Percutaneous nerve evaluation (PNE) test

Information for patients
Urology
This leaflet will give you some background information about the test and help you in the day-to-day care of your temporary test equipment.

**Why do I need a PNE test?**

You may have been referred for a neuromodulation procedure if other treatments have been unsuccessful. The PNE test can be used for bladder problems which may be in the form of frequency/urgency, including leakage of urine or retention (unable to pass urine).

This temporary test will be used to see if you are suitable for a permanent NeuroModulation Implant (NMI) also known as a 'Sacral Nerve Stimulator' (SNS). This may aid your bladder symptoms in the medium to long term.

**What is a PNE test?**

The PNE test is made up of two parts. The first part requires you to fill in a bladder diary for 4 days and complete some symptom questionnaires. The second part involves putting a wire in the bottom of your back. Following this you will need to fill in bladder diaries for up to 2 weeks.

Bladder diaries must be filled in accurately and you must measure your urine output for every 24 hours; for 4 days pre-test and then over the PNE test period. The 1st stage procedure is temporary and reversible.

At the end of the test period we will make a decision as to whether you have a permanent wire and battery implanted and carry on with neuromodulation. This decision is based on your bladder diaries, symptom questionnaires and your own thoughts.

This temporary test will be used to see if you are suitable for a permanent NeuroModulation Implant (NMI) which may aid your bladder symptoms in the medium to long term.

The PNE test is temporary and reversible. There is no cutting involved.
Are there any risks involved?
As with any procedure we will explain the risks and benefits before asking for your consent. For this test the most common risks are:

- Swelling
- Bruising
- Infection

These will be explained in more detail prior to the test.

What are the benefits?
The main benefit of the test is to assess whether you are suitable for a permanent NeuroModulation Implant (NMI) to improve your bladder function in the longer term.

What are the alternatives?
The alternatives to this test are to stay as you are, using your current bladder management, or potential surgery.

Other surgical options will have been discussed with you by your consultant prior to this test. If you have any further questions please do ask.

Will I need time off work?
You may need sick leave over the PNE test period, particularly if you have a manual job.
What do I need to do before my PNE procedure?

A few weeks before your operation

- You will need to be seen by the pre-operative assessment team prior to the procedure and they will give you further information regarding your admission.
- You must stop taking any medication you take for your bladder 2 weeks before the PNE test.

On the morning of your operation

You will need to:

- Have a bath or shower
- Take off all your jewellery except your wedding ring if you have one
- Take off any nail varnish or false nails on your fingers and toes
- Bring make-up remover with you to use before your surgery

You should also bring:

- Essential toiletries
- Nightwear (including slippers and dressing gown)
- Any solutions and cases for contact lenses
- A denture pot for any dentures
- Glasses
- Mobility aids (frames, stick, wheelchair)
- Hearing aids

Storage space is limited so please only bring necessary things with you. You might also want to bring something to do while you wait to go into theatre. For example:

- A book
- Crosswords
Before you go into theatre you will be given a bag or box in which to store your personal belongings.

It is advised not to bring:

- Valuables
- Mobile phones
- Credit cards or large amounts of money

We are sorry but we cannot take responsibility for the safety of your property.

**Where will the operation be performed?**

Your operation will be performed at either the Royal Hallamshire Hospital or in the Bev Stokes Day Case Unit at the Northern General Hospital.

**What happens on the day of my PNE test procedure?**

Please bring with you any tablets or medicines you are taking at present. You will be seen by the anaesthetist who will discuss your anaesthetic.

The procedure may be performed under a local, spinal or general anaesthetic.

**What is involved in the procedure?**

A fine wire is put into the bottom of your back in an operating theatre. To do this you will have either local, spinal or a general anaesthetic and you will be lying on your front. The wire is placed with x-ray guidance.
What happens after surgery?

When the anaesthetic has worn off, the area may feel tender and bruised. You may take paracetamol or similar pain relief to control any discomfort.

You will be allowed home when the anaesthetic has worn off, you have had something to eat and drink and have passed urine.

You may need to stay in overnight if you live a long way away, have no-one at home with you, or have any other medical conditions.

The morning after your operation you will need to attend the Urology Outpatient Department at the Royal Hallamshire Hospital. The Nurse Specialist will check your dressings for any sign of infection or bleeding. The wire is then attached to a small screener box which sends electrical impulses to the nerves in the bottom of your back. The box is 6cm by 9cm in size and attaches to a belt or your clothing with a clip.

The screener box stimulates the nerves in your lower back 24 hours a day. You must not switch the device off unless you are having technical problems or pain.

Before you are discharged home, you will be taught how to manage the screener box and we will give you some written instructions.

Will I get a follow-up appointment?

You will need to come to clinic at least once during the trial, but possibly more, to ensure that we get the best possible result.

When should I start to complete my bladder diary?

As soon as you are connected to the screener box you must begin filling in your bladder diary.
Is there anything I should look out for when I go home?

You should particularly look out for signs of infection, these include:

- Redness, soreness or swelling around the wire
- The skin near the wire is warmer than normal
- A fever of 38°C or higher

If you have any of these signs then get in touch with us (on one of the contact numbers on this sheet) or your GP.

How should I look after my PNE test wire?

The PNE test will take up to 2 weeks. During this time you will need to keep your wire clean, dry and covered. The dressings must not get wet.

Will I be able to have a bath or shower?

You will not be able to have a shower or bath during the PNE test as the wounds and external wire must not get wet.

What should I do if I am finding it difficult to sleep?

At night you may need to turn down the level of stimulation a little to allow you to sleep. This is because the stimulation may feel too strong as your body becomes more relaxed. **Please do not turn the stimulation off** unless you are experiencing pain or technical difficulties.
What should I do if I am finding it difficult to go to the toilet?

If you find it difficult to open your bowels, try turning the stimulation off for 30 minutes or so beforehand. Don’t forget to turn it back on again.

If you are constipated for two days you may need a laxative. Constipation can stop a good response.

How do I manage my bladder during the PNE test?

Retention patients:

1. Either when you have the sensation to pass urine or it is 3 hours from the last time you passed urine, you must try to empty your bladder.
2. Empty any residual urine from your bladder using self-catheterisation or your suprapubic valve (Note: your valve should be shut during the test).
3. You should measure how much you empty using the valve or self-catheterisation and this should be written in your bladder diary.
4. Once the PNE test is complete you must go back to your normal method of bladder management.

Frequency / urgency patients:

1. If you are a frequency/urgency patient you must try to hold on when you have an urge to empty your bladder. This may be helped by turning the stimulation level up for a short time, until the urgency passes.
2. Turn the stimulation back down to a comfortable level once the urgency has passed.
Who should I contact if I have any concerns?

Department of Urology
Royal Hallamshire Hospital
Glossop Road
Sheffield S10 2JF

- **0114 271 1900**

Miss Reid, Consultant Urological Surgeon

- **0114 271 12097** (secretary)

Sister Rachel Simmons, Clinical Nurse Specialist

- **0114 271 1774**

Urology Outpatient Department

- **0114 271 2343**

Who should I contact if I am unable to attend my appointment?

If you are unable to attend, please contact the named person on your hospital letter.