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Information for patients Cystoscopy



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Scheduled admission for a cystoscopy

Information for patients

It has been recommended by your consultant or a member of the team to undergo a Cystoscopy. This is an inspection of the bladder and urethra with a telescope carried out in an operating theatre. On receipt of your letter to attend for the procedure, you should also be requested to complete an MRSA screen to facilitate your admission. Without this a postponement or cancellation may occur.

What should I expect?

Routinely you will be admitted to the spinal unit the day before the procedure, should you feel you are able to attend on the day of surgery by 0800hrs please contact them to arrange this. On admission you will undergo baseline investigations such as blood and urine screening and assess your general fitness and urological function. You will be seen by your allocated nurse and pharmacist as well as a member of the spinal team.

Prior to surgery you will be asked not to eat and drink from midnight prior to theatre and to stop drinking water from 0600hrs. Any usual morning medications need to be taken before this time. This is precaution should you require any anaesthesia or sedation during the procedure.

Please inform your spinal unit on receipt of this letter should you take regular blood thinning medication (Aspirin, Warfarin, Clopidogrel, Riveroxaban) to seek advice prior to surgery.

What the procedure involves?

On the morning of surgery your designated nurse will administer a dose of antibiotics usually intravenously through a cannula inserted on arrival. Checks will also be made to ensure you are fit for the procedure.

On arrival to theatre you will meet the theatre team and an Anaesthetist who will discuss options of sedation or anaesthetic which best suits yourself and your spinal injury. This conversation is unique to you and your anaesthetists.

A telescope is inserted through the penis or urethra to examine the passage way into the bladder and the bladder itself. Occasionally the passage to the bladder may need stretching, this can be done with the telescope. The procedure usually only lasts a few minutes, if it is necessary for additional procedures it may take longer.

At the end of the procedure you will be taken into a recovery area and then collected by your designated nurse when deemed medically fit.

Post-operative care following the procedure

On return to the ward routine observations will be carried out and monitored to rule out any Autonomic symptoms such as headache and urinary retention. You will be encouraged to eat and drink plenty to ensure your bladder management returns to its pre-operative state with no signs of bleeding.

Routinely you would be discharged the afternoon of the procedure if bladder management has returned with clear urine and you are able to safely mobilise as on admission. If you have regular care at home please ensure it is reinstated to accommodate discharge. Should you require support with transport home on discharge please inform your designated nurse as soon as possible so that this can be explored.

What happens next?

Following the cystoscopy if any change to your bladder routine has been advised by your surgeon, your nurse will support you with these changes before discharge.

On discharge you will be given a discharge letter for yourself should you need to seek medical advice for any reason. A copy will also be sent to your GP for their records. If there are any recommendations for further treatment or follow up then an appointment will be requested on discharge.

Once discharged should you have any concerns regarding your bladder routine or have any symptoms of feeling unwell, a new onset of blood in urine or urine flow please seek medical advice locally or via your spinal unit.