

1. Bladder Function	
PATIENT SECTION	GP/NURSE SECTION
<p>1.1 How do you empty your bladder?</p> <p><input type="checkbox"/> Voiding spontaneously with some voluntary control</p> <p><input type="checkbox"/> Clean intermittent self-catheterisation (CISC)</p> <p><input type="checkbox"/> Permanent indwelling urethral catheter (IDC)</p> <p><input type="checkbox"/> Suprapubic catheter (SPC) with</p> <p style="padding-left: 20px;"><input type="checkbox"/> continuous drainage <input type="checkbox"/> intermittent drainage (eg. 'flicker' valve)</p> <p><input type="checkbox"/> Voiding by reflex (wearing urodome or other device) with/without tapping</p> <p><input type="checkbox"/> Straining or pressing down over bladder</p> <p><input type="checkbox"/> Other technique (eg. ileal conduit) Please list _____</p>	<p>Examination notes:</p>
<p>1.2 How frequently do you empty your bladder each day? (if indwelling catheter, free drainage or use of valve system?)</p> <p>Frequency of catheters/drainage procedures during day _____ overnight _____</p>	
<p>1.3 Has the way you empty your bladder changed in the last 12 months?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe _____</p>	
<p>1.4 How much fluid do you drink each day? _____ Litres (1glass= 250ml)</p> <p>List types of fluid drunk (eg. water, tea/coffee, alcohol): _____</p>	
<p>1.5 Are you taking any medications to control your bladder?</p> <p><input type="checkbox"/> Oxybutynin(Ditropan) <input type="checkbox"/> Tolterodine(Detrusitol) <input type="checkbox"/> Solifenacin(Vesicare)</p> <p><input type="checkbox"/> Phenoxybenzamine <input type="checkbox"/> Urecholine</p> <p><input type="checkbox"/> Other _____</p> <p>Dose and frequency _____</p>	
<p>1.6 If you have an indwelling or suprapubic catheter, how long have you had it for?</p> <p><input type="checkbox"/> < 5 years <input type="checkbox"/> 5-10 years <input type="checkbox"/> > 10 years (list no. of years _____)</p>	<p><input type="checkbox"/> If >15-20 years, organise cystoscopy¹</p>
<p>1.7 Have you had any serious or recurring urinary tract infections (associated with symptoms such as fever, abdominal discomfort, incontinence, increased spasm or autonomic dysreflexia), requiring treatment with antibiotics in the last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, how many? <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-4² <input type="checkbox"/> 5 or more</p>	<p>Most recent CSU Results: _____</p> <p>Actions required:</p> <p><input type="checkbox"/> Repeat CSU</p> <p><input type="checkbox"/> Check SPC site and swab if</p>

¹ There is some evidence that the incidence of bladder cancer in people with SCI who have had an indwelling or suprapubic catheter for more than 20 years. Risk factors include recurrent UTIs, indwelling catheters, urinary tract stones, and cigarette smoking over a long period of time. The tumours are commonly metastatic and invasive at the time of diagnosis and highlights the importance of effective screening such as cystoscopy.

² Increased frequency of Urinary Tract Infections (>2 per year) should prompt a search for causes.

<p>Please provide details _____ _____</p> <p>Do you currently have the above symptoms? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please provide details _____ _____</p>	<p>necessary</p> <p><input type="checkbox"/> Organise renal ultrasound/KUB to exclude calculi</p> <p><input type="checkbox"/> Prescribe antibiotics if pathogenic organism and person symptomatic</p> <p><input type="checkbox"/> Repeat CSU after antibiotics</p> <p><input type="checkbox"/> Refer to urologist</p>
<p>1.8 Have you experienced any of the following symptoms³/problems recently?</p> <p>Difficulty passing intermittent catheters (or bleeding afterwards)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Requiring more straining or time to pass urine? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Frequent catheter blockages? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Increased sediment, gravel/calcified material or blood in urine?⁴ <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Urinary leakage, urgency or less warning before leaking? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Passing or catheterizing more urine volumes than usual? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Increased bladder spasms or lower abdominal discomfort? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Increased episodes of autonomic dysreflexia or spasticity? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please provide details _____ _____</p>	
<p>1.9 Have you had any of the following investigations in the last 2 years?</p> <p><input type="checkbox"/> Renal Ultrasound <input type="checkbox"/> Intravenous pyelogram (IVP) <input type="checkbox"/> CT Scan kidneys</p> <p><input type="checkbox"/> Blood tests for kidney function</p> <p><input type="checkbox"/> Videourodynamic study (to measure the pressures in your bladder)</p> <p>If NO, when was the last time you had any tests for your bladder? _____</p>	<p><input type="checkbox"/> Compare results of last 2 imaging and renal function tests</p> <p><input type="checkbox"/> Compare BP trend</p> <p><input type="checkbox"/> Review VUD result</p>
<p>1.10 Have you ever seen a urologist? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, what was the reason (and when was your last appointment)? _____ _____</p> <p>Have you had any of the following procedures?</p> <p><input type="checkbox"/> Intravesical Botulinum toxin injection (injection of botox into your bladder)</p> <p><input type="checkbox"/> Bladder augmentation (increasing the volume of your bladder)</p>	<p><input type="checkbox"/> Review urologist letters</p>

NB : Risk factors for Urology Complications include

- Males, age >50 years (menopause, prostatism), increased age at injury & increased duration of injury
- Higher level of spinal cord injury and complete (ASIA A) injuries are at higher risk than incomplete injuries (ASIA D)
- Recent hospital admission or bed-rest, smoking, compromised immune function
- Known renal compromise or having only 1 kidney, on medications which are toxic to the kidney

³ The presence of these symptoms are red flags which should alert to further investigation.

⁴ The presence of these symptoms may indicate the presence of renal tract calculi. Urinary stones can harbour infection and lead to recurrent UTIs until the calculi are removed. Bladder stones can also cause outlet obstruction and predispose to cancer from chronic irritation.