



UROLOGY SURGICAL CENTER

5500 Pine Lake Road Lincoln, Nebraska 68516 (402) 421-8899 Fax (402) 421-1945

Business Hours: Monday-Thursday 7:00 a.m. – 4:30 p.m.; Friday 7:00 a.m. – 4:00 p.m.

POST STONE REMOVAL / STENT PLACEMENT INSTRUCTION SHEET

PAIN / DISCOMFORT:

Following your procedure you may experience some pain. The areas around your ureter and bladder are irritated. This irritation is due to the instruments used for the surgery and also may be due to the ureteral stent that may have been placed.

A ureteral stent is a soft plastic tube with holes all around it. The stent is inserted into the ureter to help drain urine into the bladder. The tube has a coil at each end to keep it in place. One end remains in the kidney and the other end is in the bladder.

Stents are used to keep the passageway for urine open following surgery. Sometimes the ureter can swell and cause a blockage; the stent prevents this from occurring.

Some symptoms you may experience due to the stent are frequency or urination, urgency to urinate, and some blood in the urine. These can all occur until the stent is removed. The length of time the stent is in place varies for each individual.

Those patients who did not require a stent placed may experience frequency and burning with urination as well as some blood in the urine. These symptoms should clear up within 24-48 hours following surgery.

As stated above, blood in the urine is normal following the procedure you have had done. Do not be alarmed even if your urine was clear for awhile. Get off your feet and push fluids until the urine clears. If you start to pass blood clots or your symptoms worsen or fail to improve, you could call us.

DIET:

You may return to your normal diet within twenty-four hours following surgery. You may note some mild nausea and possibly vomiting the first six to eight hours following surgery. This is usually due to the side effects of anesthesia, and will disappear quite soon. We would suggest clear liquids and a very light meal the first evening following surgery. You may want to avoid alcohol, spicy foods, acidic foods and drinks and drinks with caffeine. These foods can irritate the bladder, increasing the symptoms of pain and frequency. It is important to drink plenty of fluids (8-10 glasses a day) to keep urine flowing and to avoid constipation.

ACTIVITY:

You will want to take it easy for the first 24 hours. After that you can resume normal activity. You may notice increased blood in your urine as you increase activity. We would suggest decreasing activity under this circumstance until the bleeding has stopped.

BOWELS:

It is important to keep your bowels regular following surgery. Straining with bowel movements can cause bleeding. Pain medications can cause constipation. You may use a mild laxative if needed. We suggest Milk of Magnesia (2-3 tablespoons) or 2 Dulcolax tablets. Increasing your fluid intake will also help.

MEDICATION:

You should resume your pre-surgery medications unless otherwise instructed. You may be dismissed with a prescription for pain medicine. If the pain is not too bad, you may take either Tylenol (acetaminophen) or Advil (Ibuprofen) that contain no narcotic agents. These may be tolerated better with fewer side effects. If the pain medication you are sent home with does not control your pain, you will have to let us know. Some narcotic pain medications cannot be given or refilled by a phone call to a pharmacy. Often times you will also be sent home with an antibiotic to prevent infection. This should be taken as prescribed. Please report any medication reactions to us.

PROBLEMS TO REPORT:

- Fevers over 101 F
- Heavy blood in urine (see notes above about blood in urine)
- Inability to urinate
- Drug reactions such as hives, rash, nausea, vomiting, diarrhea
- Severe burning or pain with urination that is not resolving

FOLLOW-UP:

If you need a follow up appointment it will be made for you according to your physician's orders. It is important to keep all appointments.