

Patient information factsheet

Your referral to the gynaecology rapid access clinic

We have given you this factsheet because your GP or hospital doctor has referred you to our gynaecology rapid access clinic. It explains what the gynaecology rapid access clinic is and what to expect at your appointment. We hope this factsheet will answer some of your questions. If you have any further questions, please speak to a member of the team using the contact details at the end of the factsheet.

What is the gynaecology rapid access clinic?

The gynaecology rapid access clinic at Princess Anne Hospital is for women who have symptoms that need urgent assessment and investigation. These symptoms may include:

- · vaginal bleeding after the menopause
- · unusual bleeding when you are not expecting it
- · a lump or itching on the vulva or vagina
- · abnormal swelling or lump in the pelvis
- an area on the cervix (neck of the womb) that looks unusual

We understand that you may be concerned that being referred for urgent assessment may mean there is a suspicion that you may have cancer. The majority of patients referred to the gynaecology rapid access clinic do not have cancer but may have another non-cancerous condition that we need to treat.

Before your appointment

Our gynaecology pathway navigator (a member of staff who supports patients with appointment bookings and navigating the system) will call you to let you know that we have received your referral. They will explain what happens next, and they will give you their contact number for you to call if you have any further questions or concerns.

One of our doctors will then review your referral to see if you need an urgent appointment. We may arrange for you to have some investigations before your clinic appointment. We will explain these to you if they are needed.

There are several doctors, nurse specialists and sonographers (member of staff who specialises in performing ultrasound scans) in the rapid access clinic team. Please note that there are both male and female members of the team. If you would prefer to see a female team member, please let our gynaecology pathway navigator know as soon as possible, as we cannot always accommodate this request on the day.

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You can come to the clinic appointment alone. However, we recommend having someone with you in case you feel unwell and to give you support. This could be a relative, partner, friend or carer.

Information for carers

If you are a carer or the patient is coming from a nursing home, please contact the gynaecology pathway navigator to discuss any special requirements.

On the day of your appointment

During your appointment, the doctor or nurse will talk to you about your symptoms and which tests and investigations they would like to do. The tests and investigations you may need will depend on your symptoms. You may have several tests at one appointment so that you don't have to come in more than once.

Our clinics can be very busy and there is usually more than one clinic running in the department. We will try to let you know if the clinic is running late.

Ultrasound scan

An ultrasound scan uses sound waves to show a picture of your pelvic organs. You may need to have two different types of this scan. For a transvaginal scan, the probe is placed inside your vagina. For an abdominal scan, the probe is placed on your abdomen (tummy).

You may receive an appointment for an ultrasound scan before your clinic appointment. If this is the case, a gynaecology doctor (doctor specialising in female reproductive organs) will review the images to make sure that an appropriate clinic appointment is made for you.

Hysteroscopy

A hysteroscopy is an examination of the inside of the uterus (womb). The doctor or nurse will pass a narrow camera through the vagina, along the cervix (neck of the womb) into the uterus. They will then pass saline (salty water) through the hysteroscope to get a better view. This may make you feel wet and can cause some abdominal discomfort and cramping. This discomfort should only last a few minutes.

We may also take a biopsy (tissue sample) of the lining of your womb by passing a fine, plastic tube through the cervix.

Vulval or cervical biopsy

If you have an area of itchy or sore skin on the vulva (outside lips), we may need to take a small biopsy. We will inject local anaesthetic into the skin to numb the area. We will then remove a small piece of skin. We will send this to the laboratory so that it can be looked at under a microscope. We will use dissolvable stitches to close the skin.

If you have been referred for abnormal bleeding after sex, or if the doctor who referred you is concerned about the appearance of the cervix, you may have a cervical biopsy. This is where we remove a small piece of tissue from the cervix. We will then send this tissue to the laboratory to be looked at under a microscope.

Results

The doctor or nurse will explain how you will receive the results of these tests and investigations. We may give you another clinic appointment so that we can discuss the results with you.

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Contact us

The gynaecology pathway navigator will be able to offer help and support or refer you on to appropriate services.

Gynaecology pathway navigator

Telephone: 07787 008205 (Monday to Friday, 8.30am to 4.30pm)

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For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit www.uhs.nhs.uk/additionalsupport