



Naval Medical Center Portsmouth
Urology Clinic
757-953-2341/2342

URODYNAMICS PATIENT INFORMATION SHEET

INDICATIONS AND TECHNIQUE: Urodynamic studies enable your Urologist to determine if your bladder is able to store and empty urine properly. Special catheters are inserted to measure bladder or urethral pressure with filling and voiding. The various Urodynamic studies are as follows:

Flow Rate with or without Post Void Residual (PVR): This study determines the velocity of urine flow. **A FULL BLADDER WILL BE REQUIRED TO PERFORM THE STUDY SO DO NOT VOID JUST PRIOR TO YOUR ARRIVAL AT THE UROLOGY CLINIC.** If requested by your Urologist, a small catheter can be sterilely inserted into the bladder to determine whether you bladder has emptied completely (PVR).

Cystometrogram (CMG): This is a test to determine if your bladder fills properly. A special small catheter tube is inserted into your bladder through the urethra. A small catheter may be inserted into your rectum to measure abdominal pressure which can sometimes obscure the measurement of true bladder pressure. The bladder is filled at a slow rate and bladder pressure is measured. You will be asked to describe your first sensation of urine in your bladder, the first urge to void, a full bladder, etc. When full, you will be asked to void and voiding pressure will be measured.

Urethral Pressure Profile (UPP): This study measures the pressures at various points through the urine channel and is useful to diagnose the point of bladder outlet obstruction. A special pressure sensing catheter is placed into the bladder and the pressure is recorded. The catheter is slowly withdrawn and pressure recordings are taken from the bladder neck, prostate and the remainder of the urethra.

Pressure/Flow Study: This study combines a CMG with a flow rate and can help pinpoint whether abnormal voiding is because the bladder cannot generate enough pressure, the prostate is obstructing the flow of urine or a combination of both. A small catheter is inserted into the rectum to measure abdominal pressure. A small catheter containing a very small special pressure sensing catheter is inserted into the bladder through the urethra and the bladder is filled. Pressure is recorded. When the bladder is full, you are asked to void and the pressure of voiding as well as the urine velocity are measured.

RISKS/COMPLICATIONS/SIDE EFFECTS: Urodynamics are well tolerated and have very few risks. Occasionally patients report a mild burning sensation when the catheter is inserted which may persist for a few voids following its removal. Very rarely, a urine infection may develop from Catheterization which would require treatment with an antibiotic.



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WHEN TO NOTIFY YOUR UROLOGIST:

Notify your Urologist if:

- *discomfort on urination persists more than 48 hours after the procedure.
- *fever greater than 101 degrees Fahrenheit develop.

Every effort is made to return calls as promptly as possible; however, your Urologist may not be able to speak with you at the moment you call. Please leave a phone number where you may be reached both during the day and after normal working hours to assist us in returning your call that day. If you really feel your problem is an EMERGENCY, state this to the person who takes your call, call 911, or report directly to the Emergency Room.