What Is a Transvaginal Ultrasound?

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**Purpose**

What is a transvaginal ultrasound?

An ultrasound test uses high-frequency sound waves to create images of your internal organs. Imaging tests can identify abnormalities and help doctors diagnose conditions. A transvaginal ultrasound, also called an endovaginal ultrasound, is a type of pelvic ultrasound used by doctors to examine female reproductive organs. This includes the uterine, fallopian tubes, ovaries, cervix, and vagina.

“Transvaginal” means “through the vagina.” This is an internal examination. Unlike a regular abdominal or pelvic ultrasound, where the ultrasound wand, or transducer, rests on the outside of the pelvis, this procedure involves your doctor or a technician inserting an ultrasound probe about two or three inches into your vaginal canal.
When is a transvaginal ultrasound performed?

There are many reasons why a transvaginal ultrasound might be necessary, including:

- an abnormal pelvic or abdominal exam
- unexplained vaginal bleeding
- pelvic pain
- an ectopic pregnancy (which occurs when the fetus implants outside of the uterus, usually in the fallopian tubes)
- infertility
- checking for cysts or uterine fibroids
- checking for proper placement of an IUD

Your doctor might also recommend a transvaginal ultrasound during pregnancy to:

- monitor the heartbeat of the fetus
- look at the cervix for any changes that could lead to complications such as miscarriage or premature delivery
- examine the placenta for abnormalities
- identify the source of any abnormal bleeding
- diagnose a possible miscarriage
- confirm an early pregnancy

How should I prepare for a transvaginal ultrasound?

In most cases, a transvaginal ultrasound requires little preparation on your part. Once you’ve arrived at your doctor’s office or the hospital and you’re in the examination room, you will have to remove your clothes from the waist down and put on a gown.
Depending on your doctor’s instructions and the reasons for the ultrasound, your bladder might need to be empty or partially full. A full bladder helps lift the intestines and allows for a clearer picture of your pelvic organs. If your bladder needs to be full, you’ll have to drink about 32 ounces of water or any other liquid about one hour before the procedure begins.

If you’re on your menstrual cycle or if you’re spotting, you’ll have to remove any tampon you’re using before the ultrasound.

What happens during a transvaginal ultrasound?

When it’s time to begin the procedure, you’ll lie down on your back on the examination table and bend your knees. There may or may not be stirrups. Your doctor will cover the ultrasound wand with a condom and lubricating gel, and then insert it into your vagina. Make sure your provider is aware of any latex allergies you have so that a latex-free probe cover is used.

You might feel some pressure as your doctor inserts the transducer. This feeling is similar to the pressure felt during a pap smear when your doctor inserts the speculum into your vagina. Once the transducer is inside of you, sound waves bounce off your internal organs and transmit pictures of the inside of your pelvis onto a monitor. The technician or doctor will slowly turn the transducer while it’s still inside of your body. This provides a comprehensive picture of your organs.
Your doctor may order a saline infusion sonography (SIS). This is a special kind of transvaginal ultrasound that involves inserting sterile salt water into the uterus before the ultrasound to help identify any possible abnormalities inside the uterus. The saline solution stretches the uterus slightly, providing a more detailed picture of the inside of the uterus than a conventional ultrasound. Although a transvaginal ultrasound can be done on a pregnant woman or during an infection, SIS cannot.

**What are the risk factors with this procedure?**

There are no known risk factors associated with transvaginal ultrasound. Performing transvaginal ultrasounds on pregnant women is also safe, for both mother and fetus. This is because no radiation is used in this imaging technique.

When the transducer is inserted into your vagina, you will feel pressure and in some cases discomfort. The discomfort should be minimal and should go away once the procedure is complete. If something is extremely uncomfortable during the exam be sure to let the doctor or technician know.

**What do the results show?**

You might get your results immediately if your doctor performs the ultrasound. If a technician performs the procedure, the images are saved and then analyzed by a radiologist. The radiologist will send the results to your doctor.
A transvaginal ultrasound helps diagnose multiple conditions, including:

- **cancer** of the reproductive organs
- routine pregnancy
- **cysts**
- **fibroids**
- pelvic infection
- **ectopic pregnancy**
- **miscarriage**
- **placenta previa** (a low-lying placenta during pregnancy that may warrant medical intervention)

Talk with your doctor about your results and what type of treatment, if any, is necessary.

**Outlook**

There are virtually no risks associated with a transvaginal ultrasound, although you might experience some discomfort. The entire test takes about 30 to 60 minutes, and the results are typically ready in about 24 hours. If your doctor is unable to get a clear picture, you might be called back to repeat the test. A pelvic or abdominal ultrasound is sometimes done before a transvaginal ultrasound depending on your symptoms.

If you experience too much discomfort from a transvaginal ultrasound and can’t tolerate the procedure, your doctor may perform a transabdominal ultrasound. This involves your doctor applying gel to your stomach and then using a handheld device to view your pelvic organs. This approach is also an option for pediatric patients when pelvic images are needed.
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