

Patient ID: \_\_\_\_\_

Physician ID: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*month day year*

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## Cystoscopy

1. Type of Anesthesia?

- <sub>1</sub> general  
<sub>2</sub> regional  
<sub>3</sub> local or non-diagnostic

2. Urethra?

- <sub>1</sub> normal  
<sub>2</sub> abnormal  
<sub>3</sub> not examined

3. Urethral or Prostatic calculi?

- <sub>1</sub> present  
<sub>0</sub> absent

4. Urethral diverticulum?

- <sub>1</sub> yes  
<sub>0</sub> no

5. Orifices?

- <sub>1</sub> normal  
<sub>2</sub> abnormal

6. Pseudomembraneous trigone?

- <sub>1</sub> yes  
<sub>0</sub> no

7. Bladder calculi?

- <sub>1</sub> present  
<sub>0</sub> absent

8. Tumors?

- <sub>1</sub> yes  
<sub>0</sub> no

## 9. Hunner's patch?

- <sub>1</sub> present (*Please indicate the location(s) on the map on page 4 by placing an 'H' wherever a patch occurs.*)
- <sub>0</sub> absent

## 10. Scars?

- <sub>1</sub> present (*Please indicate the location(s) on the map on page 4 by placing an 'S' wherever a scar occurs.*)
- <sub>0</sub> absent

## 11. Vascularity?

- <sub>0</sub> normal
- <sub>1</sub> hypervascularity
- <sub>2</sub> hypovascularity

**L** Are you performing a hydrodistention and/or biopsy as part of this procedure?

- <sub>0</sub> **no** hydrodistention and **no** biopsy **L** (*Please stop here.*)
- <sub>1</sub> hydrodistention and biopsy **L** (*Please complete Questions 12-19.*)
- <sub>2</sub> hydrodistention only **L** (*Please complete Questions 12-16 only.*)

## 12. Bladder capacity:

\_\_\_\_\_ cc at 80-100 cm H<sub>2</sub>O

## 13. Bloody effluent?

- <sub>1</sub> yes
- <sub>0</sub> no

## 14. Glomerulations?

- <sub>1</sub> mild
- <sub>2</sub> moderate
- <sub>3</sub> severe
- <sub>0</sub> none **L** (*Please go to question 17, if applicable.*)

## 15. If glomerulations are present indicate one of the following:

- <sub>1</sub> diffuse **L** (*Please go to question 17, if applicable.*)
- <sub>2</sub> localized

16. *If glomerulations are localized, please indicate their location on the map on page 4 by placing a 'G' wherever a glomerulation occurs.*

**L** Please stop here if no biopsies are being taken. Otherwise, proceed to the next page.

17. Biopsy #1: taken for processing at home institution - most diseased area  
*Please indicate the location of this biopsy by placing a '1' on the map on page 4.*

What is the associated pathology of this specimen? *(Please place an X in the appropriate box)*

- <sub>1</sub> Cystoscopically normal  
<sub>2</sub> Mild glomerulations  
<sub>3</sub> Moderate glomerulations  
<sub>4</sub> Severe glomerulations  
<sub>5</sub> Hunner's ulcer  
<sub>6</sub> Scar  
<sub>7</sub> Other \_\_\_\_\_  
*(please specify)*

18. Biopsy #2: taken for processing at APL - most diseased area  
*Please indicate the location of this biopsy by placing a '2' on the map on page 4.*

What is the associated pathology of this specimen? *(Please place an X in the appropriate box)*

- <sub>1</sub> Cystoscopically normal  
<sub>2</sub> Mild glomerulations  
<sub>3</sub> Moderate glomerulations  
<sub>4</sub> Severe glomerulations  
<sub>5</sub> Hunner's ulcer  
<sub>6</sub> Scar  
<sub>7</sub> Other \_\_\_\_\_  
*(please specify)*

19. Biopsy #3: taken for processing at APL - trigone  
*Please indicate the location of this biopsy by placing a '3' on the map on page 4.*

What is the associated pathology of this specimen? *(Please place an X in the appropriate box)*

- <sub>1</sub> Cystoscopically normal  
<sub>2</sub> Mild glomerulations  
<sub>3</sub> Moderate glomerulations  
<sub>4</sub> Severe glomerulations  
<sub>5</sub> Hunner's ulcer  
<sub>6</sub> Scar  
<sub>7</sub> Other \_\_\_\_\_  
*(please specify)*

**L** Please proceed to the next page.