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## Transurethral Resection of Bladder Tumor (TURBT)

Transurethral Resection of a Bladder Tumor (TURBT) is a surgical procedure that uses a telescope to biopsy and remove bladder tumors within the bladder. A TURBT is done in the OR of a hospital, under general or spinal anesthesia, and most patients can go home the same day. No surgical incisions are made. Because patients are put under anesthesia, they are required to have blood work, a chest x-ray, an EKG, and surgical clearance through their primary care physician (Surgical Scheduling: <a href="https://gdurology.com/pdf/Surgery\_Information.pdf">https://gdurology.com/pdf/Surgery\_Information.pdf</a>).

## HOW THE TURBT IS PERFORMED

Once the patient is under anesthesia, the procedure is done using a special type of telescope ("resectoscope") that is placed through the urethra and into the bladder. At the end of the scope is a loop of electrified wire ("loop") that can remove ("resect") the abnormal areas within the bladder. The procedure typically lasts 1-2 hours and, in some patients, a catheter may be placed in the bladder at the end of the procedure before the patients wake up; the decision whether a catheter is required or not is made by Dr. Disick at the end of the procedure.

## AFTER THE TURBT

If a catheter is required at the end of the procedure, patients are still able to go home the same day and are instructed to come to our office the following morning for removal. The catheter is removed at 8am and the patient is instructed to go home, drink fluids, and urinate as needed. Patients are to return to the office again in the afternoon for a bladder ultrasound to ensure correct bladder emptying. (Catheter: <a href="https://gdurology.com/pdf/Info">https://gdurology.com/pdf/Info</a> for Patients with Catheters.pdf )

There is little pain with a TURBT; most discomfort is associated with the catheter. Narcotic pain medication and opiates are *not* required. Blood in the urine is expected and can occur for up to a month in a limited fashion. Urination for the first few weeks may be associated with frequency, urgency, and leakage – this is normal and will subside. There is also a risk of urinary tract infection, but antibiotics are given during the procedure to prevent this.

This tissue that was removed and biopsied is sent to pathology for review to determine the depth of invasion into the bladder wall (Bladder Cancer: <a href="https://gdurology.com/pdf/Bladder Cancer Stages.pdf">https://gdurology.com/pdf/Bladder Cancer Stages.pdf</a>). These results will be reviewed with the doctor in the office 5-7 days after the procedure and this will help determine next steps in your treatment.

