

Urodynamics is a group of tests that measure how well your bladder stores and releases urine. Thin, soft tubes (catheters) measure pressures while your bladder is slowly filled and then emptied. The goal is to recreate your symptoms in the office so your team can find the exact cause and plan the right treatment.

## About This Test

Urodynamics is not one test but several done together. Depending on your needs it may include:

- A **flow test** — you urinate into a special toilet that measures your stream, and the team checks how much is left behind.
- A **filling study** — the bladder is slowly filled while pressures are measured and you report what you feel.
- A **pressure-flow study** — pressures are measured while you urinate.
- Sometimes **X-ray pictures** are taken at the same time (video urodynamics).

Two thin tubes are used: one in the bladder (through the urethra) and a second, very small one in the rectum (or vagina) to measure belly pressure, so the team can tell bladder pressure apart from straining.

## Is It Safe?

Yes. Urodynamics is a low-risk, interactive test. The main risk comes from the catheters — brief burning and a small chance of a urine infection. You may be given an antibiotic. There is no surgery and no recovery time.

## LEARN THE TERMS

### Urodynamics

A set of tests that measure how the bladder stores and empties urine.

### Bladder

The muscular sac that stores urine until you urinate.

### Catheter

A thin, soft tube used to fill the bladder and measure pressure.

### Filling study

Measures pressure and sensation as the bladder slowly fills.

### Pressure-flow study

Measures pressure while you urinate, to see how the bladder empties.

### Flow test

Measures the speed and pattern of your urine stream.

### Video urodynamics

The same test with X-ray pictures added for more detail.

### Post-void residual

The amount of urine left in the bladder after you urinate.

**WILL IT HURT?** Most people feel pressure and some embarrassment from the catheters rather than real pain. You will be asked to cough, change position, and urinate during the test — the team keeps you covered and works at your pace. It usually takes about 30–60 minutes, and you can go straight home.

## How to Get Ready (Before Your Test)

- You may be asked to arrive with a **comfortably full bladder** — follow the instructions you are given.
- Take your **usual medicines**, but ask whether to **hold any bladder medicines** beforehand, since they can change the results.
- No sedation is needed, so you can usually **drive yourself home**.

### Tell your team ahead of time if you:

- Have signs of a **urine infection** (burning, fever, or cloudy, strong-smelling urine) — an active infection may mean the test is rescheduled
- Take a blood thinner, or have any allergies (including latex)

You may be asked to give a **urine sample** to check for infection before the test.

## What Happens During the Test

- 1 You urinate into a special toilet that measures your stream, and the team checks how much is left behind.
- 2 Thin catheters are gently placed — one in the bladder and a small one in the rectum or vagina.
- 3 The bladder is slowly filled while you report when you first feel it fill and when you feel a strong urge; you may be asked to cough or change position.
- 4 You urinate while the pressures are recorded, and then the catheters are removed.

## After the Test

- You can return to **normal activities right away**.
- You may feel **mild burning when you urinate** for a day or so. Drinking extra water helps and eases this.
- You may notice a **pink tinge** in your urine for a short time. This is common and usually clears within a day.

### Call your surgeon's office or seek care if you have:

- A fever or chills
- Trouble urinating, or you cannot urinate at all
- Heavy bleeding, or blood clots in the urine
- Pain that gets worse instead of better

## THREE THINGS TO REMEMBER

1. Urodynamics measures how your bladder fills and empties so your team can find the cause of leakage, urgency, or trouble emptying — and plan the right treatment.
2. There is little to do to prepare. Ask whether to hold any bladder medicines, arrive with a comfortably full bladder if asked, and tell your team about signs of an infection.
3. Expect pressure more than pain, and go home right away. Mild burning or a little pink in the urine for a day is normal — drink extra water, and call for fever, heavy bleeding, or trouble urinating.