Bladder tumour resection

Discharge instructions

A tumour has been scraped away from the lining of the bladder.

Follow-up

☐ Please contact your urologist’s office within the next week to arrange for a follow-up appointment in _______ weeks/months.

or

☐ Your follow-up appointment has been arranged for __________________________ (time)
on __________________________ (date)
at __________________________ (location)

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You have been found to have a tumour in the lining of the bladder. The tumour has been scraped away (bladder tumour resection) using an instrument passed through the urethra (the “urinary passage”).

The raw area in the bladder lining remaining after such a scraping will heal over, initially with a scab and, eventually, in most cases, with normal lining tissue. The tissue removed at surgery will be carefully examined and a detailed report will be available to your urologist.

Activity
Gradually resume your usual activities over the next few days. Avoid heavy lifting (over 10 kg or 20 lbs) or straining for about two weeks from the date of surgery as these activities can promote bleeding.

Travel or strenuous activity should be avoided until the urine is clear of blood for at least a week. Sexual activity can be resumed in about two weeks when you are comfortable.

Voiding function
It is not unusual to have increased frequency and urgency of urination for a few weeks after bladder tumour resection. There may also be some burning with urination. These symptoms will resolve more promptly if you drink plenty of fluids and empty your bladder regularly. Your voiding pattern should return to normal within a few weeks.

There may be a bit of blood visible in the urine for a few weeks after bladder tumour resection. Occasionally, a few blood clots may be seen, particularly after about two weeks when the scab comes away. Drinking plenty of fluids should help clear any visible blood in the urine.

Severe burning with urination or a fever may indicate a bladder infection. Please contact your urologist or family doctor if these symptoms persist.

Bowel function
Your normal bowel pattern should return when you resume your usual diet and activity. Avoid straining to have a bowel movement. A non-prescription stool softener, like Colace™, is often helpful.

Hygiene
You may shower or bathe as you like.

Smoking
There is a strong association between smoking and bladder cancer. If you are a smoker, you must make every effort to stop smoking now.

Medications
You generally will not require any strong painkillers after your discharge from hospital. Acetaminophen (e.g. Tylenol™) may be used as needed for any mild discomfort.

You should be able to continue with your usual medications. Blood thinners may increase the risk of bleeding after surgery. Your urologist will advise you when you can resume these drugs. If you have any questions, please contact your family doctor.

Follow-up
Your urologist will want you to make a follow-up appointment after your bladder tumour resection to ensure that you are recovering well from your surgery and to discuss the findings from microscopic examination of the bladder scrapings.

In some cases, additional investigation and treatment will be necessary. Given the high risk of bladder tumour recurrence, regular follow-up urine tests and bladder examinations (cystoscopies) will be required for several years to detect any recurrence at the earliest stage.

Please arrange your follow-up appointment as soon as possible after your discharge from hospital.