POLICY ON PRODUCING PATIENT INFORMATION

(To be read in association with Brand Book: Getting It Right – an overview of the corporate identity guidelines)

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<th>Version:</th>
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<tr>
<td>Ratified by (name of Committee):</td>
<td>Quality and Safety Committee</td>
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<tr>
<td>Date ratified:</td>
<td>November 2009</td>
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<tr>
<td>Lead Executive/Director:</td>
<td>Simon Trickett</td>
</tr>
<tr>
<td>Name of originator/author:</td>
<td>Rebecca Bourne</td>
</tr>
<tr>
<td>Target audience:</td>
<td>All NHS Worcestershire and PCT staff</td>
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## CONTRIBUTION LIST

### Key individuals involved in developing the document

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
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<tbody>
<tr>
<td>Rebecca Bourne</td>
<td>Communications Manager</td>
</tr>
<tr>
<td>Tom Grove</td>
<td>Communications Officer</td>
</tr>
<tr>
<td>Lisa Gardner</td>
<td>Design and Multimedia Officer</td>
</tr>
<tr>
<td>Jo-Ann Harris</td>
<td>Communications Support</td>
</tr>
<tr>
<td>Simon Trickett</td>
<td>Head of Communications and Community Engagement</td>
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### Circulated to the following individuals for comments

<table>
<thead>
<tr>
<th>Name</th>
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<tr>
<td>Della Lewis</td>
<td>Clinical Governance Manager</td>
</tr>
<tr>
<td>Lisa Levy</td>
<td>AD</td>
</tr>
<tr>
<td>Marie McCurry</td>
<td>AD</td>
</tr>
<tr>
<td>Sue Warner</td>
<td>AD</td>
</tr>
<tr>
<td>Vicky Preece</td>
<td>AD</td>
</tr>
<tr>
<td>Teresa French</td>
<td>Director of Provider Services</td>
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<tr>
<td>Jane Pugh</td>
<td>Deputy Director Provider Services</td>
</tr>
<tr>
<td>Andy Mills</td>
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<tr>
<td>Dr Sumit Bhaduri</td>
<td>Joint medical director</td>
</tr>
<tr>
<td>Lesley Way</td>
<td>Patient Safety Manager</td>
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<tr>
<td>Mick Mather</td>
<td></td>
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<tr>
<td>Mark Dutton</td>
<td>Interim Director of Finance</td>
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1. Introduction

Information is an important element of the patient pathway and central to the overall quality of each patient's experience of the NHS. Improving information for patients was a commitment in the NHS Plan (July 2000, chapter 10) and part of the recommendations in the Kennedy Report into the Bristol Royal Infirmary (July 2001, section 2, chapter 23).

2. Why is this policy needed?

- This policy should ensure all patient information produced by staff is of a consistent high standard and easy to understand by patients.
- Our identity and how we present ourselves is important. It affects how people think and feel about our organisation and about the NHS in Worcestershire. Across all media and materials our communications need to be consistent with our core values. Quality information is critical to our long term sustainability and success. By using the NHS Worcestershire and Worcestershire PCT identity correctly on your patient information materials, you can help to reassure people that services are part of the NHS family and that these services are being delivered in line with our values.
- The PCT needs reassurance that patient information has been produced via an approved process, can produce evidence that it is accepted by its target audience, and there is a record of what information is available to patients.

3. Aims of the policy
This policy should:

- Raise the standard of written information for patients, their carers and people who use PCT services to make sure that the material we produce is clear, concise, relevant, accurate and in everyday language, and meets NHS standards
- Raise the confidence in PCT information for patients, their carers and people who use NHS services as good information allows patients to make choices about their care
- Make it easier for staff to produce information that takes account of the NHS Worcestershire and Worcestershire PCT branding guidelines and principles of best practice
- Make sure information for patients supports the organisation’s vision and values, and communication principles.

4. **Who is this policy for?**

   This policy is for any member of NHS Worcestershire or Worcestershire PCT staff who wishes to produce written information for staff, patients, their carers and the public.

5. **What information are we talking about?**

   This policy deals with written information about conditions, treatments, procedures, examinations, surgery, events, notifications and services. This can be in the form of leaflets, booklets, single sheets or posters. The policy contains practical steps on writing information for different situations - not ‘what to write’. There is also a separate staff guide on producing information for the Intranet/Internet.

6. **Why is good patient information important?**

   Good patient information can:

   - give patients confidence so their overall experience as a patient is improved;
   - remind patients what their doctor or nurse told them if, due to stress or unfamiliar language, they forget what they were told;
   - allow people to make informed decisions - it gives people time to go away, read the information and think about the issues involved;
   - help to make sure patients arrive on time and are properly prepared for procedures or operations; and
   - involve patients and their carers in their treatment and condition (research has shown that it can improve the medical outcomes\(^1\) and reduce patient anxiety\(^2\) and that patients want it\(^3\).  

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\(^1\) Audit Commission. *What seems to be the matter: Communication between Hospital and Patients.* London. HMSO, 1993


7. Who is the information for and do you need to produce it?

Written information is not always the best form of communication for some people. Not everyone can see, read or understand written information. See Appendix 1 for suggestions on other forms of communication for different patient groups.

Before you start producing information, check what other relevant material already exists. Rather than developing your own material it may be possible to use existing publications, such as those produced by charities or other appropriate organisations.

Written information for patients needs to support our vision and values to bring quality and equality to our services.

8. Our vision and values

NHS Worcestershire’s vision is of a county where people live longer and live better, have the support they need to adopt healthy lifestyles and have a choice of high quality services which are delivered as close to home as possible.

We have adopted a set of core values to reflect the results of the work with local stakeholders, and to uphold the national values of the NHS. The PCT set up a programme of consultation with our staff that resulted in the following core values being adopted:

**Everyone counts**
Services which are based on needs assessments and arranged for the benefit of the whole community

**Commitment to Quality**
An organisation that is patient-focused and insists on high quality care and services

**Improving Lives**
Valuing excellence and professionalism in the everyday things that will improve the health and well-being of the people of Worcestershire

**Working Together**
An environment where organisational boundaries and roles do not stand in the way of what is best for local communities

**Respect**
Valuing people as individuals and respecting their dignity

Worcestershire PCT Provider Services’ vision is to be recognised as a leading provider and employer for healthcare services.
9. PCT identity principles

Communication with patients, carers and the public must be:

- clear – in Plain English and avoiding jargon so the information can be easily understood
- cost-effective - we have fast colour printers now
- straightforward - using fewer words and keeping to the necessary information
- modern - using everyday language and current images
- accessible - available to as many people as possible, in the right format, avoiding jargon
- up to date and given to the patient at the appropriate time;
- honest - information should be based on current evidence; and
- respectful - sensitive to cultural needs and all people, avoiding stereotypes.

10. General guidance on writing information for patients

Information will vary depending on who it is for and what it is about. This is a general guide for all written information. Appendix 1 contains more detailed guidance for specific types of information.

When writing information for patients, always write from the patient's point of view and put yourself in the place of someone who may have little knowledge of what you are talking about. The exception to this is the 'expert patient' who has a long-term medical condition.

11. What you need to include

- All patient information must include the following:
  - Correct NHS Worcestershire or Worcestershire PCT logo
  - Website address: [www.worcestershire.nhs.uk](http://www.worcestershire.nhs.uk)
  - Date of publication and review date
  - Reference Number (recorded in the Patient Information Register Database and allocated by the Communications department)
  - Information on how to access the information in other languages or formats (sentence in English as a minimum) (appendix 4)
12. Checklist for producing information for patients

<table>
<thead>
<tr>
<th>Plan</th>
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<tbody>
<tr>
<td>□ Identify need for patient information – check that there are no existing products produced nationally that contain relevant and current information</td>
</tr>
<tr>
<td>□ Discuss with the Design and Multimedia officer what products could be produced to target the intended audience most effectively.</td>
</tr>
<tr>
<td>□ Discuss with service lead/line manager: How many leaflets will you need/ how will they be distributed/ is there a budget for printing? <strong>NOTE:</strong> As a general rule, for small quantities it is usually cheaper to use the colour printer rather than arrange printing from a commercial company but can vary from job to job. – <strong>If you would like advice on the best method of printing please speak to the Design and Multimedia Officer.</strong> Photocopying should be avoided if possible as the quality deteriorates and it does not always send out the appropriate message to patients about the type of service on offer.</td>
</tr>
<tr>
<td>□ Contact other people/patients who should be involved in producing the information</td>
</tr>
<tr>
<td>□ Identify lead person to co-ordinate production</td>
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<table>
<thead>
<tr>
<th>Write</th>
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<tbody>
<tr>
<td>□ Consult this guide and others resources during the writing stages</td>
</tr>
<tr>
<td>□ Produce first draft of content in a Word document format</td>
</tr>
<tr>
<td>□ Pilot the wording with clinicians, interested parties and users</td>
</tr>
<tr>
<td>□ Produce final draft of content in a Word document format</td>
</tr>
<tr>
<td>□ Present to service lead/line manager for approval</td>
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<table>
<thead>
<tr>
<th>Design in line with corporate branding guidelines</th>
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<tbody>
<tr>
<td>□ Once content is approved, fill in a <strong>Patient Information Submission Form</strong> (Appendix 2) and send this, along with your leaflet content, to the Design and Multimedia Officer who will design a leaflet for you in line with the corporate branding guidelines, before sending it back to you in PDF format for approval and production. <strong>Please note: all patient information relating to clinical practice will also be sent to the Clinical Policy Group for approval.</strong></td>
</tr>
<tr>
<td>□ Alternatively, use one of the pre-produced leaflet templates available on the staff intranet at <a href="http://nww.worcestershire.nhs.uk/WorcsIntranet/default.aspx?pid=421">http://nww.worcestershire.nhs.uk/WorcsIntranet/default.aspx?pid=421</a> to produce your own leaflet before sending to the Design and Multimedia Officer along with the Patient Information Submission Form for sign off.</td>
</tr>
<tr>
<td>□ The leaflet will be given a unique reference number and dated, and a copy will be kept on file in the Communications Department. The review date for the leaflet is two years after it is produced and the Communications Team will contact you shortly before this time to arrange for the leaflet to be updated if necessary. If any changes are needed before then, contact the Design and Multimedia Officer.</td>
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</tbody>
</table>
12.1. General points to remember:

- **Use everyday language.** Avoid jargon and acronyms, and use plain language to make it easier to read. As many as seven million people (roughly one in five adults) in England have difficulties with basic literacy and numeracy, but that does not mean you have to be patronising or use childish language.

- **Use patient-friendly text.** Use personal pronouns such as 'we' and 'you'. Do not use frightening language, for example, 'electrodes will be put on your chest'. If it is difficult to avoid using some medical terminology, such as 'nuclear medicine', give an explanation.

- **Be relevant to individual patients**

- **Information should be in context** with other information given to patients, for example, letters, leaflets and appointments.

- **Consider** what you are trying to achieve – is it awareness raising or is it education?

- **Reinforce** the information that patients have been told at the clinic.

- **Avoid instructions.** For example, do not just say 'do not eat anything for six hours before an operation' - explain why.

- **Be helpful.** Help people make decisions by giving them facts about the risks, side effects and benefits.

- **Do not confuse** people by covering several treatments and conditions in the same leaflet.

- **Tell people what other information, resources and support are available**

- **Be up to date.** Give the most recent practice and latest phone numbers.

- **Let people know if the information is available in other formats** for example, on audiotape. Include a website address, where possible.

- **To make text more inviting to read, use the following:**
  - Short sentences - in general no more than 15 to 20 words long.
  - Lower-case letters, where possible, as they are easier to read. Exceptions to this are proper names and the first letter in a sentence.
  - Present and active tenses, where possible, for example, 'your appointment is on...' not 'your appointment has been made for...'.
  - A question and answer format is helpful to divide up text.
  - Bulleted or numbered points to divide up complicated information.
  - Small blocks of text. Do not use long paragraphs - divide them up using headings and new paragraphs.
  - White space makes the information easier to read.
  - Large bold font emphasises text. Avoid UPPER CASE letters, *italics* and underlining as they make the text more difficult to read. See Resource list below for ‘making text legible’.
  - Numbers from one to nine are easier to read if they are written in words, and numbers from 10 can be represented as numbers.
  - Font Use a medium-weight, sans serif typeface such as Arial or Frutiger.
  - Font size of between 12 point (minimum) and 14 point. However, if you are providing information for elderly people or people with sight difficulties, you
should always use 14 point or larger.

- **Colours** can make a leaflet of poster more visually appealing but bear in mind the needs of those with visual impairment. There is an approved palette of NHS Colours which the Design and Multimedia Officer can advise on. See NHS Worcestershire’s ‘Brand Book: Getting It Right’ for more information.

- **Diagrams and pictures** are very effective and should be in line with communication principles. Where appropriate, use them to illustrate the text, remember to label them and do not print over them. **You should not use clip art** as it does not add to the reputation of a professional organisation.

- **Photos.** The Communications Manager has a digital camera for use by PCT staff and can arrange for specific photographs to be taken. Remember written consent is required for patients and staff before photographs are taken. Commercial photography or images from websites may be subject to royalty fees and copyright license. The NHS photo library contains an approved online bank of searchable royalty-free images for NHS use only (see Resources below). The Design and Multimedia Officer has ways of sourcing photographs and pictures should you need something specific.

- **Justify** the text to the left only.

- **Leave space between the paragraphs** and do not have too much text on the page.

### 12.2. Protocol for approving patient information produced by the PCT

- It is important that all patient information produced by the PCT meets the guidance in this policy. Patient information produced and approved by the PCT will be recorded in a Patient Information Database, held by the Communications Department for at least six years after the leaflet has been superseded.

- Information from the Patient Information Submission Form will be used to populate the database.

- Following consultation with the department producing the information, the Design and Multimedia will have the final say on the layout of the leaflet, using his/her professional expertise.

- **Consistent features.** All patient information will include the following:
  
  - NHS Worcestershire or Worcestershire PCT logo
  - Website address: [www.worcestershire.nhs.uk](http://www.worcestershire.nhs.uk)
  - Date of publication and review date
  - Reference Number (recorded in the Patient Information Register Database and allocated by the Communications department)
  - Information on how to access the information in other languages or formats

### 13. Assurance

To ensure that this policy is being complied with, every 12 months a member of the Communications Team will ask at random a selection of staff to send in examples of current departmental patient information to check against the policy requirements. Those departments whose information does not comply with the
policy will be asked to re-do the information in line with corporate branding guidelines.

14. Resources

Links:

- **NHS Worcestershire brand guidelines**
- **Plain English Campaign** Independent pressure group working for public information to be written in plain English. Visit their website at [http://www.plainenglish.co.uk/](http://www.plainenglish.co.uk/) for free guides to writing in plain English including a guide about medical information.
- **Making Text Legible** Resource for print legibility and those with visual impairment. [http://www.lighthouse.org/print_leg.htm](http://www.lighthouse.org/print_leg.htm)
- **NHS Photo Library** Royalty Free images for NHS use only. [http://www.photolibrary.nhs.uk](http://www.photolibrary.nhs.uk)
- **NHS Identity Guidelines** Link to the original resource on which these guidelines are based. [http://www.nhsidentity.nhs.uk/](http://www.nhsidentity.nhs.uk/) Within this resource is the direct link to
- **Patient Information Toolkit**

15. Review

This policy will be reviewed as required.

Rebecca Bourne
Communications Manager
September 2009
APPENDIX 1 – Writing information for specific situations

Writing information for specific situations

This section provides practical advice on writing information for different situations.

The following checklists give a list of subheadings that you should consider when putting a leaflet or booklet together.

These are not a complete checklist and some things may not be appropriate for certain information leaflets. However, it will probably be relevant in most cases.

1  Checklist for information about conditions and treatments

☐ What is the leaflet about, and who is it for?
☐ What condition is being described?
☐ What causes it? Or, if the cause is not known, say so.
☐ Does anything increase the risk, for example, age, sex, ethnic origin or a family history of the condition?
☐ What are the signs and symptoms?
☐ Are there any tests or examinations needed to confirm the diagnosis?
☐ What treatments are available? Give brief descriptions.
☐ What are the side effects and the risks of getting treatment or not getting treatment?
☐ What are the next steps?
☐ What can patients do for themselves?
☐ Are there other implications, for example, infecting other people?
☐ Who can they contact if they have any more questions?
☐ Say where the patient can find more information, for example, support groups and websites.

2  Checklist for writing information about services, for example, cardiac rehabilitation classes or a GP skin clinic

☐ Describe the service.
☐ Start at the beginning where the patient would start, for example, a leaflet about transport might start with how to book it, with a phone number.
☐ Who is eligible?
☐ Details of how to access the service.
☐ Is equipment or special clothing needed?
☐ Where to go for it.
☐ How to find it.
☐ Are maps needed?
☐ When is a service available?
☐ Is there a waiting time?
☐ How often do they need to attend?
☐ Do they need to bring any documents
3 Checklist for writing information about medication for patients

☐ Who to contact if they cannot attend.
☐ What is or is not available, for example, transport.
☐ Are interpreters needed?
☐ Are any costs involved?
☐ Are there any advantages or disadvantages that need to be explained? Who to contact (phone number) and when, for example, from 9am to 5pm Monday to Friday.
☐ Phone number, address and website of the PCT.

3 Checklist for writing information about medication for patients

☐ Explain that any information that is given in a leaflet should be read with any patient information leaflet provided by the manufacturer.
☐ What medication are you describing and what is it for?
☐ How is it given?
☐ How often should it be given?
☐ What should be avoided or added when taking a particular medication, for example, certain foods.
☐ What are the side effects? Make sure that you mention that everyone is different so may react differently to medication.
☐ What to do if medication is not given properly.
☐ Remind patients to tell the clinician who prescribes the medication about any other medication they are taking.
☐ Advice on storing medication out of the reach and sight of children, in the fridge and out of the sunlight.
☐ Advice on where to get repeat prescriptions.
☐ A contact number (of the pharmacy, specialist nurse, doctor or NHS Direct) for more information and to check on any concerns about side effects.

4 Checklist for writing information about operations, treatments and investigations

☐ What is the leaflet about and who is it for?
☐ What is the procedure?
☐ Why are they having it? Give the benefits and alternatives where appropriate.
☐ What preparation do they need or not need?
☐ Do they need sedation or local anesthetic?
☐ What happens when they arrive at the clinic, and who will they meet?
☐ Will they be asked to sign a consent form or is verbal consent needed?
☐ What does the procedure involve? How long does it last? What does it feel like?
☐ What happens after the procedure - pain control, nursing checks, stitches.
☐ Do they need someone with them or any special equipment when they go home?
☐ What care do they need at home?
☐ What follow-up care is needed? Do they need to visit their doctor?
☐ What can go wrong, what signs to look out for and what to do if something goes wrong.
☐ When can they start their normal activities again, for example, driving, sport, sex or work?
☐ Who can they contact if they have any more questions?
☐ Tell people where they can find more information, for example, support groups and websites.
Advice for writing information for different patient groups

This section gives some general advice on writing information for different patient groups. Bearing in mind that all patients should have equal access to services (Disability Discrimination Act 1999), information may need to be presented differently in different formats.

Patients who are elderly
Use clear large print, at least 14 point or larger. Do not use patronising language.

Patients who are not 'ill'
It may be more appropriate to address patients who do not see themselves as 'ill' as clients or service users, for example, pregnant women or people using social services.

Patients who are children
Address children as individuals, use plenty of illustrations, try to adjust your language to the age and do not talk down to them. Avoid clip art.

Patients with learning difficulties
The text needs to be simplified a little, using more symbols and pictures. Use audiotapes and videos. Consult support groups and individuals.

Patients with hearing difficulties
Use written information. Use carers, text phones or British Sign Language interpreters.

Patients with sight difficulties
Use large bold print, at least 14 point or larger. Use audiotapes, electronic text, the Internet or Braille. Do not use a lot of reversed-out text and make sure the contrast between text colour and background colour is easy to read.

Patients whose first language is not English
Use translated text from a guaranteed source where appropriate. Certain languages are often spoken and not read so it is important to check this. Where appropriate, use other media (audiotapes, videos and interpreters).

Patients who have reading problems
Use audiotapes and videos.

Expert patients
Patients who have long-term medical conditions, such as diabetes or eczema, will usually have a very good understanding of their condition. The information for these patients may need to be specially researched by experts or they may need guidance on where to find the latest reliable information.
### Examples of plain English

<table>
<thead>
<tr>
<th>Not plain English</th>
<th>Plain English</th>
</tr>
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<tbody>
<tr>
<td>amend</td>
<td>change</td>
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<tr>
<td>commence</td>
<td>start or begin</td>
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<tr>
<td>comply</td>
<td>meet or follow</td>
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<tr>
<td>conduct</td>
<td>carry out</td>
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<tr>
<td>consequently</td>
<td>leading to or following on</td>
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<tr>
<td>financing</td>
<td>paying</td>
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<tr>
<td>funding</td>
<td>paying for</td>
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<tr>
<td>legislative or legislation</td>
<td>law making or law</td>
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<tr>
<td>mandatory</td>
<td>required or necessary</td>
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<tr>
<td>participants</td>
<td>members, users or those taking part</td>
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<tr>
<td>specified</td>
<td>given, particular or detailed</td>
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<tr>
<td>subsequently</td>
<td>afterwards or next</td>
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<tr>
<td>utilise</td>
<td>use</td>
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### APPENDIX 2 – Patient information submission form

**Patient Information: Submission Form**

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<tr>
<th>LEAFLET TITLE</th>
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<tbody>
<tr>
<td>DEPARTMENT</td>
<td></td>
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<tr>
<td>LOCATION</td>
<td></td>
</tr>
</tbody>
</table>
| FORMAT* | Bifold Leaflet (1 column)  
Bifold Leaflet (2 columns)  
Trifold Leaflet  
A4 Flyer |
| LOGO NHSW or WPCT | □ Worcestershire  
□ |  
Worcestershire Primary Care Trust |
| CONTACT NAME |  |
| JOB TITLE |  |
| BASE |  |
| TEL | internal  
external |
| EMAIL |  |

* please delete as appropriate
APPENDIX 3 – Leaflet templates

If you would like to have a go at designing your own patient information leaflet, examples of the two types of template available for you to use follow. These templates are available in a choice of three colours – NHS blue, red or green. They are available to download – along with guidelines on how to complete them – on the staff intranet at http://nww.worcestershire.nhs.uk/WorcsIntranet/default.aspx?pid=421

Please send completed leaflets to the Design and Multimedia Officer for approval before printing.

Alternatively, please contact the Design and Multimedia Officer who will create your patient information for you in line with our branding guidelines.

BIFOLD

Worcestershire NHS

Back pain – what you can do to help your back

Your back and spinal is one of the strongest parts of your body, and there is probably by no serious damage to your back if you are careful.

Research has shown that walking for more than a day or so does not help and may actually cause pain and disability. You may need to try your own exercises that suit you best. Here are some ideas to get you started:

1. Eat healthy foods that can help.
2. A physiotherapist will be able to advise you about appropriate exercises to help you.
3. Manage your pain and continue with your daily routine.

Your back and spinal is one of the strongest parts of your body, and there is probably no serious damage to your back if you are careful.

Please discuss your expectations of physiotherapy with your physiotherapist.

Notes:

- Do not stretch. Sit close to the back of the chair, supported with a rolled-up towel placed in the lower portion of your lower back and with your feet firmly on the floor.
- Remember to get up and move frequent change of position will help prevent back pain.
- Changing your position and mobility throughout the day will help to prevent stiffness and pain. Try to build up your general activity gradually.

Inside pages
What are the advantages of PES over D&C?

1. TRIFOLD

The procedure is aimed at an initial investigation and may also replace a medically prescribed procedure called Dilation and Curettage (D&C).

2. Front and back

If it can be performed during an outpatient visit, there is no need for the patient to be admitted and no need for a general anaesthetic.

3. Internal pages

The risk of endometrial cancer in women with uncontrolled bleeding or who have not reached menopause is around 1%. Negative results can be reassuring and provides the need for further investigations.

What are the disadvantages and risks of PES?

1. TRIFOLD

Some women experience pain or cramps following the procedure. You may find that being some form of painkillers (paracetamol or ibuprofen) can help reduce discomfort. There may be a small risk of infection, which usually clears up without treatment. For some women, the procedure can cause further abnormal bleeding.

2. Front and back

There is a very small chance of infection or perforation with this procedure. Please speak to your doctor if you are concerned about this.

3. Internal pages

There are some contraindications that the procedure may not be tolerated, for example, pregnancy and fibroids. Further tests may be needed.

If you have any concerns after the test, call the clinic where the test was done or call your doctor. We will let you know if you need to be seen again.

If you would like this information in other formats, please call 01905 760070 or email pelvic.endo@wch.nhs.uk.

TRIFOLD

What is Pipelle Endometrial Sampling (PES)?

Pipelle Endometrial Sampling (PES), which is also called Pipelle Endometrial Biopsy, is a safe and minimally invasive method of obtaining a sample of the lining of the uterus to examine for endometrial disease. The procedure is usually carried out on an outpatient basis.

Why is it necessary to perform Pipelle Endometrial Sampling?

It is necessary to perform Pipelle Endometrial Sampling when there is an abnormality detected in the endometrial lining. It may also be performed as part of other investigations, such as a pregnancy test, to assess the health of the endometrium. The procedure is performed using a thin, flexible tube that is inserted into the cervix and inserted into the uterus. The sample is then collected and sent for analysis.

When would a sample from the endometrium need to be taken?

There are a number of reasons why a sample from the endometrium might need to be taken. These reasons include:

- Assessing the endometrium in women with abnormal bleeding who have not reached menopause.
- Assessing the endometrium in women with abnormal bleeding who have reached menopause.
- Assessing the endometrium in women with abnormal bleeding due to anovulation, polycystic ovary syndrome (PCOS), or other causes.
- Assessing the endometrium in women with a history of endometrial or breast cancer.
- Assessing the endometrium in women with a history of endometrial or breast cancer.

What does the procedure involve?

Initially, the doctor will perform an examination of the uterus to determine its size, shape, and position. They may also check for any signs of abnormal bleeding, such as cramping or spotting. The Pipelle will then be inserted into the cervix and advanced into the uterus. The sample will then be collected and sent for analysis. If you are having the procedure to help assess endometrial cancer, the sample will be sent to the laboratory for further testing.
APPENDIX 4 – Other languages

**English**

‘If you would like this information in other languages or formats (ie, large print), please contact the Communications Team on 01905 760020 or email communications@worcestershire.nhs.uk’

**Bengali**

“আপনি যদি অন্য ভাষায় বা রূপে (বড় কোর্সের হরফে) এই তথ্য প্রাপ্ত চান তাহলে অনুরোধ করি কমিউনিকেশন্স টিম এর সাথে 01905 760020 নম্বর দিয়ে যোগাযোগ করা বা communications@worcestershire.nhs.uk এ ইমেইল করা”

**Cantonese**

如果您希望獲取本資訊的其他語言版本或格式（即大印刷字體），請透過電話01905760020或電郵communications@worcestershire.nhs.uk聯絡通訊小組。

**Polish**

Jeżeli chcieliby Państwo uzyskać te informacje w innym języku lub formacie (np. wydrukowane dużą czcionką), prosimy o kontakt z Zespołem ds. Komunikacji pod numerem 01905 760020 lub adresem poczty elektronicznej communications@worcestershire.nhs.uk
Portuguese
‘Caso deseje receber esta informação em outros idiomas ou formatos (ie, impressão em grande escala), queira contactar a Communications Team através do número 01905 760020 ou via e-mail para communications@worcestershire.nhs.uk’

Punjabi
‘मैं इस विषय में सहयोग के लिए निम्नलिखित (भुवन वि, मेंटी ड्रिस्क) जरूरी है, उनलों के स्थलों पर वायरलिङ्ग लेट्स टीम है 01905 760020 उन स्थल बढ़े से communications@worcestershire.nhs.uk उर दीनें चढ़े’

Turkish
‘Bu bilgileri başka dillerde veya (büyük basım gibi) değişik biçimlerde almak isterseniz, lütfen 01905 760020 no’lu telefon dan iletişim Eki ile irtibat kurunuz veya communications@worcestershire.nhs.uk adrese e-posta gönderiniz.’

Urdu
اکڑا بے معلومات دیکر دیانوم یا فارمیک (يعنی بازی پرنٹ) میں چاہئے بین توالی کرے
01905 760020 پر کمیونیکیشن سے رابطہ کریں یا میل کریں: communications@worcestershire.nhs.uk