PATIENT INFORMATION

Transvaginal ultrasound of the cervix in pregnancy

The sonographer performing your obstetric scan, or your pregnancy care provider has recommended your scan should include a transvaginal ultrasound of your cervix (the lower part of your uterus/womb) which connects to your vagina. The information in this pamphlet provides you with important information about the transvaginal scan; why it is being recommended and what is involved.

Why is the sonographer recommending I have a transvaginal scan?

A transvaginal scan improves the accuracy of determining if you are at increased risk of preterm birth due to having a shortened cervix in your pregnancy. Preterm birth can potentially be a problem in your pregnancy and for your baby. Preterm birth is when birth occurs after 20 weeks and before 37 completed weeks of pregnancy. Most babies born preterm have no problems, but they may have to spend some time in a neonatal intensive care unit or occasionally they may have long term health problems. In Australia, almost 1 in 10 babies is born preterm; but in some communities this is much higher.

Transvaginal ultrasound is really good at detecting a short cervix, which is one of the most common causes of preterm birth. If a short cervix is accurately identified, then your pregnancy care provider can discuss options that may help reduce your risk for preterm birth.

The sonographer or pregnancy care provider is recommending you have a transvaginal scan for one of the following reasons:

1. You are in a high-risk group for preterm birth.
2. Your cervix looks short on your transabdominal scan (scanning through the abdomen), and should be assessed using transvaginal ultrasound for a clearer view.
3. Your cervix has been identified as short on a previous scan, and your pregnancy care provider has requested a follow-up scan.

What is a transvaginal scan?

In pregnancy, a transvaginal scan is sometimes used in conjunction with a transabdominal scan (scan made over the abdomen) to get a better and more detailed view of the lower part of your uterus, your cervix and your vagina. The transvaginal scan involves having an ultrasound probe placed inside your vagina to get very close to these structures. The ultrasound probe that is used is specially designed to fit inside the vagina.

The procedure is similar to an internal vaginal examination carried out in the clinic or GP surgery. The insertion of the ultrasound probe is similar to the insertion of the vaginal speculum used during a pap smear examination but is not as uncomfortable.

You will not experience the discomfort of a full bladder as a full bladder is not required.
What preparation is required?
There is no preparation to undergo a transvaginal scan. The sonographer (person performing your scan) will ask you to empty your bladder before the scan. Let the sonographer know if you are bleeding or have leakage of fluid as this may change the approach to your ultrasound scan.

Consent
The sonographer will ask for your consent before the transvaginal scan. They will explain the procedure to you and if you have any questions, it is important that you ask those questions before providing consent. You have the right to decline, and also to withdraw your consent during the examination. If you decline or withdraw consent, you should discuss the implications of this firstly with the sonographer, and secondly with the pregnancy care provider who referred you to the ultrasound scan.

The sonographer may suggest an alternate method of assessing your cervix using ultrasound, called a trans-perineal scan. This method appears to be as accurate as a transvaginal scan, but there is has not been so much research done looking at the accuracy of this technique. Your sonographer can talk to you about this in more detail.

You or the sonographer can ask for a chaperone during the scan for support. This can be a health worker of your gender preference. To be inclusive, the scan may be performed by a sonographer of any gender. If you have a strong preference for a female sonographer, please contact the clinic prior to your appointment so that arrangements can be made.

What will happen during the examination?
The transvaginal scan takes about 10-15 minutes and is recognised as being safe with minimal discomfort. The transvaginal probe will have been disinfected with high level disinfectant agents, and a disposable protective cover is placed over it. Gel is applied to the tip of the ultrasound probe. This has a lubricating effect and is essential to see your cervix or any other structures in your pelvis. You will be lying on your back with your hips and knees bent, with your lower torso and upper legs covered. You may have a cushion placed underneath your lower torso or the end of the bed is lowered. The sonographer will carefully insert the ultrasound probe into your vagina. If you prefer, you may insert the ultrasound probe in the vagina yourself, with guidance from the sonographer.

The transvaginal ultrasound probe has a very long handle, but only a small portion of the probe is placed within the vagina. The long handle allows the sonographer to move the probe within your vagina to get the best view of the structures that need assessing.

Are there any risks?
Ultrasound has been widely used in obstetric medicine for a long time. It is considered a safe procedure unless you have broken your waters. However, we use it prudently in case of any effects which are not yet known. It uses sound waves to produce the images and not ionising radiation (used in x-rays and CT scans).

The ultrasound used for a transvaginal scan is very similar to that used in all of your ultrasound scans in pregnancy, except the transvaginal scan will focus on the lower segment of your uterus, on your cervix and vagina, rather than on your baby.

The sonographer may use a latex cover on the ultrasound probe. If you have an allergy to latex, it is important you inform the sonographer who will then use a latex free probe cover.

What happens after the transvaginal scan?
The results of your complete scan will be sent to the pregnancy care provider who arranged the scan. The sonographer can inform you how to get your results. There should be no after-effects from the transvaginal ultrasound scan.