

PROCEDURE EDUCATION LITERATURE

Uroflowtometry “Bladder Flow Test”

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VUA literature is designed to educate and empower our patients to participate in their healthcare. We hope that you will read this set of information so that you can be more informed about the procedure that you are going to undergo. Please, if you still have any further questions or concerns, do not hesitate to contact the physician to ensure everything is thoroughly explained.

INTRODUCTION

Uroflowtometry is an office-based procedure that uses a computerized device that can get flow measurements during urination. After the urination, a bladder ultrasound will be done to see how much is left in your bladder after you urinate. This will help us to determine if you have an obstruction, and if your bladder can squeeze properly to evacuate the urine.

THE PROCEDURE

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| Diet | There is no need to fast or not eat. We recommend eating a light meal the morning of the procedure |
| Position | You will be lying on your back after urination into the computerized machine |
| Preparation | Please come “prepared to urinate” but do not “overdrink.” What we suggest is that you drink about 16 oz of fluid before you leave, then get a large drink at a convenience store and come into the waiting room and drink a bit more. All that is required is for you to urinate, but do not overdistend your bladder. We may not be on time with your appointment (as other patients cannot urinate, etc.) and we do not want you to be overdistended, having to hold your urination in severe discomfort. |
| Duration | It will take about 10 minutes or sometimes more if the catheters become displaced |
| Results | You will meet with your doctor at the next scheduled follow up |
| Pain | There is usually no pain with the procedure |
| Catheter | If we determine during the test that you have an obstruction or you bladder cannot squeeze adequately to get the urine evacuated, you may need to go home with a urine catheter (a tube that drains your bladder). It is necessary to drain your bladder if you have a very high residual volume of urine after urination. We do this to prevent infection, retention (when you cannot go at all and it becomes painful), and to protect your kidneys. This is usually temporary but depending on the reason why you need this, you may need to keep the tube until a definitive treatment plan is created. Please consult your doctor at the next visit if this is done. |

AFTER THE PROCEDURE

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|----------------|---|
| Diet | Please drink a lot of fluids |
| Color of urine | Your urine color should not change. |
| Pain | You should feel no changes |
| Results | You will meet with your doctor at the next scheduled follow up |
| At home | If you have any of these symptoms, go back to the ER: fever above 101F, inability to urinate, passing blood clots, severe nausea, vomiting, severe abdominal pain, flank pain, leg swelling, chest pain, shortness of breath. |