

Procedure preparation

Urodynamics:

Prior to your appointment, you will be mailed a questionnaire to complete regarding your bladder function, please bring this with you to the appointment.

At the beginning of the test, you will be asked to urinate, please arrive for the study with a relatively full bladder. You may eat or drink anything prior to the study. Take your medications as normally scheduled, unless otherwise directed by your doctor.

The tests typically take about two hours and are generally painless, so anesthesia is not necessary. You will be able to resume all previous activities, including driving, at the completion of the study.

You should arrive 20 minutes prior to your scheduled appointment.

If you have any additional questions please call your physician's office.

Your procedure

Appointment:

Date of study:

Time of study:

Location:

For more information
Please Contact:

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MKT-UDS-BRU-01-V01-EN-US-PRC 024757

PATIENT GUIDE

Urodynamics



What is Urodynamics?

Urodynamics refers to a series of diagnostic tests that evaluate the function of the bladder and urethra. These tests may be recommended if you have urinary incontinence (leakage of urine), recurrent bladder infections, slow or weak urinary stream, incomplete bladder emptying or frequent urination. The tests provide important information in order for your physician to accurately diagnose and treat your bladder problems appropriately.

What happens during Urodynamics?

A catheter (soft, hollow tube) or special sensor will be carefully placed in your urethra and sometimes your rectum to perform the study. Your physician will decide which of the following tests need to be performed to help diagnose and treat your condition.

Uroflowmetry:

Measures the speed and amount of urine you void. You should come to the test feeling as though you need to urinate. Try not to empty your bladder one hour before your test. You will be asked to urinate into a commode with a funnel attached to a computer that measures your urine flow.

Cystometrogram Study:

Evaluates how your bladder holds urine, measures your bladder capacity and also determines how well you can control your bladder. Your bladder is filled with fluid using a catheter. In order to reproduce bladder symptoms, you should report any sensations you feel during the study. In addition, you may be asked to cough, bear down, stand or walk in place during the test. At the end of the study, you will be asked to urinate.



Figure 1: Urodynamics Sensation Scale

Pressure Flow Study:

This study determines if there is an obstruction. After your bladder is filled using a catheter, you will be asked to urinate as you normally would. The study simultaneously records the bladder pressure and urine flow rate.

Pelvic Floor Therapy:

Non-surgical therapy used to treat incontinence. A nurse will educate and instruct you on proper isolation and exercise of your pelvic floor muscles for bladder control. Using biofeedback technology, a computer recorder monitors your progress and pelvic muscle strength. Typically, this therapy consists of weekly sessions for six weeks. The first session will last about one hour while the remaining sessions will last less than an hour.

Video Urodynamics:

A combination of the above tests with the addition of video. The doctor will explain each step of the process. Your bladder will be filled with contrast fluid then the doctor will take X-ray video pictures to see your bladder in motion during filling and emptying. After the procedure, the doctor will discuss the study results with you. A detailed report will be sent to your physician including a summary of results, diagnosis and suggestions for treatment. After reviewing the report, your doctor will talk to you about the findings and your options for treatment.

EMG:

Measures how well you can control your sphincter (outlet) muscles and determines if they are working in coordination with your bladder.