

Urodynamic Testing

Why Do Urodynamic Testing?

To evaluate abnormal bladder functioning or to determine how the bladder may function after treatment of pelvic organ prolapse.

How Is It Done?

This procedure takes from 30 to 45 minutes. Small pressure catheters will be inserted into the vagina and the urethra. As your bladder is filled slowly with sterile water, you will be asked questions and instructed to cough, bear down, etc. Once your bladder is full, urethral pressures will be recorded. At the end of the test, you will empty your bladder with the catheters in place. Test results will be reviewed by your physician and discussed with you at your final or surgical consult appointment.

Instructions:

Please discontinue any medication that you are taking specifically for your bladder seven days prior to urodynamic testing. This includes Detrol (tolterodine), Ditropan (oxybutinin), Vesicare (solifenacin), Enablex (darifenacin), Sanctura (trospium), and the Oxytrol patch. This does not include diuretic medications for hypertension or antibiotics. Try to arrive for testing with a moderately full bladder so that you have the urge to urinate. Most people experience only minimal discomfort during urodynamics. It is recommended that you not take pain medications or muscle relaxants prior to this test as it can alter the results. You will be able to drive yourself to and from the office and can return to your normal daily activities immediately after testing.

Please Note: Urodynamic testing cannot be completed if you have a bladder infection. If you have new symptoms of urinary urgency, frequency, or burning with urination, call our office to discuss your symptoms and arrange to have a urinalysis if necessary. If the urinalysis is positive for infection, you will need to reschedule your urodynamic testing until after you have been treated.

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