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POST STONE REMOVAL/ STENT PLACEMENT SURGERY INSTRUCTIONS

DEFINITIONS:

URETER: the duct that transports urine from the kidney to the bladder. STENT: a plastic hollow tube that is placed into the ureter, from the kidney to the bladder to prevent the ureter from swelling shut.

Your recent Kidney Stone procedure requires very little post hospital care.

Despite the fact that no skin incisions were used, the area around the ureter and bladder is raw and irritated. The stent is a foreign body which will further irritate the bladder wall. This irritation is manifested by increased frequency of urination, both day and night, and also an increase in the urge to urinate. In some patients, 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 only real cure is to remove the stent and then give time for the bladder wall to heal which can't be done until the danger of the ureter swelling shut has passed. This can take from 2-21 days.

You may see some blood in your urine while the stent is in place and a few days afterward. It may occur even if the urine was clear for a while, do not be alarmed. Get off your feet and drink lots of fluids until clearing occurs (water is best). If you start to pass clots or don't improve, call us.

DIET:

You may return to your normal diet immediately. Because of the raw surface, alcohol, spicy foods, acidic foods and drinks with caffeine may cause irritation or urinary frequency and should be used in moderation. To keep your urine flowing freely and to avoid constipation, drink plenty to fluids during the day (8-10 glasses, water is best). Tip: Avoid Cranberry juice, it is very acidic!

ACTIVITY:

Your physical activity doesn't need to be restricted. However, if you are very active, you may see some blood in your urine. We would suggest for you to cut down your activity under these circumstances until the bleeding has stopped.

BOWELS:

It is important to keep your bowels regular during the postoperative period. Straining with bowel movements can cause bleeding. A bowel movement every other day is reasonable. Use a mild laxative if needed, such as Milk of Magnesia 2-3 tablespoons, or 2 Dulcolax tablets. Call if you continue to have problems. If you had been taking narcotics for pain, before, during, or after surgery, you may be constipated. Take a laxative, as needed.

MEDICATION:

You should resume your pre-surgery medications unless told not to. In addition, you will often be given an antibiotic to prevent infection. These should be taken as prescribed until the bottles are finished unless you are having an unusual reaction to the drug. If this occurs, contact our office.

-OVER-

PROBLEMS YOU SHOULD REPORT TO US:

- a. Fevers over 100.5 Fahrenheit.
- b. Heavy bleeding, or clots (See notes above about blood in urine).
- c. Inability to urinate.
- d. Drug reactions (Hives, rash, nausea, vomiting, diarrhea).
- e. Severe burning or pain with urination that is not improving.

FOLLOW-UP:

You will need a follow-up appointment to monitor your progress. If you weren't given one when we scheduled the surgery, please call for this appointment at the number above when you get home. Usually the first appointment will be about 10- 14 days after your surgery and your stent will probably be removed at that time.