Flexible Cystoscopy –
A guide to the test

Endoscopy Department
Diagnostics, Therapeutics & Central Operations

This leaflet has been designed to give you important information about your condition / procedure, and to answer some common queries that you may have.
Introduction

What is a Flexible Cystoscopy?

A flexible cystoscopy is a test that allows the doctor to look directly at the lining of the bladder, from the opening of the urethra. During the procedure a thin flexible ‘fibre-optic’ tube called a cystoscope is passed through the urethra (opening to the bladder). The end of the cystoscope contains a light and conveys images to a viewing screen allowing the doctor a clear view of the bladder lining. As well as looking at the lining, biopsies (small pieces of tissue samples - for examination under microscope) can be taken.

The test is usually carried out to investigate bladder symptoms such as blood apparent in urine, recurrent urine infections, abdominal pain or abnormalities revealed by other investigations.

Benefits

The procedure enables us to have a direct vision of the bladder and the urethra, to aid diagnosis and treatment.

Risks

It is very important that you are aware of the potential risks and complications of flexible cystoscopy before giving your consent to the procedure. These include:

- **Internal bleeding (haemorrhage)**
  This may occur at the site of a biopsy. The bleeding is usually resolved without any treatment but in a minority of cases may be serious. If you pass large clots of blood or if your urine is bright red you must seek medical advice.

- **Infection**
  This may happen to some patients and is partly why we ask for a urine sample prior to the procedure. All precautions possible are taken to prevent infection. If you develop a fever or have persistent pain and burning when passing urine you must seek medical advice. It is also important to remember that if you pass small amounts of urine frequently this
may be a sign of infection and therefore you should consult your G.P.

- **Urine Retention**
  This is the inability to pass urine. If this occurs you must seek medical advice.

- **Perforation**
  If you develop severe lower abdominal pain and/or your tummy becomes noticeably more blown up (distended) you must see medical advice.

N.B. There is no evidence that the complication rates after flexible cystoscopy at Northern Lincolnshire and Goole NHS Foundation Trusts are different from other hospitals.

Every effort is made to reduce the risk of these complications occurring. If you are concerned about any of these risks and complications, please discuss this with the consultant or member of their staff **before** the procedure.

**Alternatives**

It may be essential to have a cystoscopy in order to diagnose some bladder conditions. The cystoscope enables the doctor to view parts of the urethra and bladder that tend not to show up well on X-rays.

In certain circumstances it may be possible to undertake another form of cystoscopy, using a rigid rather than a flexible instrument. However this is used for giving treatment to the bladder and urinary tract rather than diagnostic investigations. This would be done under a general anaesthetic.

**What do I need to know before admission?**

You will be asked to attend the Endoscopy Unit. You can expect to be in the Unit between 1 and 2 hours. Please may we request that you do not come to the unit before your appointment time.

Prescribed medication can be taken as normal on the day of your Cystoscopy. There is also no need to fast for the procedure, so please eat and drink as normal.

**What happens on admission?**

Once you have arrived at the Unit a nurse will complete an admission document with all your personal details. She will explain the procedure to you, and inform you of the potential risks and complications of the flexible cystoscopy and also answer any questions you may have. The nurse or Endoscopist will then ask you to sign the consent form for the procedure (once you have read it carefully and understood it in full).

You may be asked to provide a sample of urine, which will be sent to the pathology department after the cystoscopy. If any abnormalities are found you will be notified by the urology secretaries.

You will be taken into a changing room and supplied with a gown and dressing gown for you to change into. You need to keep your clothes with you and you will be provided with a bag to put them in.

There will be a member of staff with you throughout the procedure.

**Cancellations or delays**

Please be aware that in some circumstances your procedure may have to be delayed or cancelled at short notice. If this occurs we apologise for any inconvenience caused and
will aim to reschedule your appointment as soon as possible.

**What happens during the Flexible Cystoscopy?**

You will be taken to an examination room for the procedure. The nurses will help you lie down in the correct position on a couch, resting on your back. A nurse will stay with you throughout the test.

The procedure will be carried out as follows:

1. The genital area is washed with an antiseptic lotion. Then some local anaesthetic jelly is inserted into the urethra (this might sting a little). It acts as a lubricant as well as numbing the area. The cystoscope is then inserted into the urethra and into the bladder. Fluid attached to the cystoscope is released into the bladder to expand it; this is to give the doctor a clear view of the internal surface.

2. If the doctor finds any change in any tissue a tiny piece may be removed (biopsy) using instruments passed through the cystoscope. Any samples of tissues removed are sent to the laboratory for specialist examination.

The procedure lasts from 5 to 10 minutes. During the procedure you may feel as if you need to pass urine also some patients find the procedure uncomfortable this applies mainly to men due to their anatomy, however we take as many precautions as possible to minimise any discomfort.

**What happens after the Flexible Cystoscopy?**

You will need to pass urine as soon as the procedure is finished, you can get changed and the nurse will organise a drink for you. You may find that you pass bloodstained urine initially and that it stings when you go to the toilet. It is important that you drink following the procedure to flush out your bladder. The nursing staff will generally assess how you have recovered from the procedure. If you feel unwell at all please let the staff know.

If you are unable to pass urine you will be asked to stay in the Endoscopy Unit until you can. Once ready to leave the nurse will speak to you about your cystoscopy, answer any questions you have, and will give you a copy of your discharge letter.

**Discharge advice**

Drink plenty of fluids – at least 3 pints of water or squash. Avoid caffeine (coffee, tea, cocoa, colas) and alcohol for 2 days.

Your urine may be pink in colour and you may pass some small clots. This is normal following this procedure. As you urinate more, your urine will return to normal.

Carry on with normal activities according to how you feel. Avoid strenuous physical activity especially heavy lifting.

**Pain** – if you experience discomfort following your cystoscopy simple analgesia like paracetamol is recommended.

It is normal to have a small amount of bleeding (especially if you have had biopsies taken) and burning the first few times you pass urine however this should settle quite quickly especially if you drink plenty.

**Reference Section**

Sources of further information / support
Information for patients and visitors

Cancer BACUP
3 Bath Place,
Rivington Street,
London,
EC2A 3JR
Tel: 020 7696 9003 or Freephone 0800 181199
Fax: 020 7696 9002
www.cancerbacup.org.uk

Contact details for Further Information
If you have any questions or concerns, please contact:

The Endoscopy Unit at Diana Princess of Wales
Normal Hours
Endoscopy Pre-assessment Nurse: (01472) 874111 Ext: 7341.
Telephone the Unit direct on (01472) 875236 between the hours of 8am until 6pm, Monday until Friday
or
Telephone Diana, Princess of Wales Hospital, Grimsby on: (01472) 874111 and ask for the Endoscopy Unit.
Out of Hours:
After 6pm contact your G.P. or phone the G.P. emergency Centre (01724) 290444

Department of General Surgery and Endoscopy, Goole Hospital
Telephone (01724) 387902
or
Ward 7 on (01405) 720720 and dial ext 4119

Concerns and Queries
If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

For Diana, Princess of Wales Hospital
Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01472) 875403 or at the PALS office which is situated near the main entrance.

For Scunthorpe General Hospital
Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which situated on C Floor.
Alternatively you can email: nlg-tr.PALS@nhs.net

Confidentiality
Information on NHS patients is collected in a variety of ways and for a variety of reasons (e.g. providing care and treatment, managing and planning the NHS, training and educating staff, research etc.).
Everyone working for the NHS has a legal duty to keep information about you
Information for patients and visitors

confidential. Information will only ever be shared with people who have a genuine need for it (e.g. your GP or other professionals from whom you have been receiving care) or if the law requires it, for example, to notify a birth.

Please be assured however that anyone who receives information from us is also under a legal duty to keep it confidential.

Zero Tolerance - Violent, Threatening and Abusive Behaviour

The Trust and its staff are committed to providing high quality care to patients within the department. However, we wish to advise all patients / visitors that the following inappropriate behaviour will not be tolerated:

- Swearing
- Threatening / abusive behaviour
- Verbal / physical abuse

The Trust reserves the right to withdraw from treating patients whom are threatening / abusive / violent and ensuring the removal of those persons from the premises.

All acts of criminal violence and aggression will be notified to the Police immediately.

Risk Management Strategy

The Trust welcomes comments and suggestions from patients and visitors that could help to reduce risk.

Perhaps you have experienced something whilst in hospital, whilst attending as an outpatient or as a visitor and you felt at risk.

Please tell a member of staff on the ward or in the department you are attending / visiting.

Moving & Handling

The Trust operates a Minimal Lifting Policy, which in essence means patients are only ever lifted by nursing staff in an emergency situation.

Patients are always encouraged to help themselves as much as possible when mobilising, and if unable to do so, equipment may be used to assist in their safe transfer.

If you have any questions regarding moving and handling of patients within the Trust, please speak to a member of staff in the ward or department you are visiting.

Northern Lincolnshire and Goole NHS Foundation Trust
Diana Princess of Wales Hospital
Scarthe Road
Grimsby
01472 874111

Scunthorpe General Hospital
Cliff Gardens
Scunthorpe
01724 282282

Goole & District Hospital
Woodland Avenue
Goole
01405 720720
www.nlq.nhs.uk

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