POSTOPERATIVE INSTRUCTIONS
Stones

**ESWL**

Breaking the stone with the shock wave machine often leaves bruising on the back or abdomen. This is normal and should improve over the next several days to weeks. Indwelling stents (tubes) are rarely used, but if they are, some of the items listed below in ‘ureteroscopy’ may apply.

**Ureteroscopy**

Indwelling stents are usually left inside the ureter (the tube traveling from the kidney to the bladder) to help prevent blockage of urine since swelling often occurs after ureteroscopy. This stent may be connected to a black string exiting out of the body through the meatus (pee channel), and secured to the body with plastic bandages. Please do not pull on the string until instructed to remove the stent by your surgeon. However, if the string is pulled and the stent accidentally comes out too early, don’t be alarmed. We rarely have to replace it and would only do so if you/your child has such bad pain or nausea that it cannot be relieved by the medications listed below.

If the stent needs to stay in for more than a few days, there will not be any black string, and we will need to schedule an additional minor procedure to remove the stent.

**Activity**

There is no need to restrict activity after surgery. School age children should not participate in coach-directed activities for approximately 2 weeks.
Bathing

The patient can resume normal bathing 48 hours after the operation. Older children can shower the day after surgery. If the patient is having bladder spasms, soaking in a warm tub may help.

Bandages aren't typically required for this surgery.

Blood in Urine

This is normal after these surgeries, and may continue to occur off and on for a few weeks after surgery and the entire time the stent is in place. The urine may be colored anywhere from pink lemonade to tomato juice. This is normal. The darker the urine gets, please try to increase fluids to lighten the urine to fruit punch or pink lemonade color. If you/your child is passing large clots of blood (bigger than quarters or silver dollars), please contact our office.

Medications

Infants only need ibuprofen (Motrin or Advil) and Tylenol to control pain after surgery. We recommend you give these on a schedule without waiting to see if he will have pain during the first 48 hours after the operation, meaning you can alternate them. Give the ibuprofen, then 3 hours later the Tylenol, then 3 hours later another dose of ibuprofen, etc.

Older children should also take ibuprofen on a regular schedule for the first 48 hours, alternating with Norco (a narcotic that also contains Tylenol) or plain Tylenol for pain.

When a stent is left in place, older children and adults may also experience bladder spasms, which is pain in the bladder and low back that comes in waves, like a muscle cramp, particularly with voiding (peeing). To help with this, you should give ibuprofen and a bladder muscle relaxant named oxybutynin (also called Ditropan). Tamsulosin (also called Flomax) may also help with bladder spasms and can help stone passage. We usually recommend tamsulosin for a few weeks after surgery.

Some people experience nausea and vomiting after stone surgery. If so, we can prescribe some medicine to help (Zofran). If the nausea and pain are so bad after surgery that you/your child cannot keep even a small amount of fluids down despite
taking the medicines described above (ibuprofen, Norco, Zofran, oxybutynin, and tamsulosin) please call our office for admission for

Narcotics and oxybutynin both may cause constipation, so you may wish to increase fruits and vegetables during recovery. If the patient develops constipation, which can make bladder spasms worse, any over-the-counter laxative (such as Miralax) can be used for relief.

We may recommend antibiotics after this surgery depending on multiple factors.

Fever

Temperatures even as high as over 101° can be normal the first night after surgery. Fevers and irritability the first few days after surgery may indicate a virus or ear, throat or lung infection. You should call your primary care physician if this occurs.

Urine infections can occur, usually 3-5 days following surgery. If you/your child has a fever more than 101° around this time, please email or call our office for instructions.

Concerns

Pain and nausea are very common after this surgery. However, it is very unusual to develop a problem that requires urgent attention, especially if you use all the medications listed above. If you have questions we encourage you to contact our nurse during regular office hours by emailing through the secure patient portal at parcurology.com.

For urgent issues you can reach us by calling 214 618 4405.

Please do not take your child to the emergency room with questions or concerns about his wounds without first contacting us. Nearly all pain and/or fever issues can be addressed without having to visit an emergency room!

Follow up

We normally schedule the first follow up with your surgeon between 1-3 months after the operation with an ultrasound.