

Cystoscopy with Anesthesia

What is a cystoscopy?

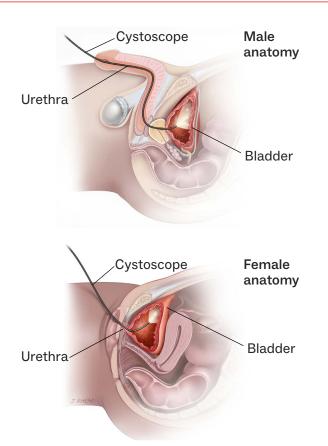
Cystoscopy [sis-TOSS-kuh-pee] is a procedure that allows your doctor to see inside your bladder and urethra [yoo-REETH-ruh] (the tube that carries pee from your bladder outside your body).

A cystoscope [SIS-tuh-skohp] is a thin, flexible tube that has a camera and light at the end. It sends pictures of the inside of your urethra and bladder to a computer. This allows your doctor to see things that may not show up on another imaging test, such as an x-ray. Tiny tools attached to the cystoscope can be used to remove bladder stones, small growths, or samples of tissue or urine.

Why do I need a cystoscopy?

Your doctor may recommend cystoscopy for one of the following reasons:

- To find the cause of urinary problems, such as trouble urinating (peeing), pain during urination, repeated urinary tract infections (UTIs), unexplained blood in the urine, or urinary incontinence (leaking).
- To look for problems in the urethra, such as a blockage caused by bladder stones (small masses of mineral) or extra tissue growth.
- To check for signs of disease, such as kidney disease or cancer of the bladder or urethra.
- To look for unusual anatomy that may be causing problems.



How to I prepare?

Before you go in for the procedure, be sure to:

- Arrange for a responsible adult to take you home. Because you will be sedated, you will not be allowed to drive after the procedure.
- Talk with someone at the hospital or surgical center about any special instructions they have for you.
- Tell your doctor if you are allergic to any medicines, including anesthesia medicine.

What happens during a cystoscopy?

The procedure takes between 10 and 30 minutes.

- You may be given medicine (anesthesia) to make you sleep and prevent feeling in your entire body. Or, you may be given a local anesthesia (numbing medicine) that prevents feeling only in the area of the procedure. If you have a local anesthesia, you may also be given a medicine to make you drowsy and relaxed.
- The cystoscope is inserted into your urethra and slowly moved to your bladder.
- Using the cystoscope, your doctor fills your bladder with sterile water. The water stretches the bladder wall and makes it easier to see.
- Your doctor will look closely at your bladder and urethra. If anything looks abnormal, they may take samples for testing.

What happens after the procedure?

- You are taken to a recovery area where you are monitored until the anesthesia wears off.
- You may feel as if you have to urinate, even if your bladder is empty.
- You may notice a little bit of blood in your urine but it should go away quickly. This doesn't always happen.
- You may need to urinate more often for the first few days.
- Your urethra may feel sore for a few days.
- You may feel a burning sensation when you urinate. This will go away after 1 to 2 days.

When do I need to call my doctor?

Contact your doctor if you have:

- Blood or blood clots in your urine after you have urinated several times
- Not been able to urinate for 8 hours after the procedure
- Fever, chills, or severe pain in your abdomen (belly)
- Less urine than normal

How do I care for myself at home?

- You can go back to your normal diet and exercise activities as soon as you feel comfortable.
- Drink at least 4 to 6 glasses of water per day.
- Manage any pain. Your doctor may recommend pain medicine for the first few days. Be sure to take it as directed. You may also feel better if you:
 - Hold a warm, wet washcloth over your urethra.
 - Take a warm bath, if your doctor says it's okay.
- Take all medicines as prescribed. You may be given antibiotic medicine to prevent infection after surgery. You may also be given other medicine to treat problems discovered during the procedure.

Straining urine

If your cystoscopy showed that you have bladder stones (small masses of minerals that form in concentrated urine), you may be asked to strain your urine. Ask your doctor how many days you should strain your urine. Follow these steps:

- Use the strainer from your doctor. If you don't have a strainer, you can use a coffee filter.
- Urinate directly into the strainer or filter. Or, you can urinate into a cup, and then pour the urine through the strainer. Save anything that does not pass through it. Stones may be tiny, like sand, or larger, like gravel.
- Allow the stones to dry and store them in a plastic or glass container. Take them to your doctor at your next visit.

When will I get the results?

Your doctor may be able to discuss your results right away. However, if you doctor took a tissue sample or removed any other material, it may be sent to a lab to be tested. You may need to make a follow-up appointment to discuss the results.

Talking with your doctor

Before your cystoscopy, your doctor will meet with you to describe the procedure. You will discuss the benefits, risks, and alternatives. Don't be afraid to ask questions. Your discussion with your doctor is the most important part of learning about what to expect.

Possible benefits	Risks and possible complications	Alternatives
 Identify the cause of symptoms 	 Infection in the urinary tract that spreads to other areas of the body (rare). 	Cystoscopy is the best way for your doctor to see inside your bladder and urethra. The alternative, x-ray, is less effective.
 May prevent the need for surgery 	 Mild blood in the urine. Serious bleeding occurs rarely. 	
	 Might experience a burning sensation when urinating. Will gradually get better after the procedure. 	
	• Allergy to local anesthetic (Lidocaine Jelly) or lodine (antiseptic used for prepping the area).	

Notes	

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