Patient information leaflet

Flexible cystoscopy

What is a flexible cystoscopy?

A flexible cystoscope is a thin flexible, fibre-optic telescope which is passed into the bladder via the urethra (the tube that takes urine from your bladder to the outside of your body). It is about as thick as a pencil. The fibre-optic material allows a doctor to see around bends within the urinary tract and look at the inside of your bladder.

A doctor can look down the cystoscope, and also pictures can be displayed on a TV monitor. Cystoscopes have side channels where various thin devices can pass down. For example, the doctor may take a small sample (biopsy) from the lining of the bladder by using a thin 'grabbing' instrument which is passed down a side channel.

Why do I need this test?

Bladder symptoms, such as passing blood in the urine, going to the toilet frequently or having pain when passing urine, may be due to problems in the lining of the bladder. Sometimes, you may have not had any symptoms at all, but have had blood cells in the urine detected by a “dipstick urine test.” Using a flexible cystoscope, we can look at the lining of the bladder to help us find out what is causing your symptoms and what further assessment or treatment (if any) is needed. This test can also be used to monitor a pre-existing condition.

What happens when I arrive for the test?

- When you arrive at the Endoscopy Unit report to the Clerk on reception, who will check all your details and “book” you into the clinic.
- You will then be seen by a nurse, who will discuss the cystoscopy with you. They will take your blood pressure and pulse and ask you questions concerning your general health and more specific questions regarding the blood in your urine. Please bring your medication (or a list of them) with you.
- There is plenty of time to ask any questions you have or discuss any concerns.
- After telling you about the procedure, the Nurse Practitioner or Doctor will ask you to sign a “Consent Form”, which gives us permission to carry out the investigation. You may take this opportunity to ask any questions or discuss concerns.
- It may be necessary to sit for a while before the cystoscopy is done. This is not normally longer than 20 minutes.
- You will be changed into a theatre gown. Please bring a dressing gown and a pair of slippers with you.
How is a flexible cystoscopy performed?

Cystoscopy is usually done as an outpatient or day case. It is usually done whilst you are awake. Some people are given a sedative to help them to relax.

Once in the procedure room, a nurse will help you get as comfortable as possible on the examination trolley and explain the process to you. As with many medical tests, a flexible cystoscopy involves some slight discomfort and embarrassment and can seem a little undignified. Throughout the examination, professional trained staff, who understand your concerns, will help minimise any discomfort and will maintain you dignity at all times.

The doctor will cleanse the genital area with a mild disinfectant and you will be covered with a sheet. A local anaesthetic gel is then squirited into the opening of the urethra. This helps the cystoscope to pass into the urethra with as little discomfort as possible. The scope is gently inserted into the urethra and up into the bladder.

The bladder is partially filled with water and the lining of the bladder is then inspected by the cystoscope. If you start to feel that your bladder is full, please let us know.

Occasionally we may need to take a sample of tissue from the lining of your bladder (this is called a biopsy), using a special instrument which fits inside the cystoscope. This may be slightly uncomfortable but any discomfort only lasts a few seconds. This area will then be cauterised (burns off part of the tissue), using a special probe inserted down the cystoscope.

Once we are happy we have seen all the parts of the bladder, the cystoscope will then be withdrawn. The doctor will then do an internal examination of the vagina (front passage) for women and the rectum (back passage) for men. This allows us to feel inside the pelvis for any changes/abnormalities which could be causing your problems.

Your bladder is often quite full after the test so you will be shown to the toilet. You will be shown back to the changing room to change into your outdoor clothes. Please feel free to ask any questions at any time.

A few people find this test very uncomfortable so if at any time you are not happy to carry on, please make the staff aware and they will not proceed any further.
When will I be told the results?

The doctor or nurse practitioner doing the test will “talk you through it” as it is performed, so you will know whether it is normal or abnormal. They will also arrange for further appointments as necessary, and provide you with any information you will need.

☐ Your test was normal

☐ No further follow up is required

☐ You will need another cystoscopy
   Date: ______________________________

☐ You will need another investigation

☐ You will need an Outpatients Appointment

☐ A copy of your results will be sent to your GP

☐ A copy of your results will be sent to your consultant

Additional information/instructions:

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Are there any side-effects or possible complications?

- Most cystoscopies are done without any problem.
- For a couple of days following the procedure you should make sure to drink at least 3 pints (roughly 10 cups) of liquid per day, this helps prevent urine infections.
- For the next 24 hours you may have a mild burning feeling when you pass urine, and feel the need to go more often. Your urine may look pink due to mild bleeding, particularly if a biopsy was taken, if this occurs take more drinks to dilute the blood.
- The bleeding should settle within 24 hours of the examination.
- Occasionally, a urine infection develops shortly after a cystoscopy. This can cause a fever (high temperature) and pain when you pass urine.
- Rarely, the cystoscope may damage or perforate the bladder.

After you have had a cystoscopy, contact your doctor if:

- Pain or bleeding is severe.
- Any pain or bleeding lasts longer than two days.
- You develop symptoms of infection, such as a fever.
- You are unable to pass urine

Where should I seek advice or help?

If you develop a problem out of usual clinic hours (09.00 – 17.00hrs) please contact your general practitioner or come to the accident and emergency department.
During office hours Monday to Friday please contact:-

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<th>Telephone numbers</th>
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<tr>
<td>Endoscopy Unit</td>
<td>0191 445 2586</td>
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<tr>
<td>Urology Nurse Practitioners</td>
<td>0191 445 2217/ or 4453469</td>
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There is an answer phone on these numbers. If a nurse is not available when you ring please leave your name and contact phone number and they will contact you once they are back in their office. If you are experiencing an urgent problem please contact your GP.

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<tr>
<td>Main switchboard</td>
<td>0191 482 0000</td>
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The Patient Advice and Liaison Service (PALS) can provide help, advice and support to patients, relatives or carers who have any questions or concerns regarding their health care. PALS are unable to give medical advice. You can contact PALS on free phone 0800 953 0667. Monday - Friday, 9.00am – 5.00pm. An answer phone is available outside of these hours and calls will be returned the next working day.
Data Protection

Any personal information is kept confidential. There may be occasions where your information needs to be shared with other care professionals to ensure you receive the best care possible.

In order to assist us improve the services available your information may be used for clinical audit, research, teaching and anonymised for National NHS Reviews. Further information is available in the leaflet Disclosure of Confidential Information IL137, via Gateshead Health NHS Foundation Trust website or the PALS Service.

Information Leaflet: IL359
Version: 1
Title: Flexible Cystoscopy
First Published: July 2011
Review Date: July 2013
Author: Lorraine Montgomery

This leaflet can be made available in other languages and formats upon request