

Audit of Outpatient Hysteroscopy Service

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Motivation and Purpose

In the face of austerity measures, NHS service development towards cost-effective investigation and management is of paramount importance. To further develop a service a clear understanding of current service utilisation is required. This audit aimed to establish referral patterns to the service, pathway outcome, and assessment of client satisfaction. The ultimate aim of the audit was to assess feasibility to develop a business proposal for outpatient hysteroscopic sterilisation.

Methods

Retrospective case note review was carried out, on 154 women who had attended the outpatient hysteroscopy service since its inception in 2011. Data on clinic waiting times, referral indication, outcome diagnoses, procedures, and complications were collected. A prospective client satisfaction questionnaire was collected (n=54), where women were asked about their perception of the clinic team, the procedure and the level of discomfort they experienced during the procedure, using a validated visual analogue scale.

Results

Patients were seen promptly (92% within 90 days of referral) and appropriately (94% of referrals). 56% of referrals came from primary care, but a significant proportion (44%) came from colleagues in secondary care or sexual health. Referral indications included those for cavity assessment after abnormal imaging, coil problems, and persistent/ irregular bleeding. 70% of women experienced a 'one stop' clinic with no further follow-up required. Significant complications were encountered in <1% of cases.

Patient satisfaction was high. 91% stated that they would prefer to undergo outpatient rather than inpatient procedures, where possible. Average pain scores during the procedure were 5/10, falling to 3/10 post procedure. There was no evidence of a difference in pain scores comparing nulliparous and multiparous women.

Conclusions

Referral to the clinic is generally appropriate; however, this could further be enhanced by the development of a local referral proforma to ensure maximum clinic efficiency. Women would receive a further streamlined service and improved 'one stop' clinic. We have demonstrated that outpatient hysteroscopy is acceptable to women and indeed preferable in the majority of cases. The findings of this audit can be used to inform future clients, provide reassurance and allow the service to develop dynamically.