

## Flexible Cystoscopy and removal of Ureteric Stent

### What is flexible cystoscopy and removal of ureteric stent?

You have had a stent placed within a ureter (tube connecting the kidney to the bladder) to allow urine to drain freely at a time when there was a blockage (often a stone). Once the blockage has cleared the stent will be removed. This is done using a flexible cystoscope (fine telescope) which is passed through the urethra (water pipe) into the bladder.

A flexible cystoscopy is usually a quick procedure lasting approximately one to two minutes. Very often the patient is able to view the same images the practitioner sees via a screen. You may be given intravenous or oral antibiotics at the time of the procedure.

On arrival you will either be seen by a nurse who will ask you for a brief medical history including any allergies or this information will be collected by the clinician doing the procedure. You may go to radiology for an X-ray prior to the stent removal.

It is not necessary to change into a hospital gown for the procedure, but you may do so if you prefer. Each patient is prepared with a wash of the urethral opening. A local anaesthetic gel is passed into the urethra, and this also acts as a lubricant.

The flexible cystoscope is inserted into the bladder via the urethra. During the procedure sterile water is passed via the cystoscope into the bladder. This process fills the bladder allowing the clinician to view the entire bladder and locate the stent.

The stent is removed by passing a fine instrument through the cystoscope, this takes hold of the stent which is withdrawn when the cystoscope is removed. This can cause mild discomfort, but it usually goes once the stent is removed. You may experience the sensation of having a full bladder; you can use a toilet immediately the procedure is completed.

### What are the alternatives?

The procedure can be performed in theatre under general anaesthetic in exceptional circumstances.

### What are the potential risks and side effects?

You may experience discomfort at the time of the procedure, lasting up to 72 hours. If so, you should take your normal pain relief, e.g. Paracetamol.

You may notice blood in your urine for the first 24 hours. You need to drink plenty of fluids on the day of the procedure i.e. at least three to four extra glasses of water.

There is a slight risk of developing an infection. If within 48 hours, you experience:

- Pain in the kidney area.
- High temperature.
- Generalised aches and shivers.

**You must contact the urology doctor-on-call via the hospital switchboard as you may require intravenous antibiotic therapy.**

#### Contact:

Conquest Hospital – Tel: 0300 131 4500

Eastbourne DGH – Tel: 0300 131 4500

## What should I do before I come into hospital?

You can eat and drink as normal.

## Will I have an anaesthetic?

Local anaesthetic gel is used. It is passed into the urethra via a syringe and so no needles are required.

## How will I feel afterwards?

There may be slight discomfort, so please take your normal pain relief. Reminder - if you feel unwell within 48 hours you must contact the urology doctor-on-call (see above).

## How long will I be in hospital?

You should expect to be at the hospital for about an hour for cystoscopy and stent removal only. If you have been requested to have an x-ray prior to the cystoscopy and stent removal, you will need to allow longer.

## What should I do when I go home?

Drink additional fluids, at least three to four cups of water that day.

## How soon will I be able to resume normal activities?

As soon as you feel ready to.

## Will I have to come back to hospital?

You may be discharged at this time or if necessary, the practitioner will arrange a follow up outpatient appointment.

## When can I return to work?

You can usually resume work the same day.

## Sources of information

If you require further information, please contact a member of the nursing team

Urology Investigation Suite – Conquest Hospital - Tel: 0300 131 4500 Ext: 8468 or 8344  
Urology Investigation Suite – Eastbourne DGH - Tel: 0300 131 4500 Ext: 770640

## Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

## Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or [esh-tr.patientexperience@nhs.net](mailto:esh-tr.patientexperience@nhs.net).

## Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

## Other formats

If you require any of our leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department on 0300 131 4434 or [esh-tr.AccessibleInformation@nhs.net](mailto:esh-tr.AccessibleInformation@nhs.net)

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

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## Reference

The following clinicians have been consulted and agreed this patient information:

Rebecca Rushton: Specialist Urology Diagnostic Nurse

Simon Tyler-Murphy: Lead Nurse Urology and Acute Continence Service

The directorate group that has agreed this patient information leaflet:

Diagnostic, Anaesthetic and Surgery - Urology

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