Cystoscopy

Key Points

- A cystoscopy allows your health care provider to look inside your bladder.
- A cystoscopy can’t be done if you have symptoms of a urinary tract infection.

What is a cystoscopy?

A cystoscopy is a procedure to look at the inside of your bladder. Your health care provider inserts a flexible thin tube with a tiny light and camera on the end into your bladder through the urethra or urinary diversion channel. Then your health care provider uses this to take pictures of your bladder. The doctor also might take samples of bladder tissue for tests called biopsies.

Why do I need a cystoscopy?

Your health care provider uses the procedure to understand what might be causing a urinary problem. Some problems include: repeated urinary tract infections, blood in the urine, urinary incontinence, frequent urination, dribbling after urination, pain or difficulty urinating. A health care provider also might screen for changes in tissue if you had a bladder augmentation.

Some abnormalities that a doctor might see with the flexible camera-light include: tumors, bladder stones, inflammation, cysts, diverticula (small out-pouchings or sacs in the bladder wall), ulcers, polyps and narrowing of the urethra or channel.

Where will the cystoscopy be done?

You’ll have your procedure at Gillette in a private room. Music and aromatherapy are available to create a comfortable environment.

What do I need to do before the procedure?

You need to be sure that you don’t have a urinary tract infection (UTI). A cystoscopy can’t be done if you have a UTI.

Signs and symptoms of a UTI include:

- Fever
- Chills
- Strong odor in the urine
- Change in color of urine
- Cloudy urine
- Pain with urination
- Increase frequency of urination
- Increased urgency of urination

If you’re experiencing any of these symptoms, you must get a urine analysis/urine culture (UA/UC) done at your primary care clinic to evaluate for infection. If you need treatment, begin as soon as possible to allow time for treatment before your upcoming cystoscopy. If the infection occurs too close to your appointment, or the infection is not treated before your appointment, you’ll need to reschedule the cystoscopy.

You can complete a UA/UC at your primary care clinic. If you do it at your primary care clinic, your results need to be faxed back to the lab at Gillette (651-229-3872).
What should I bring to my appointment?
List of current medications, dose and frequency
• List of allergies
• If you empty your bladder by catheterization, bring your catheterization supplies.
• If you wear a brief or pad, bring a fresh brief or pad for after the procedure.
• If you prefer to listen to specific music, please feel free to bring a CD or music player.
• If you need assistance with communication or relaying information, please have a caregiver accompany you to be sure we communicate accurate information.

What will happen during my cystoscopy appointment?
Set Up
You’ll lie down in a seated, reclining position for the procedure. You’ll remove your undergarments and we’ll cover you with a gown or blanket. We will have you empty your bladder prior to starting the procedure.
Procedure
We’ll use a sterile technique by draping a large cloth across your body to keep everything very clean. After we clean your skin, the doctor will insert the flexible tube with the camera-light into your bladder. The tube will begin to fill your bladder with a sterile saline solution so the camera can move easily and get a good view of the tissue. During the procedure, you’ll be able to see the pictures of your bladder from the camera on a screen.
Clean Up
After we remove the tube with the flexible camera-light, we’ll wash and dry your skin. Your bladder will be emptied at the end of the procedure and then you’ll get fully dressed again.

The Results
Your urology provider will review the results of your cystoscopy.

What should I expect after the cystoscopy?
• You’ll be able to return to your regular activities.
• You’ll need to drink extra liquids for the rest of the day.
• You might feel uncomfortable urinating after we remove the catheter. Your urethra and bladder might be irritated. Common symptoms of discomfort include: hesitation to urinate, urinating often, a stinging sensation while urinating, pink-tinged urine, inability to hold urine and bladder spasms. These symptoms might last 24 to 48 hours.

What are the risks of a cystoscopy?
• Accidental damage of the bladder wall with the scope
• Bleeding
• Infection
• You might have an increased risk of a urinary tract infection (UTI). Please call if you develop signs and symptoms of a UTI (see list above).
• For people with a high spinal cord injury, autonomic dysreflexia could occur. These symptoms include: high blood pressure, severe headaches, sweating. If during the procedure, you become dysreflexic, we would stop the cystoscopy. If you have a history of autonomic dysreflexia, please tell the doctor performing your cystoscopy so we can take proper precautions.

When should I call for help?
Contact Telehealth Nursing at 651-229-3890 immediately if you experience any of the following:
• Signs or symptoms of a urinary tract infection (see list above)
• Urinary retention: no void in more than 12 hours
• Abdominal, back or flank (side) pain
• Nausea and/or vomiting
• Painful urination after 48 hours
• Bleeding from the urethra
• Pain not relieved by over-the-counter pain medicines