#### Electromyography (EMG)

If your doctor thinks your urinary problem is related to nerves or muscle damage then an EMG will be done. This is an additional test that maybe ordered after the results of the Urodynamics is reviewed.

This test measures the muscle activity in and around the urethral sphincter by using special sendors. The sensors are placed on the skin near the urethra and rectum or they are located on the urethral or rectal catheter. Muscle activity is recorded on the machine.

More information is available from:

## **American Urological Association Foundation**

1000 Corporate Blvd Suite 410 Linthicum, MD 21090 1-800-746-4282 www.auafoundation.org

#### **Interstitial cystitis Association of America**

110 North Washington St Suite 340 Rockville, MD 20850-2223 1-800-435-7422 www.ichelp.org

### Springfield Urology

www.springfieldurology.net Email tstuart@springfieldurology.net

# Urodynamic Testing



# Springfield Urology

Dr. Ananth Annamraju Dr. V. Wally Mardovin Dr. Eric Espinosa

1164 E. Home Rd Springfield, OH 45503 937-342-9260

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#### **Introduction**

Urodynamics is a study that assesses how the bladder and urethra are performing their job of storing and releasing urine. Urodynamics help your doctor or nurse see how well your bladder and sphincter muscles work and can help explain symptoms such as:

- Incontinence
- Frequent urination
- Sudden, strong urges to urinate
- Problems starting a urine stream
- Painful urination
- Problems emptying your bladder completely
- Recurrent urinary tract infection

#### Preparing for the test

There is no special preparation needed for the testing. We would like you to arrive with the "urge" to urinate. You do not need to drink extra water, but refrain from using the restroom immediately prior to your test.

#### After the test

You may have mild discomfort for a few hours after the testing when you urinate. Drink plenty of water and call the office if the discomfort continues for more then 48 hours.

You will be scheduled for a follow-up appointment to discuss the results of the test.

Your physician will review the test to determine the results of the testing. This is typically done prior to your follow-up appointment because the testing requires a detailed evaluation to determine the results.

#### **Urodynamic Testing**

Includes all 5 of the following tests.

#### **Uroflow**

An uroflowmeter automatically measures the amount of urine and the flow rate (how fast the urine comes out). You will be asked to empty your bladder into a special collection device.

#### Post Void Residual

A post void residual (PVR) will measure the amount of urine left in your bladder after you empty naturally. An ultrasound machine is placed on the skin above the bladder to determine the amount of urine. A normal bladder will empty completely with only a very small amount of urine left behind. If large amounts of urine remain in the bladder then further evaluations will be needed.

#### Cystometry (CMG)

A cystometry (CMG) measures how much your bladder can hold, how much pressure builds up inside your bladder as it stores urine, and how full it is when you feel the urge to urinate. A catheter will be used to empty your bladder completely. Then a special, smaller catheter will be placed in the bladder, which has a pressure-measuring device. Another catheter may be placed in the rectum to record pressure there as well. Your bladder will be filled slowly with water. During this time you will be asked how your bladder feels and when you have the urge to urinate. The amount of water you can hold will be measured.

#### Leak Point Pressure

Your bladder may suddenly contract and squeeze without warning. The machine will record the point the leakage occurred. This reading will provide valuable information about the type of bladder problem that you have. You will be asked to cough, shift position, or exhale while holding your nose and mouth to attempt to make your bladder leak.

#### Pressure Flow Study

You will then be asked to empty the water that was put into your bladder. The machine will measure the flow rate and the pressure required to urinate. This pressure flow study helps to identify bladder obstruction that men may experience with prostate enlargement.

