

Urologic Surgical Associates of Delaware

Specializing in Robotic Surgery

Cystoscopy

Overview

Cystoscopy is a test that looks at portions of the lower urinary tract through a special telescope called a cystoscope. Most females easily tolerate cystoscopy in the office due to their pelvic anatomy. Young males may require anesthesia for this procedure. As a male becomes older his pelvis relaxes and he may become better able to tolerate cystoscopy in the office. The decision of whether to use anesthesia is often made on a case by case basis. In some cases therapeutic cystoscopy can be done in the office.

If your doctor suspects a condition such as voiding dysfunction or bladder tumor then you may need a diagnostic cystoscopy. Diagnostic cystoscopy only involves looking at the bladder or urinary tract. If your cystoscopy is being performed for treatment (such as a known bladder tumor or stone) then a therapeutic cystoscopy will be performed under anesthesia.

Diagnostic Uses of Cystoscopy include:

- * inspecting the bladder for stones or tumors
- * gathering urine samples from each kidney to look for infection or tumor cells
- * evaluating the bladder lining
- * evaluating an enlarged prostate gland
- * evaluating a narrow or strictured urethra
- * taking special x-rays of the ureter and kidney
- * evaluating for hematuria (blood in the urine)
- * recurrent infections, pelvic pain, or interstitial cystitis
- * urinary problems such as frequency, urgency, incontinence, straining to void, or incomplete bladder emptying

Treatments that can be performed during Cystoscopy include:

- * performing a bladder biopsy
- * removing bladder tumors
- * crushing and removing stones found in the bladder
- * removing an obstruction in the urinary tract
- * treating bleeding in the bladder

- * to facilitate ureteroscopy to treat kidney stones
- * treating enlarged prostate
- * treating narrow or strictured urethra

For the procedure, you will be asked to lie on your back on a special exam table, with buttocks at the end of the table, hips and knees fully bent, and feet supported. Male diagnostic cystoscopy can often be performed with a flexible telescope without having to bend or elevate the knees. A sheet is draped over the abdomen. The urethra and surrounding area is carefully cleansed and an anesthetic gel is applied to the urethral area. A thin, well-lubricated viewing instrument is then inserted into the urethra and slowly moved into the bladder. Sterile water is passed through this instrument to expand the bladder and create a clear view. The solution may be drained and then repeated before the procedure is completed.

You will feel some sensation when the viewing instrument is passed through the urethra and again when it is removed. You also may feel a cool sensation when the sterile water fills the bladder. The procedure is fairly painless, and most of the discomfort is from lying on the table. In fact, most patients report that having a cystoscopy is not nearly as uncomfortable as they had anticipated. If a biopsy is taken, you may notice a tug or pinching feeling (like a bee sting).

Cystoscopy usually takes 15 to 45 minutes to complete, and the viewing instrument usually is in the bladder for no more than 2 to 10 minutes.

At home after cystoscopy, it is **NORMAL** to have the following symptoms for several days:

- * frequent urination with some burning after urination
- * urine that is red or pink in color with a few string-like blood clots

After your procedure, be sure to:

- * drink 6 to 8 glasses of fluids to help reduce discomfort while urinating and prevent infection

If you have any problems or develop a fever over 102 degrees Fahrenheit or are unable to urinate (you may want to try sitting in a warm bath to urinate) call our office at 302-836-5500.

Take the prescribed antibiotic for 3-5 days starting the day of or the day before the procedure.