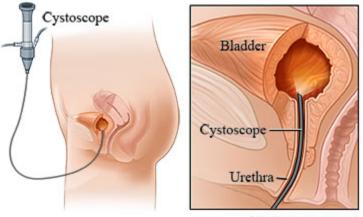


CARE INSTRUCTIONS

Cystoscopy: Before Your Procedure

What is a cystoscopy?



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A cystoscopy is a procedure that lets a doctor look inside the bladder and the urethra. The urethra is the tube that carries urine from the bladder to outside the body. The doctor uses a thin, lighted tube called a cystoscope to look for kidney or bladder stones, tumors, bleeding, or infection.

If the cystoscopy is done in a clinic while you are awake, the doctor or nurse will put numbing gel inside your urethra before the procedure. This will make the procedure more comfortable. The doctor will put the well-lubricated cystoscope into your urethra and move it into your bladder. The doctor will fill your bladder with liquid to see better. This may make you feel pressure in your bladder area for a short time.

If the cystoscopy is done in the hospital, you may get medicine to make you sleep during the procedure. While you are asleep, the doctor can take samples of tissue that can be checked for cancer or other problems. This is called a biopsy. If you have a biopsy, you may have a small amount of blood in your urine for several days after the procedure. You may need to have a tube called a catheter in your bladder to drain urine for several days after the procedure. Your doctor will take the catheter out during your follow-up visit.



Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

What happens before the procedure?

Having a procedure can be stressful. This information will help you understand what you can expect and how to safely prepare for your procedure.

Preparing for the procedure

- Bring a list of questions to ask your doctors. It is important that you understand exactly what procedure is planned, the risks, benefits, and other options before your procedure.
- Tell your doctors ALL the medicines, vitamins, supplements, or herbal remedies you are taking. Keep a list of these with you, and bring this with you to every appointment. You will be told which medicine to take or to stop before your procedure.
- Some medicines, such as aspirin or ibuprofen (Advil, Motrin), and certain vitamins and herbal remedies can increase the risk of bleeding or interact with anesthesia. You may be asked to stop these before the procedure.
- Before your procedure, you may speak with an anesthesia provider to discuss your anesthetic options, including the risks, benefits, and alternatives to each. This may be on the phone or in person.

Taking care of yourself before the procedure

- Build healthy habits into your life. Changes are best made several weeks before the procedure, since your body may react to sudden changes in your habits.
 - Stay as active as you can.
 - Eat a healthy diet.
 - Cut back or quit alcohol and tobacco.
- If you have an advance directive—which may include a living will and a durable power of attorney for health care—let your doctor know. If you do not have one, you may want to prepare one so your doctor and loved ones know your health care wishes. Doctors recommend that everyone prepare these papers before a procedure, regardless of the type of procedure or condition.



What happens on the day of the procedure?

- Follow the instructions exactly about when to stop eating and drinking, or your procedure may be canceled. If your doctor has instructed you to take your medicines on the day of the procedure, please do so using only a sip of water.
- Take a bath or shower before you come in for your procedure. Do not apply lotions, perfumes, deodorants, or nail polish.
- Remove all jewelry, piercings, and contact lenses.
- Leave your valuables at home.

At the hospital or surgery center

- Bring a picture ID.
- A small tube (IV) may be placed in a vein, to give you fluids and medicine to help you relax.
- You will be asked to empty your bladder just before the procedure.
- You will be kept comfortable and safe by your anesthesia provider. The anesthesia may range from making you fully asleep, to simply numbing the area being worked on. This will depend on the procedure you are having, as well as a discussion between your doctor, the anesthesia provider, and you.
- In most cases the cystoscope is in the bladder for less than 10 minutes. But the entire test may take up to 45 minutes or longer.

Going home

- You may need someone to drive you home.
- For your safety, you should not drive until you are no longer taking pain medicines, and you can move and react easily.
- Arrange for extra help at home after the procedure, especially if you live alone or provide care for another person.
- You will be given more specific instructions about recovering from your procedure, including activity and when you may return to work.

When should you call your doctor?

- You have questions or concerns.
- You don't understand how to prepare for your procedure.
- You become ill before the procedure (such as fever, flu, or a cold).



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• You need to reschedule or have changed your mind about having the procedure.

Where can you learn more?

Go to http://www.kp.org

Enter H880 in the search box to learn more about "Cystoscopy: Before Your Procedure".

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