



**The Leeds
Teaching Hospitals**
NHS Trust

Coming to the haematuria clinic

Information for patients

You have been referred to the Urology Department by your GP because you have been found to have some blood in your urine (haematuria).

This may have been blood that you were able to see (visible), or it may have been found on a urine test (non visible).

This leaflet will explain what to expect when you come for your appointment. You will be in the department for between 1 and 3 hours.

What are the causes of haematuria

There are a variety of causes of haematuria and many patients will have no cause identified. Causes of haematuria may range from infections or stones in the kidney, bladder and prostate, inflammation of the kidneys, trauma, enlarged prostate gland and cancer.

The haematuria clinic allows us to do a range of investigations in order to identify any such problems.

What will happen at my appointment?

Please bring a fresh sample of urine to your appointment - you should be able to obtain a white topped sample bottle from your GP, this is so that we can test for any infection

You will need to attend the Day Unit for a ***flexible cystoscopy*** which involves the doctor or nurse cystoscopist passing a small flexible tube containing a camera and light (cystoscope) through the water pipe (urethra) and into the bladder. A local anaesthetic gel is applied before the camera is inserted. This allows the specialist to examine the inside of the bladder to determine where the blood is coming from. Further information can be found in the '***flexible cystoscopy***' leaflet enclosed.

As part of your appointment you will attend for a scan of your kidneys and bladder (this may be a CT scan or an ultrasound scan). This will be done in the radiology department and your bladder will need to be full.

You may or may not have a scan before your cystoscopy - when you arrive at the department you will be told which procedure is happening first.

What happens next?

Before your Flexible Cystoscopy you will be seen by a nurse who will do a dipstick of your urine to ensure that there is no infection. You will need to change into a gown

A medical history will be taken by a nurse cystoscopist or doctor.

It is important that you bring with you a list of your regular medicines.

The doctor or nurse may wish to examine you and the nature of this will be explained to you during the consultation.

Why do I need a cystoscopy as well as a scan ?

A scan may give some information about the cause of the symptoms however some abnormalities with the bladder lining can only be seen through a cystoscope .

The nurse or doctor will explain the risks and benefits to you and you will be asked to sign a consent form , however you can still change your mind at any point , it is your decision to go ahead with the procedure or not .

What happens next?

This depends upon the results of the investigations (tests) performed during the day.

The doctor or nurse cystoscopist will explain any findings from the flexible cystoscopy and results of any scans that have been performed. The results will allow the specialist to advise you about any further treatment, tests, operations or appointments required and there will be an opportunity to ask questions and discuss on-going management.

It is useful to have a relative or close friend with you to support you. After this you are free to go home.

Who can I contact for more information?

Melissa Shireby Kristel Champbell Zoe Gardham	Nurse Cystoscopists, St. James's University Hospital Tel: (0113) 206 6240
Urology Admin:	0113 206 6094 - Monday to Friday

Patient and Liaison service PALS

Tel: **(0113) 206 6261** - Available during normal working hours only.

Tel: **(0113) 206 7168** - Available outside normal working hours, please leave a voice message.

E mail: patientexperience.leedsth@nhs.net

References

British Association of Urological Surgeons (BAUS)

www.baus.org.uk

NHS Choices

www.nhs.uk

What did you think of your care? Visit bit.ly/nhsleedsfft
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