

Cystoscopy

Gynaecology

Introduction

This leaflet has been designed for ladies undergoing cystoscopy to give them a better understanding of the procedure and the associated risks and benefits. Please do not hesitate to speak to your nursing or medical team should you have any questions.

What is a Cystoscopy?

Cystoscopy involves an examination of the inside of the bladder. A telescopic instrument is passed through the water pipe (urethra). This procedure may be carried out under a general anaesthetic (where you are asleep) or under a local anaesthetic (where you are awake) depending on the reason for the examination and patient choice. In some circumstances, it may be helpful to take a small piece of the lining of the bladder for examination (a biopsy). This would be discussed before the procedure is carried out.

Consent

The choice about which treatment is best for you will be made together with your doctor. This will be based on the risks and benefits of the treatment and your individual circumstances.

We must seek your consent for any procedure or treatment beforehand. Your doctor will explain the risks, benefits and alternatives where relevant before they ask for your consent. If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to ask for more information.

What are the benefits?

To examine the lining and muscles of the bladder and to investigate blood in the urine, recurrent infections, urgency and frequency of passing urine. In some cases, to diagnose and treat 'the painful bladder syndrome' by gently stretching the bladder and, most importantly, to rule out cancerous changes. A cystoscopy may be carried out after some surgical procedures to confirm that the bladder is undamaged.

What are the risks?

The more common risks of the procedure are infection or causing temporary bleeding. Patients are, therefore, advised to drink plenty of fluids to 'wash out' the bladder after the procedure. Extremely rarely, perforation (small hole or tear) of the bladder can occur which would require an abdominal operation to treat. Patients may be unable to empty their bladder (difficult to pee).

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.

Are there any alternatives?

Ultrasound examination of the kidneys and the bladder may be another method of investigation, as may special X-rays of the kidneys (intra-venous urography), or urodynamic tests (bladder test).

The major consequence of declining the procedure would be missing cancerous changes in the bladder, however they are uncommon. The reasons and potential benefits of carrying out the examination should be clarified with the doctor who suggested you have this procedure.

What should I expect before the procedure?

Before admission for surgery, you will be asked to attend a pre-admission clinic to ensure that you are fit and well for your surgery. A nurse practitioner or a doctor will ask about your general health, past medical history and any medication that you are taking. Any necessary investigations will be organised, such as blood tests, ECG (heart trace) and chest X-rays.

You will receive information about your admission, hospital stay, operation and pre and post-operative care. You will also be given the opportunity to ask any further questions that you may have. If you smoke, stop completely, this will make your anaesthetic safer, reduce the risk of complications after operation and speed up your recovery time. If you are unable to stop completely, even doing so for few days will be helpful.

Some medicines need to be stopped or altered before the operation. You should check with your GP and bring your list of medications with you when you come to the pre-admission clinic.

What happens on the day of my procedure?

On the day of your operation you will not be able to eat or drink for a specified time prior to your surgery. You will be informed of the times at your pre-operative assessment and in your admission letter.

A doctor will see you prior to your procedure and confirmation of your written consent will be required before your operation can take place. The original consent should have been taken at your outpatient appointment. You will also have the opportunity to ask any questions not covered during your pre-admission clinic appointment.

It is important to have a bath or shower on the day of your procedure before you come in to the hospital. Please ensure that any nail polish or false nails are removed from fingers and toes. Also, after your shower or bath do not apply any body cream, make-up or deodorant to your skin. All jewellery must be removed other than a wedding ring. This can be left on and taped over prior to your surgery.

You will be asked to put on a theatre gown and you may need a pair of elasticated stockings (TEDS). The stockings help to prevent clots (thrombosis) in your legs. You will need to keep these on all the time you are in hospital and you will be advised how long you will need to continue to wear them once you are discharged from hospital.

You will be escorted to theatre by a member of our team. If a premed (medication which may make you feel drowsy) has been given, a theatre trolley will be arranged to collect you from the ward, otherwise, you will walk to theatre. You will be taken into the anaesthetic room where you will be given a general anaesthetic. This is started by an injection into your vein (usually in the back of your hand). Once you are "asleep" you will be escorted into theatre.

You will wake up in the recovery area once your operation is finished, a team member will then escort you back to your bed on the ward.

What will happen after the procedure?

A nurse will escort you back to the ward. You will be able to eat and drink as soon as you feel ready. You are advised to increase the amount you drink for approximately 48 hours after your operation to help reduce the risk of urine infection. You are usually allowed home the same day as long as you have passed urine.

You may experience some stinging or a burning sensation when you pass urine for the first few times after the operation. This is normal. However, if it persists, becomes painful or if your temperature rises you are advised to contact your GP.

What will happen on discharge?

It is advisable that you are escorted home by car or taxi and that a responsible adult stays with you overnight.

For 24 hours after a general anaesthetic, you are recommended to avoid:

- Driving
- Riding a bicycle
- Operating machinery
- Smoking or drinking alcohol
- Signing any legally binding documents.

A discharge letter will be sent to your GP and you will be given a copy of this to keep for your reference.

Will I need any follow-up?

If you require an outpatient appointment, it will be given to you on discharge or will be posted to you if out of office hours.

When will I be able to return to work?

You should be able to return to work within 2 days or when you are feeling well enough to return.

If at home you are worried about anything regarding your operation, please contact your GP or the ward to which you were admitted.

More information can be found at www.nhs.uk/conditions/cystoscopy.

If you have any concerns, please contact:-

The Gynaecology Ward:

01902 694034 - 24 hours a day

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。