

Flexible Cystoscopy

Reference Number: ULHT-LFT-0206 v9

Issued: October 2023

Review Date: October 2025



Procedure Information

Please read this booklet as soon as possible and well in advance of your appointment. If you do not follow the advice on how to prepare for your procedure it may not be possible to do it and you may have to return on another day.

Please bring this booklet and consent form with you when you attend for your appointment

Helpline or enquiries (8.30am to 4.30pm Monday to Friday)

For appointments and general enquiries

Boston 01205 445913

Boston 01205 445456

Lincoln 01522 707199

For more information please see: www.ulh.nhs.uk

Aim of the leaflet

The aim of this leaflet is to help you make a choice about having a flexible cystoscopy. It describes how a flexible cystoscopy is carried out and explains the benefits and risks of having the investigation.

Introduction

You have been advised by your GP or hospital doctor to have an investigation known as a flexible cystoscopy.

If you are unable to keep your appointment, please notify the department as soon as possible as your appointment may be used for someone else. The booking team will arrange another date and time for you. Please bring this leaflet with you when you attend.

Enclosed with this booklet is a consent form. **Your signature is needed for the test to go ahead.**

The consent form is an important document, please read it carefully together with the information given in this leaflet. Once you have read and understood the information including the possible risks and you agree to have the test please sign and date the consent form. Please bring both copies to your appointment.

If there is anything you do not understand or wish to discuss further, do not sign the form but bring it with you. You can sign it after you have spoken to a nurse or doctor if you are happy to go ahead with the procedure.

Why do I need to have a flexible cystoscopy?

Your doctor may recommend you have a cystoscopy for any one of the following conditions:

- frequent urinary tract infections
- blood in your urine
- loss of bladder control (incontinence) or overactive bladder (going to the toilet very often)
- unusual cells found in urine sample
- need for a bladder catheter
- pain on passing water, longstanding pain in the lower abdomen (pelvis) or cystitis

- urinary blockage such as prostate enlargement
- stone in your urinary tract
- unusual growth or polyp

What is a flexible cystoscopy?

A flexible cystoscopy is a procedure which allows us to look at the urethra (water pipe) and examine the inside of the bladder. This is done by passing a very narrow flexible tube (cystoscope) through the urethra into the bladder. A light and camera at the end of the cystoscope relay pictures onto a television screen.

The procedure is performed by, or under the supervision of, a trained doctor or nurse.

Samples of tissue (biopsies) may be taken during the test. This is done through the scope. It does not cause any pain and the samples are kept to be looked at under a microscope. Photographs may also be taken for your medical records and may be used for teaching purposes.

The procedure usually takes around 5 minutes.

What are the risks of having a flexible cystoscopy?

- Most patients have no trouble after a flexible cystoscopy. A mild burning sensation on passing urine can occur, but usually gets better after a day or so. Drinking extra water can help
- A water infection or water retention (inability to pass water) is an occasional problem following a flexible cystoscopy
- Rarely, injury to the urethra can cause scarring
- Delayed bleeding can happen following a biopsy, requiring removal of clots later

Preparation for the procedure

May I eat and drink?

You may eat and drink as normal. You will be asked to give a sample of urine on arrival at the endoscopy unit. Please arrive with a comfortably full bladder.

May I take my medication?

Your routine medication should be taken as normal.

What if I take blood thinners (anticoagulants)?

Sometimes these medications need to be stopped and if this is the case the person who referred you for the test should have given you clear instructions. If you are unsure please contact your consultant's secretary. For your safety, if the correct instructions are not followed, it may not be possible to do the cystoscopy and you may have to return on another day.

Warfarin: unless you have been advised to stop this medication, continue taking it and have your INR checked within the week before the test. The procedure may be cancelled if your INR has not been checked within the last 7 days. It should be within your target range. If you have been advised to stop your Warfarin you should do so for 5 full days before the procedure and have your INR checked the day before the procedure. It needs to be less than 1.5 for the procedure to go ahead. **Please bring your yellow book to the appointment.**

Dabigatran, Rivaroxaban, Apixaban or Edoxaban: please do not take on the morning of the procedure. If you have been advised to stop taking this medication you should do so for 2 full days before the procedure.

Clopidogrel (Plavix), Prasugrel or Ticagrelor: these medications can generally be continued but if you have been advised to stop you should do so for 5 full days before the procedure.

What happens when I arrive for my procedure?

When you arrive in the department please book in at reception.

A nurse will take you through to the admission room and ask you about your general health to check if you are fit to have the procedure. You will also be asked about your plans for getting home afterwards.

The nurse will make sure you understand the procedure and discuss any further concerns or questions you may have. If you have not already done so and you are happy to go ahead, you will be asked to sign your consent form.

Your blood pressure and heart rate will be checked and you will be asked to remove your lower clothes and put on a hospital gown.

Will I need sedation?

There is no sedation given for a flexible cystoscopy. This procedure is performed using a local anaesthetic gel. You can drive after the test, however, it may be advisable to have someone on standby to take you home as a precautionary measure.

What happens during the procedure?

You will be taken through to the procedure room where you will be able to ask any final questions.

Before the procedure you may be given an antibiotic injection as a precaution to help prevent infection.

You will be made comfortable on the couch in a lying position. The doctor or nurse will instruct you on positioning.

The doctor will then clean the area where the tube is to be inserted. The doctor will insert a local anaesthetic gel. This will sting at first, but quickly settle. The procedure may feel uncomfortable but should not hurt.

The doctor or nurse will gently insert the tip of the cystoscope into your urethra and slowly glide it into the bladder. Relaxing your pelvic muscles will help make this part of the test easier. A sterile liquid (water or saline) will flow through the cystoscope to fill your bladder slowly and to stretch it so that the doctor has a better view of the bladder wall. You may feel some discomfort and the urge to pass water. You will be able to empty your bladder as soon as the examination is over.

What happens after the procedure?

The doctor or nurse will give you the results of the test before you leave the procedure room. You will be taken to the recovery area where you can use the toilet and get dressed. There is usually no need to rest afterwards.

What must I remember?

- If you are unable to keep your appointment please notify the endoscopy booking team **as soon as possible**
- It is our aim for you to be seen as soon as possible after your arrival. However, the department is very busy and your investigation may be delayed

- If emergencies occur, these patients will be seen before less urgent cases
- The hospital cannot accept any responsibility for the loss or damage to personal property during your time on the premises

If you are worried about any symptoms you experience after this test you may ring the helpline numbers on the first page of this leaflet. Out of hours please contact the NHS non-emergency service on 111.

Frequently asked questions

Vending machines in the waiting area?

Unfortunately due to patient starvation for certain procedures this is not possible, however, food and drink facilities are available nearby within the hospital.

Can I have sedation?

Sedation is not routinely offered for flexible cystoscopy.

Can I return to work after the procedure?

You may return to work as soon as you feel fit and able.

What about the risk from COVID-19?

The Trust understands that people have concerns about coming into hospitals during COVID-19 and several measures have been put in place to ensure your safety and minimise risk. If you have any specific concerns please contact the endoscopy department.

Informing us of your concerns – the first step

If you have a concern about the care or treatment you received, or are still receiving, the first step is to bring this to the attention of staff (you can ask to speak to the manager, if necessary) in the department as soon as possible. If you are unable to get the support you need, then contact Patient Advice & Liaison Service.

PALS is a confidential, on-the-spot advice and support service for patients, relatives and carers.

NHS Friends and Family Test

We value your feedback as it helps us to improve our services. The Friends and Family Test (FFT) is a national scheme enabling patients, who use our services, to tell us and other patients what they think about the quality of care they receive.

“Thinking about your recent visit, overall how was your experience of our service?”

At any point during, or shortly after, your time at one of our hospitals or services you will be given the opportunity to answer the following questions:

Overall, how was your experience of our service?

Very Good Good Neither Good nor Poor Poor Very Poor Don't Know

Please can you tell us why you gave your answer?

What happens to the results?

We use your feedback to help us make changes and improvements to our services and the quality of care we provide. Your feedback enables us to take immediate action when a problem is identified and shows how effective the change or improvement has been.

Feedback about our services

‘Care Opinion’ is an independent feedback service that aims to promote honest and meaningful conversations between patients and health services. It believes that telling your story can help make health services better.

Stories relating to United Lincolnshire Hospitals NHS Trust can be found at—
<https://www.patientopinion.org.uk/opinions?nacs=RWD>

We would like to know more about your experience so we know how we are doing. Your experience counts.

United Lincolnshire Hospitals NHS Trust has worked with AccessAble to create detailed Access Guides to facilities, wards and departments at our sites.

www.accessable.co.uk/united-lincolnshire-hospitals-nhs-trust

United Lincolnshire Hospitals NHS Trust endeavours to ensure that the information given here is accurate and impartial.

If you require this information in another language, large print, audio (CD or tape) or braille, please email the Patient Information team at patient.information@ulh.nhs.uk