



GHADIALI

General Surgery

P R E S E N T S

Dr. Mufa T. Ghadiali is skilled in all aspects of General Surgery.
His General Surgery Services include:

- General Surgery
- Advanced Laparoscopic Surgery
- Surgical Oncology
- Gastrointestinal Surgery
- Hernia Surgery
- Endoscopy

CYSTOSCOPY and URETEROSCOPY

Multimedia Health Education

Disclaimer

This film is an educational resource only and should not be used to make a decision on **Cystoscopy and Ureteroscopy**. All such decisions must be made in consultation with a physician or licensed healthcare provider.

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MULTIMEDIA HEALTH EDUCATION MANUAL

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Unit 1:

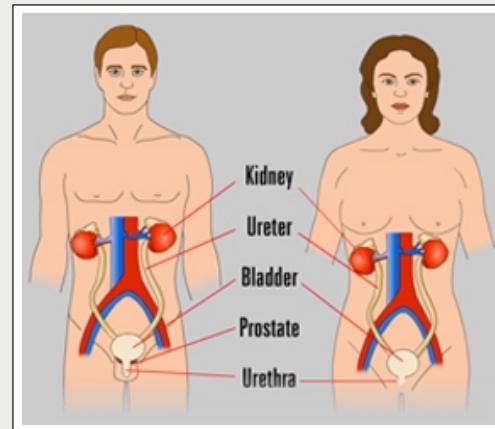
Introduction

What is Cystoscopy?

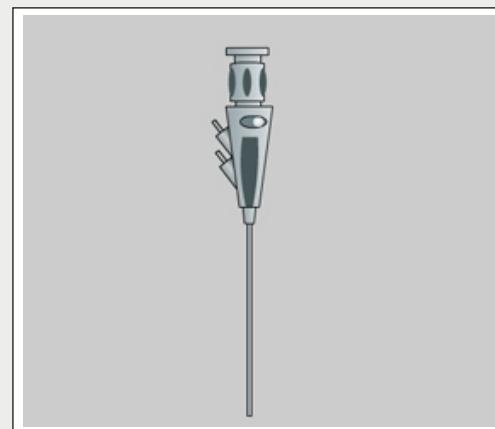
In men, the urethra is the tube that runs through the penis. The doctor performing the examination uses a cystoscope, a long, thin instrument with an eyepiece on one end and a tiny lens and a light on the other end that is inserted into the bladder.

The doctor inserts the cystoscope into the patient's urethra and the small lens magnifies the inner lining of the urethra and bladder allowing the doctor to see inside the hollow bladder. Many cystoscopes have extra channels within the sheath to insert other small instruments that can be used to treat or diagnose urinary problems.

(Refer fig. 1 & 2)



(Fig.1)



(Fig.2)

Unit 1:

Introduction

What is Ureteroscopy?

A ureteroscopy is an examination or procedure using an ureteroscope. An ureteroscope, like a cystoscope, is an instrument for examining the inside of the urinary tract.

An ureteroscope is longer and thinner than a cystoscope and is used to see beyond the bladder into the ureters, the tubes that carry urine from the kidneys to the bladder.

Some ureteroscopes are flexible like a thin, long straw. Others are more rigid and firm. Through the ureteroscope, the doctor can see a stone in the ureter and then remove it with special instruments inserted through an extra channel in the ureteroscope.

Another way to treat a stone through an ureteroscope is to extend a flexible fiber through the scope up to the stone and then, with a laser beam shone through the fiber, break the stone into smaller pieces that can then pass out of the body in the urine. How and what the doctor will do is determined by the location, size, and composition of the stone.

(Refer fig. 3)



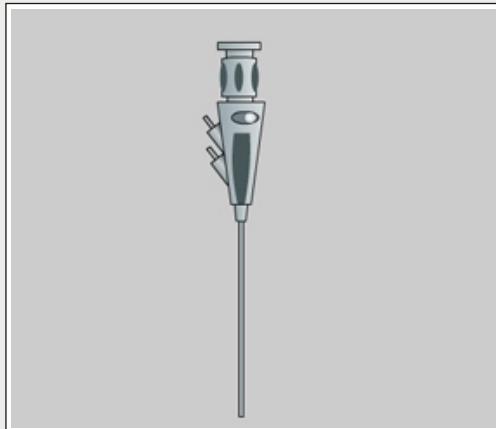
(Fig.3)

Unit 2: Purpose of Cystoscopy and Ureteroscopy

Why is Cystoscopy Performed?

A doctor may perform a cystoscopy to find the cause of many urinary conditions, including:

- Frequent urinary tract infections
- Blood in the urine, called hematuria
- Frequent and urgent need to urinate
- Unusual cells found in a urine sample
- Painful urination, chronic pelvic pain, or interstitial cystitis/painful bladder syndrome
- Urinary blockage caused by prostate enlargement or some other abnormal narrowing of the urinary tract
- Stone in the urinary tract, such as a kidney stone
- Unusual growth, polyp, tumor, or cancer in the urinary tract



(Fig.4)

(Refer fig. 4)

Unit 2: Purpose of Cystoscopy and Ureteroscopy

Why is Ureteroscopy Performed?

The reasons for performing a ureteroscopy include the following conditions:

- Frequent urinary tract infections
- Hematuria (presence of red blood cells in the urine)
- Unusual cells found in a urine sample
- Urinary blockage caused by an abnormal narrowing of the ureter
- A kidney stone in the ureter
- An unusual growth, polyp, tumor, or cancer in the ureter



(Fig.5)

(Refer fig. 5)

Unit 3:

Procedure

How to Prepare

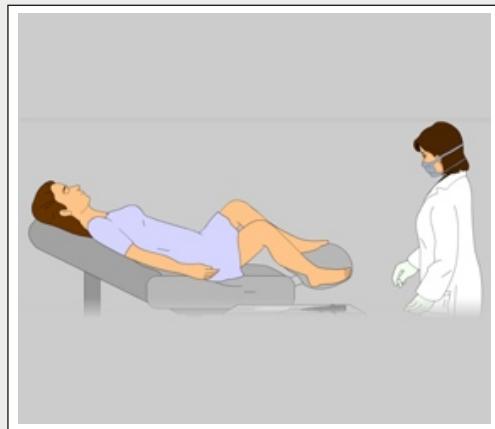
People scheduled for a cystoscopy or ureteroscopy should ask their doctor about any special instructions. In most cases for cystoscopy, people will be able to eat normally in the hours before the test. For ureteroscopy, people may be told not to eat before the test.

Patients may be asked to give a urine sample before the test to check for infection. They should avoid urinating for an hour before this part of the test.

Usually, patients lie on their back with knees raised and apart. A nurse or technician cleans the area around the urethral opening and applies a local anesthetic so the patient will not experience any discomfort during the test.

People having an ureteroscopy may receive a spinal or general anesthetic. They should arrange for a ride home after the test as they will not be allowed to drive themselves home due to the anesthesia.

(Refer fig. 6)



(Fig.6)

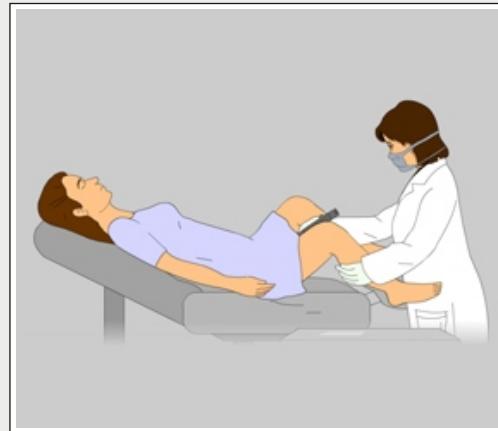
Unit 3:

Procedure

How are the tests Performed?

The doctor gently inserts the tip of the cystoscope or ureteroscope into the urethra and slowly glides it up into the bladder.

A sterile liquid salt water called saline flows through a channel in the scope to slowly fill the bladder and stretch it so the doctor has a better view of the bladder wall.



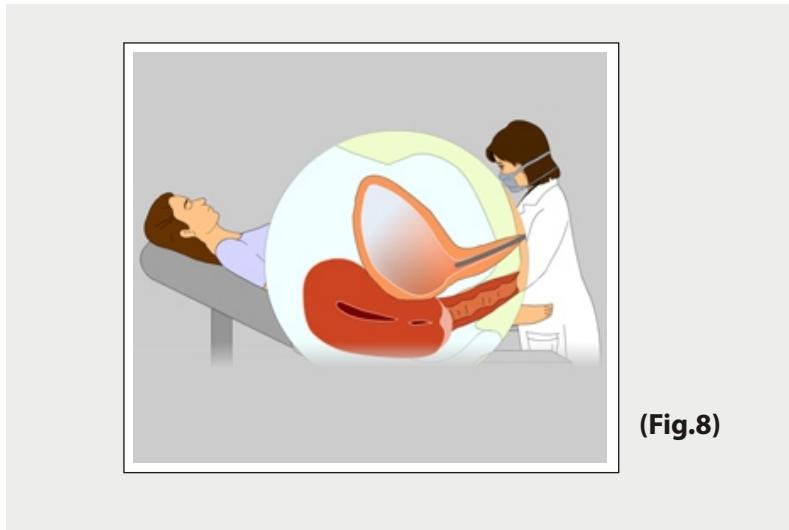
(Fig.7)

As the bladder is filled with liquid, patients feel some discomfort or pressure and the urge to urinate. The doctor may then release some of the fluid, or the patient may empty the bladder as soon as the examination is over.

If your doctor is performing a ureteroscopy the scope is also advanced into the ureter past the bladder.

The time from insertion of the scope to removal may be only a few minutes, or it may be longer if the doctor finds a stone and decides to treat it.

Taking a biopsy, a small tissue sample for examination with a microscope, will also make the procedure last longer. In most cases, the entire examination, including preparation, takes 15 to 30 minutes.



(Fig.8)

(Refer fig. 7 & 8)

Unit 3:

Procedure

What are the Risks?

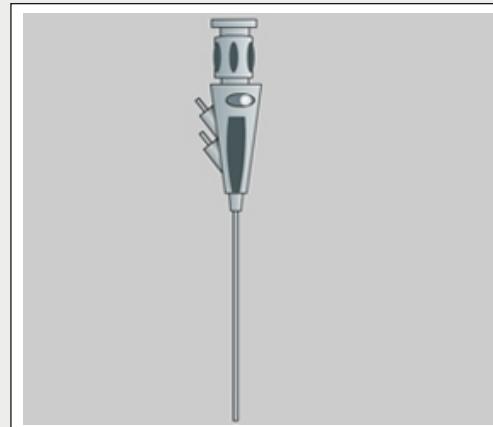
Possible risks of a cystoscopy include:

- Infection
- Bleeding
- Rupture of the bladder wall

(Refer fig. 9 & 10)



(Fig.9)



(Fig.10)

Unit 3:

Disclaimer

Although every effort is made to educate you on **CYSTOSCOPY and URETEROSCOPY** and take control, there will be specific information that will not be discussed. Talk to your doctor or health care provider about any concerns you have about **CYSTOSCOPY and URETEROSCOPY**.



YOUR SURGERY DATE



READ YOUR BOOK AND MATERIAL



VIEW YOUR VIDEO /CD / DVD / WEBSITE



PRE - HABILITATION



ARRANGE FOR BLOOD



MEDICAL CHECK UP



ADVANCE MEDICAL DIRECTIVE



PRE - ADMISSION TESTING



FAMILY SUPPORT REVIEW

Physician's Name : _____

Patient's Name : _____

Physician's Signature: _____

Patient's Signature: _____

Date : _____

Date : _____