



Fitter Better Sooner

Endorsed by:



Preparing for a cystoscopy

What is a cystoscopy?

A cystoscopy is a procedure in which a thin telescope (called a cystoscope) is used to look inside your bladder. This is inserted through the urethra, the tube that carries urine from the bladder to the outside of the body. The surgeon will see pictures of the inside of the urethra and bladder on a screen. There are two types of cystoscopy:

- **flexible cystoscopy** – a thin (about the width of a drinking straw), bendy cystoscope is used. This can be inserted using a local anaesthetic gel to numb the area
- **rigid cystoscopy** – a slightly wider cystoscope that doesn't bend. Because small surgical instruments can be passed down this, problems in the bladder can be treated at the same time with this procedure.

What type of anaesthetic could I have for a rigid cystoscopy?

There are two main types of anaesthetic given for this type of surgery:

- **general anaesthetic** – anaesthetic drugs which make you unconscious, so that you will feel nothing throughout your operation
- **spinal anaesthetic** – the lower half of your body is numbed by an injection in your lower back.

You may also be offered **sedation** (medicine to relax you).

Your anaesthetist will talk with you about the ways in which you can have your anaesthetic based on your health, age and other medical conditions. Together you can choose the best method for you.

Preparing for a cystoscopy

How long will I be in hospital for?

You should be able to go home the same day.

Before the operation

- Think about what you can do to improve your health before the operation. Stopping smoking, reducing how much alcohol you drink, eating more healthily and keeping active all help you recover more quickly after surgery.
- Ask your GP practice about lifestyle support available to you. You can also find useful advice at [nhs.uk/better-health](https://www.nhs.uk/better-health).
- If you have existing medical conditions (eg diabetes, high blood pressure, chest or heart disease) check with your GP that your medication is up to date and as effective as it can be. This can help prevent delays to your surgery and give you the best chance of your operation and recovery going well.
- It's also important to have good dental hygiene and for your teeth and gums to be in good condition before the surgery, as this will reduce the risk of infection.
- If you are having a general anaesthetic, spinal anaesthetic or sedation for your procedure, you should arrange for an able-bodied adult to take you home and be with you the first night at home after surgery. If you have others you care for, you should arrange appropriate help for them too.
- You should take your normal medication to the hospital with you, in their original packaging. The staff will advise you on how to take it on the day of the operation. Check you have enough medication to last you for a few weeks when you return home.
- Remember to wear any hearing aids and take some spare batteries.
- On the morning of surgery (or the evening before) you should have a bath or shower. You may be given an antiseptic to wash with to help reduce the risk of infection.
- It is normal to feel anxious about an operation. To help you relax before and after your surgery think about bringing some headphones and music with you, or something to read or to do. Think about learning some breathing exercises or relaxation techniques.
- Your stomach needs to be empty during surgery. The hospital will advise you in advance on when to stop drinking and eating on the day of the operation. It's important to drink plenty of water until you are told to stop to help you feel better after surgery and reduce complications.
- Make sure you have some painkillers such as paracetamol available at home. The hospital will talk with you about how best to take these.
- You should consider taking one or two days off work to recover after surgery.



Preparing for a cystoscopy

After the operation

- If you've had a flexible cystoscopy with a local anaesthetic, you should get back to normal fairly quickly.
- If you've had a rigid cystoscopy with a general anaesthetic or sedation, you might feel a bit drowsy or unsteady immediately after surgery.
- If you've had a spinal anaesthetic your legs may feel numb. You will need to wait until your leg movement and strength returns to normal before you go home – this usually takes a couple of hours but can vary.
- It is normal to have a burning or stinging feeling when passing urine for a few days afterwards. You may also feel like you need to go to the toilet more often than usual. Sometimes after a spinal anaesthetic you may need a catheter (soft tube) in your bladder at first.
- It is normal to see a small amount of blood in your urine for a few days and for it to be pinkish in colour.

Recovering at home

- If you've had a general anaesthetic, you may feel tired afterwards for a day or two while your body recovers. It's a good idea to take things easy and not make too many plans for the days after the operation.
- If you are not very active, wear your compression stockings and do gentle leg exercises to reduce your risk of blood clots.
- It's important to drink plenty of fluid (six to eight glasses per day) for a few days.
- If you feel pain or discomfort, you can take painkillers, as instructed by the hospital.
- Most people will need to take one or two days off work. You can self-certify for this, but you can ask the hospital for a fit (sick) note to cover this period.
- If you have had a general anaesthetic or sedation, you should wait at least 24 hours before you drive. You should wait until you feel well and comfortable before driving.

Things to look out for at home

You should contact your GP or the hospital where you had your surgery if:

- the pain is severe or does not stop after a few days
- you continue to pass blood when going to the toilet for longer than a week
- your urine is very bloody or bright red (rather than pinkish)
- you notice clots/lumps of blood in your urine
- you are unable to pass urine
- you notice a bad smell when you pass urine
- you develop a fever/high temperature over 38°C
- you feel sick or vomit
- you develop pain in your lower back or in your side
- you develop pain and swelling in your lower leg or chest pain and breathing difficulty.

Preparing for a cystoscopy

These symptoms may occur if you have developed an infection and may need further treatment, usually with antibiotics.

If you feel very unwell you should go to your nearest emergency department as soon as possible.

Additional resources available online

Royal College of Anaesthetists

- Preparing for surgery: Fitter Better Sooner toolkit and animation (rcoa.ac.uk/fitterbettersooner).
- You and your anaesthetic and Your spinal anaesthetic (rcoa.ac.uk/patientinfo/leaflets-video-resources).
- Caring for someone who has had a general anaesthetic or sedation (rcoa.ac.uk/patientinfo/sedation).
- Risks associated with your anaesthetic (rcoa.ac.uk/patientinfo/risks).
- Patient information series (rcoa.ac.uk/patientinfo/leaflets-video-resources).



Centre for Perioperative Care

- Information for patients (cpoc.org.uk/patients).

NHS Choices

- Cystoscopy (nhs.uk/conditions/cystoscopy).

Tell us what you think

We welcome suggestions to improve this leaflet.

Please complete this short survey at: surveymonkey.co.uk/r/testFBS. Or by scanning this QR code with your mobile:



If you have any general comments, please email them to: patientinformation@rcoa.ac.uk



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This leaflet has been reviewed by the RCoA Patient Information Group (which includes lay members) and by the RCoA Professional Standards Advisory Group.

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