Urodynamics - A test to find the cause of bladder problems

What is a urodynamic study?

A urodynamic study is used to find out how your bladder is working by measuring your bladder's ability to store and pass urine. The test may show the cause of symptoms such as incontinence, urgency or difficulty emptying your bladder. The results will help your doctor decide on the best treatment options for you. The appointment will last approximately one hour; the test itself usually takes a maximum of 40 minutes. You will be able to continue your day as normal afterwards.

One week before the clinic appointment:

- Medicines

STOP taking any tablets that you have been given for your **bladder** symptoms **one week before your appointment** unless your doctor has told you otherwise. These medications may include:

- Oxybutynin
- Solifenacin
- **Do a mid-stream urine sample at any Awanui Labs (formerly Labtests)** The week prior to your appointment, please go to any Awanui Labs and provide a urine sample to be tested for infection. This test is ordered electronically for you, so you do not need a form; just provide your name to the staff at whichever Awanui Labs suits you.
- **Bladder diary** Please complete a bladder diary. It helps us to know how often you pass urine and the amounts that your bladder can hold. If you leak, we would also like to know how often this happens and why. **Bring the chart to your appointment**.
- The Clinical Nurse Specialist will call you to answer any questions you may have

What happens at your appointment?

Please arrive to your appointment with a **comfortably full bladder**. If this is difficult because of your symptoms, you are welcome to arrive earlier than your appointment time. You can then drink some water in the waiting area. If you feel that you cannot 'hold on' when you arrive, please ask the receptionist to tell one of the clinic nurses.

Once collected from the waiting room by the nurse, you will meet with the doctor. You will firstly be asked about your health and current bladder symptoms. After this you will be asked to pass urine into a special toilet called a flow meter. This measures how much urine you pass and how quickly.

We will ask you to change into a gown, removing your clothing from the waist down. Once lying down, the doctor will insert a thin, flexible tube into the bladder and another into the back passage (rectum). This may be momentarily uncomfortable as the catheters are passed. The tube in your bladder allows us to fill your bladder with sterile fluid whilst also measuring the pressure inside your bladder. The tube in your back passage allows us to measure the pressure in your abdomen whilst your bladder is filling. The measurements are sent to a computer and you will be able to see what is happening, if you wish.

As your bladder is filled with the sterile fluid, we will ask you questions about how your bladder is feeling. To find out how well your bladder behaves during certain activities, we may ask you to cough, bear down or walk on the spot, to check for leakage of urine. Finally, you will be asked to empty your bladder again into the special toilet. The tubes will then be removed.

After the test, the doctor will discuss the results with you, make treatment recommendations where appropriate and answer any questions you might have.

Bladder Diary

To enable a complete assessment of your current symptoms, it is important for the Urogynaecology team to gain a thorough understanding of how your bladder is currently functioning. Therefore, it would be appreciated if you could complete the following **bladder diary for 48-72 hours.**

- Instructions:
- Try to choose two or three days where you feel that you would most easily be able to complete the diary.
- Aim to start when you first wake up on the first day and continue for 48-72 hours.
- Each time you go to the toilet to pass urine please complete the bladder diary as described below:
- Bladder function section:
- 1. Time e.g. 9.30am

2. Rate how strong your urge to pass urine was from 0 - 4

- 0 = No feeling of urine in the bladder at all
- 1 = Feeling of some urine but no desire to pass urine
- 2 = Mild to moderate desire to pass urine
- 3 = Strong desire to pass urine
- 4 = Urgent desire to pass urine

3. Did you leak?

- No
- Yes small amount (S/A)
- Yes moderate amount (M/A)
- Yes large amount (L/A)

4. Why did you leak?

- U = Did not get to the toilet in time
- S = Cough, sneeze, movement or exercise
- O = Other/unsure

5. Volume of urine passed

- **Measure the amount of urine in mls.** We recommend that you use an old container such as an ice cream tub and place this in the bowel of the toilet to collect your urine. This ensures that you can sit down on the toilet as you normally would. You can then pour the urine into a measuring jug and write down the amount in mls.
- Fluid intake section:

1. Time:

- e.g. 9.45 am, 3.30pm
- 2. Type: e.g. coffee, water, juice, tea
- Amount: e.g. 200 mls

e.g. could delay indefinitely

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- e.g. could delay 1 hour
- e.g. could delay 30 minutes
- e.g. couldn't delay > 15 minutes
- e.g. unable to delay 5 minutes
- e.g. a few drops, 20c piece
- e.g. underwear quite damp
- e.g. wet outer clothing

Day 1

Date _____ (dd/mm/yyyy) Time woke up _____ Time went to sleep

BLADDER FUNCTION] [FLUID INATKE		
Time (24 hour)	Urge (0-4)	Did you leak?	Why did you	Urine Volume (mls)		Time (24 hour)	Туре	Volume (mls)
			leak?					

Day 2

Date _____ (dd/mm/yyyy) Time woke up _____ Time went to sleep

BLADDER FUNCTION							
Time (24 hour)	Urge (0-4)	Did you leak?	Why did you leak?	Urine Volume (mls)			

FLUID INATKE							
Time	Туре	Volume					
(24 hour)		(mls)					

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Day 3 Date _____(dd/mm/yyyy) Time woke up _____ Time went to sleep

BLADDER FUNCTION					FLUID INTAKE			
Time (24 hour)	Urge (0-4)	Did you leak?	Why did you leak?	Urine Volume (mls)	ł	Fime (24 nour)	Туре	Volume (mls)