

## Patient Information – Flexible Cystoscopy

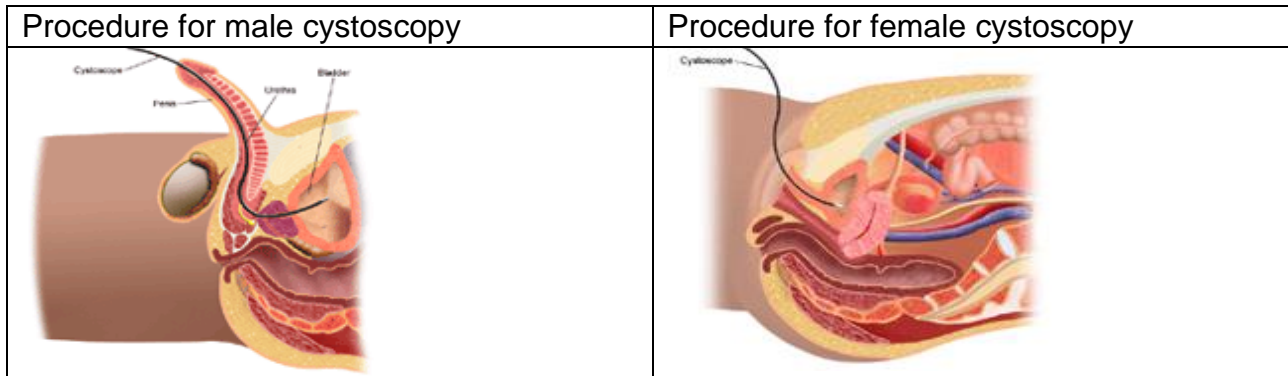
### Introduction

This information will provide general information and address any questions you may have about your procedure. It is not intended to replace the discussion between you and the health care team but may act as a starting point for discussion. If after reading it you have any concerns or require further explanation, please discuss this with a member of the health care team at your appointment.

### 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 Urologist to see around bends within the urinary tract and look at the inside of your bladder. The Urologist can look down the cystoscope, and pictures can be displayed on a TV monitor. Local anaesthetic lubricating jelly will be used to make the passage of the cystoscope as comfortable as possible. Most patients find the procedure uncomfortable rather than painful.

The Urologist will then fill your bladder with sterile fluid so that it is possible to inspect the whole lining of the bladder. The procedure will only take a few minutes.



### Why do I need a Flexible Cystoscopy?

You may have experienced some problems with your bladder, or symptoms that concern your doctor and need further investigation. Your doctor feels it is necessary to check your bladder and urethra for any abnormalities.

### Are there any side effects?

Common (greater than 1 in 10)

- Mild burning or bleeding on passing urine for a short period after the procedure.

Occasional (between 1 in 10 and 1 in 50)

- Infection of the bladder requiring antibiotics.

Rare (less than 1 in 50)

- Temporary insertion of a catheter.
- Delayed bleeding requiring removal of clots or further surgery.
- Injury to the urethra causing delayed scar formation.

### How do I prepare for my Flexible Cystoscopy?

- You can drive to and from your appointment.
- Bring a sample of urine with you in a clean container. You only need about 20mls (4 tsp) of urine produced first thing in the morning of the day of your appointment. The container should be clean and have a tight-fitting lid. You can ask for a urine sample bottle from your own GP surgery, if preferred.
- You may eat and drink as usual, as only a local anaesthetic gel applied to the skin is used.
- Please bring a list of the medication you are taking currently.
- Please read the enclosed consent form. The Urologist will take you through this at your appointment before signing.
- Call us on [0333 332 2102](tel:03333322102) if:
  - you have mobility problems that would make it difficult for you to transfer yourself onto a treatment couch.
  - you think you may have an active urine infection as we may need to re-arrange your appointment.

### What will happen?

We are aware that this is an intimate procedure, and you will be asked to undress from the waist down. However, the health care team will do their best to maintain your dignity as much as possible. A chaperone will always be present, and the consulting room door locked throughout the procedure. We would like you to be aware that this procedure is usually performed by a male Urologist with a female Health Care Assistant providing support. If you have any concerns about this, please contact us on [0333 332 2102](tel:03333322102).

Please refer to the enclosed map and directions for the check in procedures at the clinic you are attending and take a seat in the waiting area. You will be collected by the Health Care Assistant who will test your urine sample and take you to see the Urologist.

The Urologist will ask you some questions and will explain what happens next, including any possible side effects following the procedure. Please feel free to ask any questions you may have. After telling you about the procedure, the Urologist will ask you to sign a consent form, which gives us permission to carry out the investigation.

You will be asked to lie on the treatment couch. To insert the camera into the bladder, female patients will be asked to adopt a similar position to that when having a smear test. A Health Care Assistant will remain with you throughout the procedure.

The Urologist will cleanse the genital area with a mild disinfectant, and you will be covered with a paper blanket. A small tube of local anaesthetic gel is then applied to the opening of the urethra. The gel 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. If you wish, you may watch the camera images on the screen next to the couch. There are folds in the lining of the bladder. Therefore, saline (sterile saltwater) is run into the bladder through the cystoscope to stretch the folds which allows the Urologist to see the lining better. This may cause the feeling of a full bladder or wanting to pass urine, which is a normal sensation. If at any point you feel that the procedure is too much for you, please tell the Urologist or Health Care Assistant immediately and they will stop the procedure.

### What happens next?

You will be asked to go to the toilet and pass the fluid that has been used to fill your bladder, just the same as if you were passing urine. Soft wipes will be available to you to use. You will then be able to get dressed and leave the clinic. The results from your procedure will allow the Urologist to advise you about any necessary treatment, further tests, or appointments. This will be discussed with you at your appointment and a written report will be sent electronically to your GP within 2 working days.

You should drink plenty of fluids for 1 – 2 days to ‘flush’ your system through and help to prevent any infection. It is normal to experience some mild stinging or burning for the first few times that you pass urine. You may also notice that your urine is slightly blood stained – these symptoms should clear up after a couple of days. It is sensible to take things easy for the rest of the day.

If you develop a fever, severe pain on passing urine, inability to pass urine, or the blood in your urine increases, you should contact your GP immediately.