound has reached the fundus.)
- If a sudden loss of resistance is felt, the uterine depth is greater than expected, or the woman is experiencing unexplained pain, STOP advancing the sound into the uterine cavity.

STEP 8:

Note the angle of the uterine cavity (for IUD insertion), and remove the sound.Do not pass the sound into the uterus more than once.

STEP 9:

Determine the depth of the uterus:

- Determine the depth of the uterus by noting the level of mucus or wetness on the sound. (The average uterus is between 6 and 8 cm in depth. If the uterus is less than 6.5 cm in depth, the woman may be at

increased risk for IUD expulsion.)
- Place the sound in 0.5% chlorine solution for 10 minutes for decontamination.

INTENDED USE:

The Hysterometer/Probe are intended for probing a woman's uterus through the cervix, to measure the length and direction of the cervical canal and uterus, to determine the level of dilation, or to induce further dilation. SMB Hysterometer/Probe is a slender flexible sound with a small projection at its tip.

REUSE

Do not reuse the device. It may cause lower abdominal infection.

CONTRAINDICATION:

- The procedure is contraindicated in suspected pregnancy or in women with acute pelvic inflammatory disease.
- It is also contraindicated in women with chronic cervical infections or any conditions which contraindicate an outpatients surgical procedure.
- A patient with an intrauterine device (IUD) currently in place.

PRECAUTIONS :

Local anesthesia and visualization should be achieved before initiating procedure in an informed patient. Adequate visualization of the entire cervix with sufficient lighting should be achieved to ensure proper placements of the SMB Hysterometer / Probe.Take care not to perforate the uterine cavity by exerting too much pressure with the SMB Hysterometer /Probe , if resistance is felt . If perforation does occur, the patients must be observed to ascertain whether laparoscopy or laparotomy needs to be performed.

WARNINGS :

- Do not exert pressure during insertion. It may cause the perforation.
- Do not reuse the instrument. It may cause infection.
- Use only if the package is not damaged.
- Use only under trained medical staff.
- The Sounding Procedure shall be complete within 10 Minutes

ADVERSE REACTIONS :

- Patients should be carefully watched for evidence of unusual paleness, nausea vertigo or weakness. Any cervical manipulation may cause a vasovagal reaction. These symptoms typically subside in about 15 minutes of rest and/or a mild analgesic.
- In some cases,there may be spot bleeding or mild cramps after this procedure has been performed. The patient should be instructed to notify the physician if spotting continues or if a presistent fever develops.

DISPOSAL :

As a sterile single use instrument, an individual SMB Hysterometer / Probe
should be disposed immediately after used. Established standard practices for disposal of biohazards should be employed. This means that after used, the SMB Hysterometer / Probe should be placed in and properly –marked biohazard container, and disposed of by a properly- validated biohazard disposal firm or person.

Shelf Life : 5 years from the date of manufacturing.

MADE WITH PRIDE IN INDIA
Legal Manufacturer :
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