FLEXIBLE CYSTOSCOPY

Providing Specialist Care in South Australia & Northern Territory

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**What is a flexible cystoscopy?**

A flexible cystoscopy is a procedure where a narrow telescope is used to inspect the urethra, prostate and bladder. A flexible cystoscopy is performed as a day procedure.

We would recommend a flexible cystoscopy if there is blood in the urine, either microscopic or visible. Other indications would be to assess difficulties passing urine or to investigate urinary tract infections.

The procedure only takes about ten minutes. We use jelly which helps to lubricate the urethra, minimise pain and to make it easier to pass the cystoscope. There are no needles required. A fine flexible tube is carefully passed down the urethra into the bladder under vision. We use sterile water to help visualise the urethra and bladder.

**Preparing for your procedure**

- No special preparation is required.
- Please continue to take all your usual medications.
- You do not need to fast, if performed with a local anaesthesia.
- There is no restriction on driving after this procedure, if performed with local anaesthesia.

**What to expect afterwards**

As we fill the bladder with water you will most likely need to empty your bladder after the procedure. You may experience some stinging when you pass urine afterwards for up to 24 hours. It is rare for it to last longer. Please contact us if this occurs. We suggest drinking some extra fluid for 24-48 hours until this settles.

**Complications**

These are uncommon. Occasionally there may be a small amount of blood in the urine.

There is a small risk (3%) of developing a urinary tract infection. These symptoms include burning when you pass urine, needing to pass urine frequently and having to get to the toilet in a hurry. If you think you may have an infection or your symptoms seem unusually severe then contact us at Urological Solutions.
After discharge from hospital

You should drink extra fluid over the first week or two after surgery. Drinking 1500-2000mL per day is usually satisfactory. Do not drink excessively. Aim to keep your urine a pale yellow or straw colour. If you find your urinary symptoms are not improving or become worse, then you could have an infection. Either contact our office or see your GP to organise a urine test.

If you do notice an increased amount of blood in the urine, then drink extra water to dilute the urine. Occasionally there is more excessive bleeding, and maybe clots in the urine that make it difficult to pass. If this occurs then please contact our office, contact your GP or present to a hospital emergency department for assessment.

Patients who are travelling outside the metropolitan area are required to check when they are able to travel, and will be required to stay in the metropolitan area for 24 hours (or as instructed by your Urologist)

Driving

You can drive after the procedure after having local anaesthetic.

You should not drive for at least 24 hours after having sedation / general anaesthetic
(or as instructed by your Urologist).

Emergency Contacts

In the event of an emergency, please call our office within business hours. If assistance is required out of hours, please call our On-Call Urologist via our Tennyson office OR present to your nearest Emergency Department.

Ashford Hospital
55 Anzac Highway, Ashford SA 5035 8375 5205 Until 10:00 PM

Wakefield Hospital
300 Wakefield Street, Adelaide SA 5000 8405 3440 24 Hours

Royal Darwin Hospital
Rocklands Drive, Tiwi NT 0810 8922 8888 24 Hours

**For patient’s outside the Metropolitan area, please present to your nearest hospital emergency department.

Follow up

We can let you know the result of the test on the day and what further investigations or treatment will be required.
If you have any further questions then please contact us at Urological Solutions.

The content provided within this document is intended as a guide only and does not apply to all patients. Additional information, including patient specific potential risks, must be obtained during consultation with your Urologist.