

Investigating the appropriateness of transvaginal ultrasound (TVUS) referrals and findings in premenopausal women

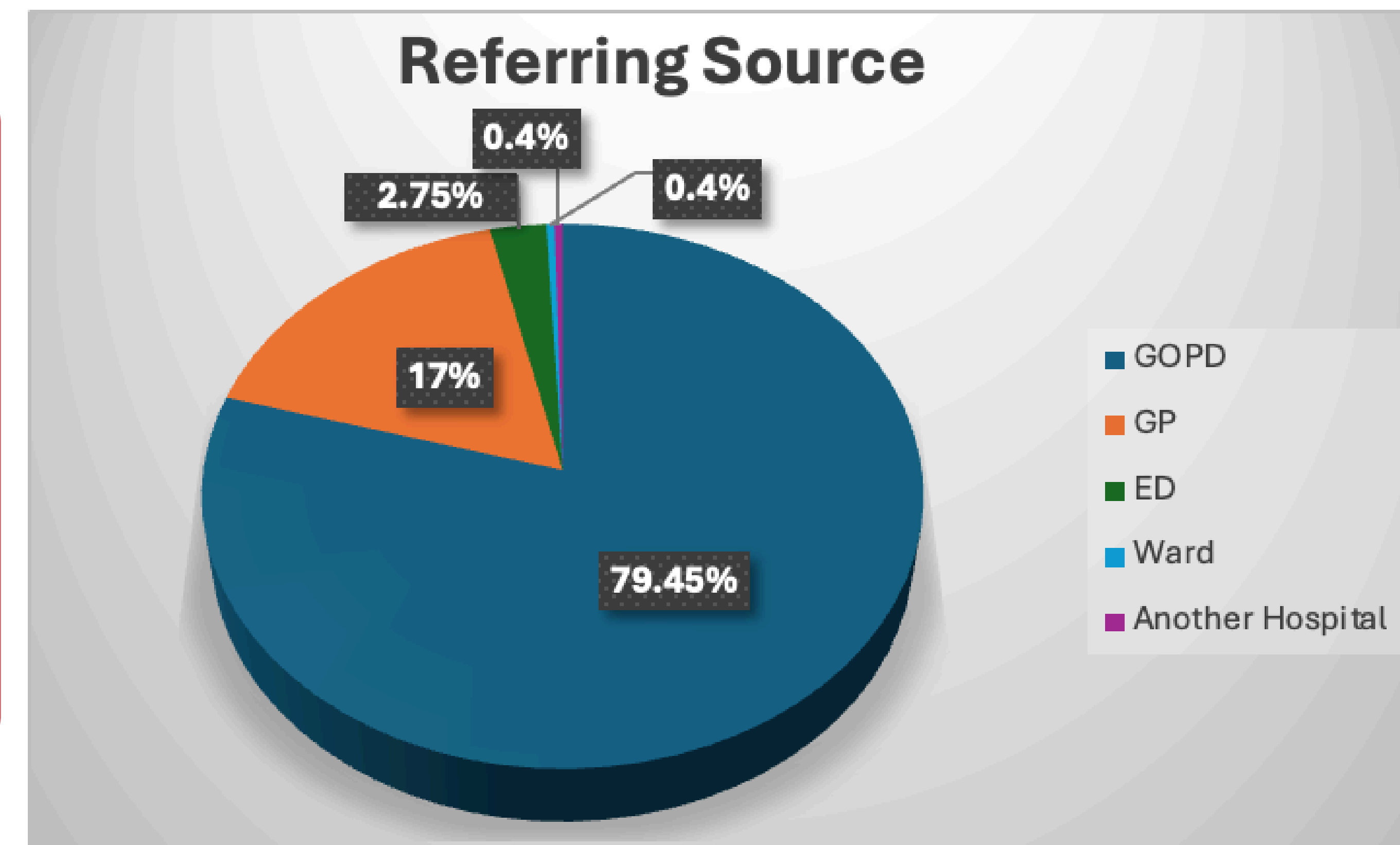
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Aims:

To evaluate the diagnostic utility of transvaginal ultrasound (TVUS) in premenopausal women with gynecological symptoms and assess the correlation between presenting complaints and findings, in order to examine referral appropriateness.

Methods:

A retrospective audit included 255 premenopausal women (age 16–57 years, mean 35.4 ± 8.7) referred for TVUS over two months (Nov–Dec 2024). Data were obtained from ultrasound reports and clinical records, including demographics, referral source, symptoms, and TVUS findings. Scans were classified as normal (no pathology) or abnormal (structural lesions), including ovarian cysts, fibroids, endometrial polyps, adenomyosis, and PCOS. Correlation between presenting symptoms and scan outcomes was analyzed.



Results:

Most referrals were from gynecology clinics (79.2%), followed by general practitioners (16.9%) and emergency departments (3.1%). Common symptoms were menorrhagia (50.6%), dysmenorrhea (19.2%), pelvic pain (16.1%), intermenstrual bleeding (9.4%), and known ovarian cysts (9.0%). Overall, 145 scans (56.9%) were normal. The most frequent abnormalities were ovarian cysts (22.7%) and fibroids (20.4%), followed by polyps/adenomyosis (2.4%) and PCOS (2%). Highest abnormal scan rates were in patients with known ovarian cysts (70%), pelvic pain (54%), menorrhagia (46%), and endometrial polyps (75%). Most other symptoms yielded normal scans.

Conclusions :

TVUS is effective for detecting structural pathology in premenopausal women, especially those with known abnormalities. 56.9% of patients had normal scans, highlighting the need for a thorough clinical assessment prior to referral. Optimizing referral practices can reduce unnecessary imaging, improve efficiency, and conserve resources. Future audits including follow-up may refine clinical pathways for symptomatic women.

