Haematuria clinic

Exceptional healthcare, personally delivered
Information about the One-Stop Haematuria Clinic

The One-Stop Clinic

Your doctor has referred you to this clinic because you have either seen blood in your urine or it has been found when tested (this is also known as haematuria). Please tell us if you think you may be pregnant.

Why do I need to attend the clinic?

Blood in the urine may be caused by problems in the bladder, kidneys or the urethra (water outlet passage). There are many explanations for passing blood in the urine and we know that the risk of serious disease is not greater than 1 in 5. However, it is important that this is investigated to determine where the blood is coming from and what has caused it so that we can then treat the problem. This clinic allows a range of investigations to be carried out on just one visit in order to identify any such problems.

What will happen in the Urology department?

A nurse will ask you for a fresh specimen of urine (to look for infection), and measure your blood pressure. An ultrasound scan will be performed. You will than have a consultation with a doctor, including history taking and a physical examination as appropriate.

Finally you will possibly have a flexible cystoscopy, which involves passing a small telescope along the urethra to the bladder. This allows us to look inside your bladder. Before you have this investigation, you will be asked to give your consent. Any questions that you have will be answered at this time.
How is a flexible cystoscopy performed?

You will be asked to undress and put on a hospital gown. You will be asked to lie on a couch in the examination room. Your genital area will be cleaned with a mild disinfectant, and a pain killing jelly will be applied to the urethra and given a few minutes to work. The jelly also allows the telescope to pass through the urethra more easily. Before the examination you will be covered with towels – try not to touch these with your hands.

Gentlemen may be asked to cough to enable it to pass through the sphincter. The lights may also be dimmed to give the doctor a better view. You may experience some discomfort but it will not last long.

There are folds in the lining of the bladder: therefore saline (salt water) is run into the bladder through the cystoscope to stretch these folds and enable the doctor to see all of the lining. You may therefore have the feeling of a full bladder or want to pass urine, which is a normal sensation. If this or anything else becomes painful, please tell the doctor. In some instances it is necessary to take a small sample of tissue for examination under the microscope (a biopsy).

The investigation takes approximately 5 to 10 minutes and at the end you will be asked to empty your bladder again. It is usual for a nurse to stay with you throughout the examination.

Please do not hesitate to ask any questions. We will make the procedure as comfortable as possible for you.

Please be advised that your appointment may take up to 4 hours, as there may be varying periods of waiting between the different investigations. You will also be given a lot of information during your visit. It is not always easy to remember everything that the doctor has said - it is therefore a good idea to bring somebody like a family member or close friend with you.
What preparation is required?

There is no special preparation for the Urology appointment. However, for the ultrasound scan, you need to have a full bladder. The scan will normally be done after your cystoscopy, so please try not to empty your bladder after your cystoscopy. For both, you may eat normally and you may drive before and after the clinic if you wish. There is no need to rest afterwards.

You will have an ultrasound scan of your abdomen, when a warm gel will be placed over the area to be examined. This will cause you no pain. A probe will then be passed over the area. Ultrasound uses sound waves to ‘see’ inside the body, in an attempt to identify any abnormalities.

After the flexible cystoscopy

Most people have no trouble after a flexible cystoscopy. However:

- Drinking extra fluids is advisable.
- You may see blood in your urine for a couple of days – please do not be alarmed, this is not unusual!
- Mild burning on passing water and some increased frequency in passing water may occur, but usually subsides within 48 hours.
- You may be given some antibiotics, which you should take as prescribed.

If you have a temperature, pain, persistent burning or bleeding, please do not hesitate to contact the team or your GP.
What next?
This depends upon the results of the investigations performed during the day. The results will allow the specialist to advise you about any necessary further treatment, tests or appointments. These will be discussed with you before you leave the clinic, which is why it is useful to have someone you know with you. You will then be free to go home.

What happens next?
Following your attendance at the Haematuria Clinic, if a problem area in your bladder has been identified requiring further investigation you will be notified of any treatment plan.

We plan for you to have an operation to remove any suspicious areas from the inside of your bladder or to take samples (biopsies) to identify what they are.

If you require surgery you will receive a letter confirming the date of your operation and other instructions regarding your admission. You will be invited to attend a pre-operative assessment clinic before your operation date.

If you are taking more than 75mg of ASPIRIN per day this must be reduced to 75mg 5 DAYS before your operation.

Stop taking your WARFARIN tablets 3 DAYS before your operation.

Stop taking your CLOPIDOGREL tablets 10 DAYS before your operation.

If your operation is postponed, please recommence your aspirin, warfarin or clopidogrel. You will need to stop your tablets again prior to your new operation date.
Uro-Oncology Specialist Nurse

The service

This specialist service has been established to provide an information and support service for men and women with a urological cancer and also for their families/carers.

The nurse works as part of a team of healthcare professionals providing support and information from the time of diagnosis (or time of referral) onwards throughout their treatment plan. The role provides continuity of care by being the link and point of contact between hospital and home for patients, relatives and healthcare professionals.

What is offered:

- Nurse led clinics for diagnosis and follow up.
- Information about treatment options for urological cancers.
- Where to go for further help.
- Facilitation of referrals to Oncologists and other specialist teams.
- Liaison with support services in the community.
- Support and information for families/carers.
- Help with physical problems.
- A listening ear.
Referrals

Patients and relatives may contact the nurse direct. She will liaise with their Consultant and/or their GP for further information. Healthcare professionals in the hospital and the community may refer a patient with a urological cancer.

NHS Constitution. Information on your rights and responsibilities. Available at www.nhs.uk/aboutnhs/constitution
If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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