



GP guide to the imaging of patients with pelvic ultrasound

Ultrasound is the first-choice investigation for a range of clinical conditions:

- Endometriosis
- Pelvic inflammatory disease
- Polycystic ovarian syndrome
- Gynaecological cancer
- Fibroids

Wherever possible the GP should examine the patient before referring for a scan.

Please note that patients with an increased BMI may cause technical limitations during the examination.

Referral Guidelines

Presenting Complaint	Imaging Guidance
Palpable abdominal mass or pelvis mass	Any women with a palpable abdominal or pelvic mass should have an ultrasound scan. Transabdominal and transvaginal ultrasound is always available if necessary. MRI is the best second-line investigation and could be recommended if clinically necessary. If the scan is suggestive of cancer, an urgent specialist referral under the 14 day wait pathway will be recommended.
Suspected endometriosis or pelvic inflammatory disease	Ultrasound is a helpful examination.
Dysmenorrhoea / amenorrhoea	Ultrasound is a helpful examination.

Referral Guidelines (continued)

Presenting Complaint	Imaging Guidance
Lost intrauterine contraceptive device (IUCD)	Transvaginal ultrasound is recommended to locate device.
Symptoms of polycystic ovarian syndrome	Ultrasound is helpful investigation.
Postmenopausal bleeding	Transvaginal ultrasound is indicated to exclude significant endometrial pathology in postmenopausal bleeding. An urgent gynaecological referral is recommended for endometrial thickening > 5mm in postmenopausal women if not on HRT and > 8mm if on HRT.

How do I refer a patient?

To refer a patient for an ultrasound complete one of our referral forms available from our website (www.inhealthgroup.com).

References

iRefer. Royal College of Radiologists. 7th edition, 2012.

Right test, right time, right place; a Framework for Primary Care Access to Imaging. Royal College of Radiologists and Royal College of General Practitioners, 2006.

For further information please call **0844 581 0301**
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