Cystoscopy is a procedure that lets your doctor look inside of your urethra and bladder using a special camera, called a cystoscope.

**About Cystoscopy**
Cystoscopy is a short procedure that can be done in the office with little pain. You will often be able to watch the images on the screen while it is being done. It takes about 10 to 20 minutes to set up and 5 minutes to complete the procedure.

These are some of the reasons your urologist or urogynecologist might suggest cystoscopy:
- Bladder control problems such as urinary incontinence or overactive bladder.
- Prior surgery near or involving the bladder.
- Blood in the urine.
- Unusual cells seen under the microscope in your urine sample.
- Frequent urinary tract or bladder infections.
- Pain in the bladder, urethra, or pelvic area.

The risks of cystoscopy are very low. Some women may develop a urinary tract infection afterwards, but this is unusual. Thus, antibiotics are not necessary before cystoscopy. Other risks include mild bleeding, discomfort, or injury to the bladder or urethra.
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Before the Procedure
Often cystoscopy is done as an outpatient procedure in the office. Usually, there are no restrictions on eating or drinking before the test. You can drive yourself to and from your appointment, and even return to work afterward. However, some patients require anesthesia for the test. In this case, you may need to stop eating and drinking six to eight hours before the procedure.

To see if you have a bladder infection, you will most likely need to give a urine sample before the test. Come with a full bladder to your appointment.

Typically, you do not have to stop taking any medicines before the procedure. It is best to discuss the pre-procedure instructions with your doctor’s team to review your medicines and any supplements you are taking.

Your doctor will give you specific directions to prepare for the test. Ask questions if you are unsure.

Learn The Terms

Cystoscopy: A procedure using a camera to look at the inside of the urethra and bladder.

Cystoscope: A thin tube with a small telescopic camera on the end used to visualize the inside of the bladder. There are two types of cystoscopes: Flexible and rigid.

Urethra: Tube from the bladder to the outside of the body that urine passes through during urination.

Urinary incontinence (UI): Any accidental leakage of urine.

Overactive bladder (OAB): Urinary urgency, usually with frequency and nocturia, and sometimes with urinary urgency incontinence. This occurs without an infection or other health problem.
**During the Procedure**

Depending upon your symptoms, the cystoscopy may either be done in the office or in an operating room.

You’ll need to change into a medical gown and lie on the exam table with your knees raised and apart, like a typical gynecologic exam. A sheet will be placed on the lower part of your body. After cleaning the area around your urethra, a numbing jelly (local anesthetic) may be applied to the urethra. Next, the cystoscope will be inserted into your bladder. Either a flexible or rigid cystoscope will be used:

- **Flexible cystoscope**: Telescope that looks like a thin tube, about as thick as a pencil. Since it is made from a flexible material, this type of cystoscope passes easily around the curves of the urethra and bladder.

- **Rigid cystoscope**: Small metal tube containing a telescopc camera. It has side channels that allow the doctor to slide special tools through it if additional procedures are planned. For example, the doctor can take a biopsy of bladder tissue or inject medicines.

Most women find a cystoscopy to be an easy procedure. However, others feel discomfort after the cystoscope is inserted. Relaxing your pelvic floor muscles can help to relieve this sensation. You will likely be able to watch the procedure images on the screen if you’d like.
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To view the bladder wall, the bladder will be filled with water. This part of the test makes some women feel coolness and an urge to urinate. Once the procedure has finished, you’ll be able to empty your bladder.

After the Procedure
After the procedure, you may feel mild burning when you urinate. There may be some small amounts of blood in your urine. This usually lasts for about one day. To help relieve the burning feeling, take a warm bath or apply a warm damp washcloth to your urethra area.

A small number of women develop a urinary tract infection (UTI) after the test. To help avoid getting an UTI, drink extra fluids after the test.

Call your doctor if bleeding or pain lasts more than two days. Also, contact the office if you have signs of an UTI, such as pain when you urinate, smelly or cloudy urine, fever, or chills.

Most women return to their normal activities with a few hours or a day after cystoscopy. If you had general anesthesia, ask your doctor if there are precautions you need to take.

Three Takeaways

1. During a cystoscopy, your doctor examines the inside of the urethra and the bladder using a small camera.

2. Carefully review any special pre-test instructions that you have been given.

3. Potential aftereffects include mild burning when you void and some blood in your urine. These symptoms usually go away within 24 hours.