

Cystoscopy, uroflow and uroflow: office urology tests explained

Cystoscopy sees anatomy, uroflow measures the stream, a post-void residual measures urine left behind, and urodynamics measures storage and emptying pressures. Each should be chosen for a specific purpose, with a clear explanation beforehand of what it will feel like and how the result could change your treatment.

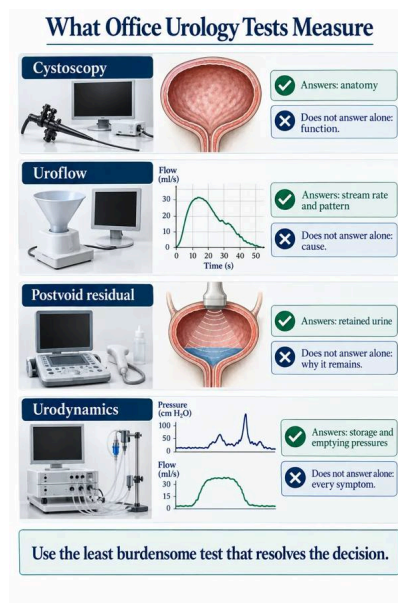


Figure 47.1. What Office Urology Tests Measure. Cystoscopy sees anatomy; uroflow measures the stream; post-void residual measures retained urine; urodynamics measures storage and emptying pressures. The plotted traces are schematic examples, not diagnostic cutoffs or recordings from a patient.

Key points

- Cystoscopy shows the urethra, prostate channel and bladder lining, but cannot measure bladder pressure.
- Uroflow depends on voiding an adequate volume; a low flow with a small void may be uninterpretable rather than abnormal.
- A post-void residual varies naturally and shows what remains, not why.
- Urodynamics helps when the diagnosis is uncertain, neurologic disease is present, treatment has failed or a major decision depends on it.
- Many straightforward urinary problems do not need advanced testing at first.
- Do not stop anticoagulants or other medications before a test without specific instructions.

Get prompt care if you notice

- Fever after a test
- Inability to urinate
- Heavy bleeding
- Feeling much worse after the test

Questions to ask your urologist

- What question will this test answer, and which result would change my treatment?
- What will the test feel like, and how long will it take?
- How should I prepare, and should I change any of my medications beforehand?
- What discomfort is expected afterward, and which symptoms mean I should call or seek urgent care?
- If the result is normal, what will we do next?

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