

In some instances it is necessary to take a small sample of tissue for examination under the microscope. This is known as a biopsy.

Before you leave, the doctor will tell you the result of your cystoscopy.

In most cases, there will be no need for a further outpatient appointment and you will be informed by letter of any outstanding test results.

Problems after cystoscopy are fairly rare. Mild bleeding may be noticed (more common after a biopsy) and some people will have burning or discomfort on passing urine. In both cases, drinking extra fluids can help.

There is a risk of infection, symptoms of a water infection such as temperature, pain, persistent burning or bleeding may be noticed. In this case you should contact your own doctor.

Urology Nurses
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Haematuria clinic

Information for patients having investigations into blood in the urine

If you need this leaflet in another format, eg. large print or a different language, please ask a member of staff.

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Healthcare

It is important to find out why you have blood in your urine. Therefore, a number of investigations need to be done.

These usually include:

- X-ray or scan - to check on your kidneys and the tubes which bring urine down into the bladder
- A flexible cystoscopy - to look inside the bladder with a fine telescope
- A blood test - to check that your kidneys are working properly

We've streamlined these investigations so that you should only have to attend for one or two appointments. It is important to keep all appointments.

Why do I need a cystoscopy?

Some urinary symptoms are due to problems in the bladder or the urethra. Sometimes the cause will be clear from tests of the blood or urine but often the only way your doctor can be sure what is going on is to take a look inside with a cystoscope.

How do I prepare for my Flexible cystoscopy?

No special preparation is required at all. This means that on the day of the investigation you can eat and drink as normal. You simply turn up for your appointment, have your cystoscopy and then leave the clinic under your own steam. There is no need to rest afterwards.

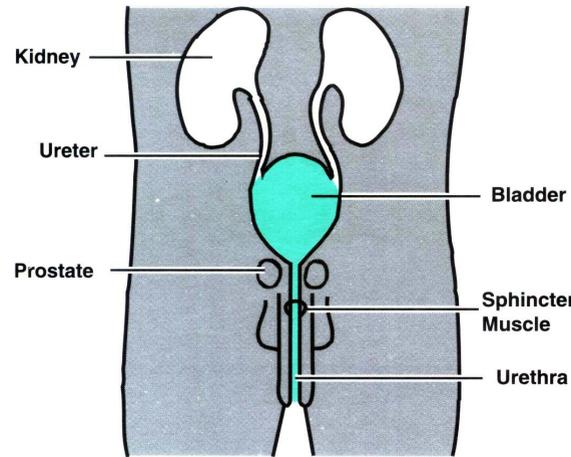


FIGURE 1 (Male)

Although you do not need a general anaesthetic for flexible cystoscopy, the urethra needs to be prepared with lubricating jelly, this being squeezed gently into the urethra from a tube or syringe. This lubricating jelly makes it more comfortable to pass the cystoscope into the bladder.

Men may be asked by the doctor to try and pass urine when the instrument reaches the sphincter below the prostate gland. In trying to pass urine, the sphincter naturally relaxes and the cystoscope can pass through more easily. Don't worry, no urine will actually come out while the cystoscope is in the urethra. There may be momentary stinging as the sphincter opens.

The flexible cystoscope has a control device which allows the doctor to steer it by bending its tip.

Once the end of the instrument is in the bladder,

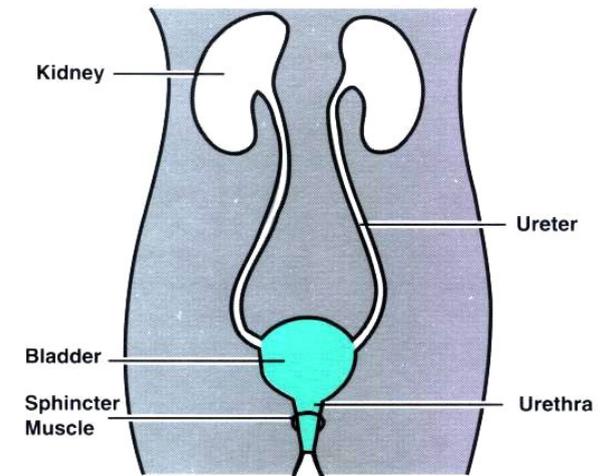


FIGURE 2 (Female)

twisting the instrument and steering it in this way brings the whole of the lining into view.

When the bladder is empty, there are folds in the lining. Saline (salt water) is run into the bladder through the cystoscope to stretch out these folds and fill the bladder. This way the whole of the lining can be seen. It is therefore natural at the end of the examination to feel as if you need to pass water again.

The nurse will stay with you throughout the examination which is very quick. You may experience some slight discomfort but it will not last long.