Ureteroscopy Discharge Information

How I may feel after Ureteroscopy/stone extraction:
You may feel irritation and/or pain on the side of the procedure. This is due to the manipulation of the ureteroscope in the ureter (this is the tube that drains from the kidney to the bladder). It may be minimal, achy, crampy or at times quite uncomfortable. It typically improves over a few hours to a few days. You may or may not see blood in the urine. It often lasts for a few days to even a few weeks. There is typically blood when a stent is in place. Most if not all of the larger pieces of stone are typically removed during the procedure. Some of the fragments are removed and sent to pathology.

Stents:
Sometimes, stents are placed or are in place for this procedure. They can cause anywhere from minimal to significant discomfort. A stent is a tube which goes from the kidney to the bladder. There may be a string, called a dangler, coming out of the urethra. If this is present, it looks like “thread” or “fishing line”. Please do not pull this. Stents cause urgency, frequency and the feeling that when you need to go, you need to go right now. When voiding, you may feel pain/discomfort going up the side that the stent is on. This is normal. If severe, call and we can give you a medication to help this but it can cause a dry mouth and/or blurry vision on rare occasions.

Pain control:
You will generally be given a prescription for a narcotic. Do not drive or do anything dangerous if you are taking narcotics. Often, extra strength Tylenol or Motrin will give excellent pain relief. Narcotics can cause constipation. If this occurs, take whatever works for you. Milk of Magnesia, prune juice, Miralax, Dulcolax or Magnesium Citrate are a few options.

Blood thinners:
If you are on a blood thinner such as Aspirin, Coumadin, Plavix, Pradaxa, Effient or any other blood thinner, please ask your physician when it is safe to restart these medications. If you have a cardiac stent, often Aspirin is continued pre and postoperatively and it is essential that you discuss continuing/going back on any of these medications with your urologist, primary care physician and/or cardiologist.

Activity:
If you have a stent, activity often makes you more uncomfortable. You can resume all activities 24 hours after the procedure. Do not do anything dangerous as small pieces trying to pass can still cause a significant amount of pain while they pass.
Food:
Eat what you feel like. Sometimes after surgery people are not hungry or don’t eat much. As long as you are able to eat/drink without nausea or vomiting, this is fine. Start slowly.

Fever:
Call if there is a fever over 100 degrees.

Driving:
Do not drive if you are taking narcotics. We want you to be sure you will not be in pain and have an accident, hurt yourself or anyone else. If you question the ability to drive, wait until you are comfortable that you can safely drive.

Follow up:
Please call the day of surgery or the next business day to arrange an appointment for the day recommended by your urologist. Often, your urologist will write for a KUB which is a plain X-ray of the abdomen to see if all of the pieces have passed. If this is ordered, please have it done the day of or the day before your appointment and bring in the film, not the CDROM. You will need to ask the radiology department to give you the film to bring to our office.

If you have any questions or concerns, please call for further information/ instructions.

Sincerely,

Urologic Specialists of Northwest Indiana