

 You may see blood in the urine (a light rose colour); this is also common but again, should clear within a few days.

If you experience lots of blood in your urine, or if you are unable to pass urine after the test, you should contact your GP or attend your local Emergency Department.

Are there any alternatives to this procedure?

There are no non-invasive alternatives apart from simple observation without the information that this test might produce.

If you need surgery for incontinence or for your prostate (men only), this test will improve your chances of having a successful outcome.

What do I need to do after I get back home?

We advise you to drink plenty of fluids once you go home. You will be able to resume all your normal activities immediately after the test.

If the symptoms stated above persist after 48 hours, please contact your GP and provide them with a sample of urine, informing them of your recent investigation.

Will I have a follow-up appointment?

You will have a follow-up appointment with your consultant's team normally within 6-8 weeks.

Further information

If you have any concerns or questions about the urodynamic test, please contact the Urology Nurse Practitioners:

Telephone: 01438 284356 or 01438 285112

If we do not answer, please leave a message with your hospital number, name and telephone number and we will endeavour to contact you as soon as possible.

Useful contact details

NHS 111 - You should use the NHS 111 service if you urgently need medical help or advice but it's not a life-threatening situation. For less urgent health needs, contact your GP or local pharmacist in the usual way.

Patient Advice and Liaison Service (PALS):

Telephone: 01438 285811

www.enherts-tr.nhs.uk

You can request this information in a different format or another language.

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Patient Information

Urodynamic Test

Urology Department



What is Urodynamics?

It is a test on the bladder to show what happens to the bladder during its filling and emptying phases. The test takes approximately 30-60 minutes and will be performed by a nurse practitioner.

The test will try and recreate the symptoms you are experiencing and enable us to diagnose the problem and offer you a treatment plan. In about 10-15% of patients we do not get a complete answer and further tests may be required.

How can I prepare for the test?

If you are taking any medication for your bladder you must stop them 7 days prior to the test. For example: Oxybutinin, Solifenacin, Tolterodine, Toviaz, Trospium, Mirabegron.

If you are unsure of which medicines to stop, please phone the department. Failure to stop these medicines will result in the test being cancelled as they will mask the problem we are trying to identify. However, you must continue your other medication.

Please be sure to inform the specialist nurse before the test if you have any of the following:

- An artificial heart valve
- A coronary artery stent
- A heart pacemaker or defibrillator
- An artificial joint
- An artificial blood vessel graft
- A neurosurgical shunt
- Any other implanted foreign body
- A previous or current MRSA infection
- You are taking medication to thin your blood, such as warfarin or clopidogrel (Plavix)

What should I do before my test?

Please complete the enclosed bladder diary over a three day period, recording your fluid intake and output.

Female patients also need to complete a questionnaire about urinary incontinence (ICIQ UI).

Male patients need to complete a questionnaire about the impact of your urinary symptoms on quality of life (IPSS).

You can eat and drink normally on the day of the test. It is also important that you are not constipated as this can affect the results. If you are constipated, please take some laxatives (available from your pharmacy).

If you suspect you have a urine infection prior to the test, please contact your GP to consider antibiotic treatment to enable the test to be performed.

Please bring a sterile urine sample with you for testing.

Try to arrive at the department with a comfortably full bladder. If you have problems holding on with a full bladder, please let the nurse know and you can be directed to the correct room.

If there is any infection in your urine we will not be able to perform the test. We will prescribe antibiotics and rebook.

What happens during the test?

The nurse practitioner will explain the procedure, and ask you to undress and put on a hospital gown. You will then be asked to pass urine into a flow rate machine. You be required to lie on a couch while we pass two fine tubes into the bladder via your urethra (water pipe) and another in to the rectum (back passage).

These tubes are then connected to a machine which measures the bladder and abdominal pressures. Your bladder is then slowly filled with sterile saline (salty water). During filling we will ask you questions about how your bladder feels.

There is a possibility we will ask you to perform some exercises to recreate situations that cause your symptoms i.e. jumping, coughing and bending over. After which you will be asked to pass urine again in the flow rate machine.

Will I feel any pain?

You may feel a little discomfort / stinging when we insert the tubes; we use an anaesthetic gel to numb the area prior to insertion. You may also experience some discomfort when we are filling the bladder.

What happens immediately after the procedure?

When the procedure has been completed you will be able to get dressed. The results will be analysed and a report written. You will be sent an appointment to discuss these results in clinic with your consultant or a member of their team.

Make sure you drink plenty of fluids for the next 24-48 hours to minimise the risk of infection.

Are there any risks associated with the test?

- After having the Urodynamic Test there is a small possibility that you may develop a urinary tract infection (UTI). This is caused by the insertion of the catheter.
- You may also experience discomfort when passing urine the first few times after the test, this should settle down within 24 - 48 hours.