



UROLOGY ASSOCIATES OF FREDERICKSBURG

Expert Surgical Care of the Urologic Patient Since 1975

Ureteroscopy & Stent Placement Instructions

PROCEDURE:

Kidney Stones and other abnormalities of the urinary tract are treated under anesthesia using a small fiber optic scope (ureteroscope). This tiny device, equipped with a camera, surgical lasers, and tools is inserted into the urinary tract through the bladder opening (urethra). Once in the bladder, the scope can travel up the tube (ureter) to the kidney. At the end of your procedure your surgeon may have placed a soft plastic tube (stent) inside the ureter to prevent swelling and allow passage of small stones.

Your recent surgery requires some minor precautions to help smooth your recovery.

Despite the fact that no incisions were used the areas of the urinary tract will be raw and irritated. The stent is plastic and will irritate the bladder. This causes frequent urination, both day and night, and urinary urgency. In some, the urge to urinate is present almost always. Sometimes the urge is strong enough that you may not be able to stop yourself from urinating. The stent also causes pain in the kidney which can be very severe especially when you urinate. These symptoms usually resolve after the stent is removed, which cannot be done until the danger of the ureter swelling shut has passed, between 2 to 21 days.

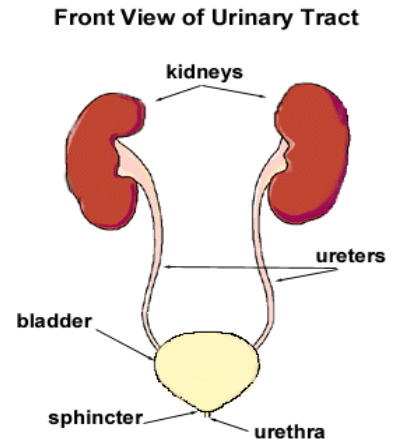
Sometimes your surgeon will leave a small string attached to the stent. This string may be visible. Please be careful not to pull it out. (If it is accidentally pulled out call your doctor for instructions.)

You may see some blood in your urine while the stent is in place and a few days after the removal of the stent. Do not be alarmed, even if the urine was clear for a while. Get off your feet and increase your fluid intake until clearing occurs. If you start to pass clots or do not improve, call our office.

DIET:

You may return to your normal diet immediately. Because of the raw surface alcohol, spicy and acidic foods, and caffeinated drinks may cause irritation or frequency and should be used in moderation. To keep urine flowing freely, and to avoid constipation, drink plenty of fluids during the day at least 8 to 10 glasses.

Tip: Avoid artificial sweeteners and cranberry juice (very acidic).





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ACTIVITY:

Your physical activity does not need to be restricted. However, if you are very active, you may see some blood in your urine. We would suggest cutting down on your activity under these circumstances until the bleeding has stopped.

BOWELS:

It is important to keep your bowels regular during your healing period. If you have been taking narcotic pain medications you may become constipated. Straining with bowel movements can cause bleeding. A bowel movement every other day is reasonable. Use a mild laxative if needed and call if having problems. For example: Milk of Magnesia 2 to 3 tablespoons or 2 Dulcolax tablets. Warm prune juice is also a good natural alternative.

MEDICATION:

You should resume your pre-surgery medications unless otherwise instructed. In addition, you may be given antibiotics, pain medications, or urinary anesthetics depending on the situation. These should be taken as prescribed and until the bottles are finished, unless you are having an unusual reaction to one of the medications.

WHEN TO CONTACT OFFICE:

- Fevers over 101 Fahrenheit.
- Heavy bleeding or clots.
- Inability to urinate.
- Reaction to medications: hives, rash, nausea, vomiting, diarrhea.
- Severe burning or pain with urination that does not improve.

FOLLOW-UP:

You will need a follow-up appointment so that your surgeon can monitor your progress. Call the office for an appointment when you get home. Usually the first appointment will be about 3-14 days after your surgery and your stent will probably be removed at that time.