

Policy statement:	Hysteroscopy/ Dilatation and Curettage (D&C)
Status:	Group Prior Approval

M&SECCGs commissions Dilatation and Curettage/Hysteroscopy on a restricted basis.

M&SECCGS only funds D&C and hysteroscopy when used in line with NICE guidance (NG88)

Hysteroscopy will only be funded for the investigation and management of heavy menstrual bleeding when it is carried out:

- as an investigation for structural and histological abnormalities where suspected submucosal fibroids, polyps or endometrial pathology
OR
- immediately prior to the ablative procedure to ensure correct placement of the device where endometrial ablation is required.

The CCGs will not fund D&C:

- as a diagnostic tool for heavy menstrual bleeding; or
- as a therapeutic treatment for heavy menstrual bleeding.

Postmenopausal women who have had a pelvic scan and endometrial biopsy and who present with further bleeding 6 months later should be offered hysteroscopy to be sure no small cancer has been missed without a mandatory preliminary scan.

Hysteroscopy for the majority of women should be performed as an outpatient procedure.

Funding for patients not meeting the above criteria will only be made available in clinically exceptional circumstances.

Individual funding requests should only be made where the patient demonstrates clinical exceptionality.

Further information on applying for funding in exceptional clinical circumstances can be found on the CCGs' website.

References:

Heavy menstrual bleeding: assessment and management
NICE guideline [NG88] Published date: March 2018
<https://www.nice.org.uk/guidance/ng88/resources>