What is Robotic Bladder Surgery?

A cystectomy is surgery to remove the bladder. Robotic bladder surgery uses a computerized robotic system to remove the bladder. This robotic system is called the da Vinci® Surgical System. A robotic system allows your doctor to do surgery in a less invasive way. This is called a minimally invasive surgery.

Robotic bladder surgery:

- In men, the bladder, prostate, seminal vesicles and lymph nodes are usually removed.
- In women, the bladder, urethra, part of the vagina, and lymph nodes are usually removed. A woman may also have the uterus, fallopian tubes and ovaries removed.
- Once the bladder is removed, the urine stream can be redirected in one of three ways. Your doctor will talk with you about the type of surgery you may need.

What does the robotic surgical system look like?

The robotic surgical system is made up of 3 major parts:

- **A high definition 3-D camera** - This allows the surgeon to view the area to be worked on inside the body.

- **Tiny robotic arms with small surgical tools** - The robotic arms are placed in the body through small incisions. The surgeon controls the robotic arms to do the surgery.

- **A special worktable** - This is where the surgeon controls the camera and the robotic arms and tools.

This handout is for informational purposes only. Talk with your doctor or health care team if you have any questions about your care.

How is a Robotic Bladder Surgery done?
Small surgical incisions (cuts) will be made on your stomach. A small plastic tube called a “port” will be put into each incision. The ports are used to keep the incision area open. A very small camera called a laparoscope, and small robotic arms are put through the ports to let the surgeon see your bladder. From the worktable, the surgeon moves the laparoscope and the small robotic arms to do the surgery.

Will I be asleep for this surgery?
You will have anesthesia and will be asleep during the surgery.

How long will the surgery take?
Depending on your situation, the surgery may take 5 to 8 hours. You may be in the recovery area for 2 hours or longer after your surgery.

What happens when the surgery is done?
At the end of the surgery, the robotic arms and tools will be removed. The surgeon will close the incision holes with stitches (sutures) and surgical glue. You will then go to the recovery area and stay there until you are awake and your blood pressure, pulse and breathing are stable.

How long will I stay in the hospital?
Most people can leave the hospital within 3 days after surgery, but sometimes patients may need to stay longer.

Why is this type of surgery better for me?
With minimally invasive surgery you have:
- Less blood loss during surgery
- Smaller surgical incisions
- Less pain after surgery
- A shorter hospital stay
- Faster recovery and return to your normal activities
Are there any risks with this surgery?

There are risks for any type of surgery. Your doctor will go over the risks with you before surgery.

What care will I need at home after this surgery?

Before you leave the hospital you will meet with a Patient Care Resource Manager (PCRM). The PCRM will work with you and your caregiver to help with any needs you may have after you leave the hospital.

If you have a stoma, you will meet a Wound, Ostomy and Continence (WOC) nurse. While you are in the hospital, the WOC nurse will teach you how to care for your stoma. This nurse will also give you information about where to call if you have questions after leaving the hospital.

On the day of discharge you will be given guidelines about when and how to report problems after you leave the hospital. Depending on your medical needs, you may have a home health nurse check on you after you leave the hospital.

How long will I need to be off of work after this surgery?

Most people may need to be off work for about 4 to 6 weeks after this surgery. You will not be able to lift over 10 pounds during this time.

Call your doctor if you have any of the following:

- Temperature greater than 100.4 degrees Fahrenheit (38 degrees Celsius)
- Pain that is not relieved by medicine
- Foul smelling drainage from your incision
- Redness, warmth or swelling around your incision
- Low back pain or pain in your abdomen (belly)
- A change in the color or smell of your urine