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CYSTOSCOPY TRANSURETHRAL RESECTION OF BLADDER TUMOUR AND INTRAVESICAL CHEMOTHERAPY

Providing Specialist Care in South Australia & Northern Territory

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What is a Cystoscopy Transurethral Resection of Bladder Tumour (TURBT) and Intravesical Chemotherapy?

A Cystoscopy and TURBT is a procedure where tumour is removed from the bladder through the urethra. A small telescopic instrument called a resectoscope is passed through the urethra into the bladder. A resectoscope is used to cut the tumour from the inner layer of the bladder wall, sealing off any bleeding areas at the same time. Any tissue that is removed is then sent for laboratory testing.

Many cystoscopy and TURBT are a day procedure which means that an overnight stay is not required. If a catheter is required, an overnight stay is then necessary.

Intravesical chemotherapy is used only for non-invasive or minimally invasive bladder cancers.

Preparing for your procedure

We will provide you with instructions regarding all aspects of preparing for your operation.

- *Pre-operative blood and urine tests.*
- *Details of admission to hospital.*
- *Information regarding fasting and medications.*

What to expect afterwards

You are usually able to eat and drink what you feel like after the surgery. You will be encouraged to maintain a good fluid intake. Pain relief is always available, however, it is not usual to have significant pain after this procedure. You will most likely experience irritation and have a frequent need to urinate afterwards. There will most likely be some blood in the urine which should settle within a few days.

If you have a catheter, it will be attached to a bag and drain urine from the bladder. You may have fluid bags attached and fluid irrigating slowly through to help prevent blood clots forming in the bladder. In the recovery area, chemotherapy will be placed in the bladder. The catheter will usually be removed the following day. A combination of the surgery and the catheter can cause bladder irritation and sometimes bladder spasm.

After removal of the catheter there will most likely still be some blood in the urine. Once we can see that you are passing urine satisfactorily, you are then able to go home.

You will be given pain relief if required and antibiotics if necessary to take home with you.

Complications

This is generally a very safe procedure with a low risk of complications.

- The chance of infection is <5%.
- Significant bleeding requiring readmission to hospital or blood transfusion is <5%.
- The chance of an injury or perforation of the bladder is <1%

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

You should be able to recommence most of your usual activities shortly after surgery. Please avoid heavy lifting or straining until bleeding settles. Sexual activity can be recommenced once the bleeding settles. One in five patients have secondary bleed at 2 weeks and it is important to be careful around this time.

Driving

You should not drive for at least 3-4 days after having the operation
(or as instructed by your Urologist).

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).

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

Flinders Medical Centre (access to Flinders Private Hospital)

Flinders Drive, Bedford Park SA 5042 8204 5511 24 Hours

Calvary Adelaide Hospital

120 Angus Street, Adelaide SA 5000 8227 7027 24 Hours

Royal Darwin Hospital

Rocklands Drive, Tiwi NT 0810 8922 8888 24 Hours

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

Follow up

A follow up appointment will be planned for about 2-3 weeks post operatively.

If you have any concerns after your procedure, 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.