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Direct Vision Internal Urethrotomy (DVIU)

Post-Operative Care Instructions for Patients

THE FIRST WEEK

- Rest the day of surgery; most people resume light activity the next day.
- **Drink plenty of water** to keep urine flowing and reduce clotting.
- Avoid constipation and straining — use a stool softener.

CATHETER CARE

- Keep the drainage bag **below bladder level** at all times.
- Wash around the catheter daily with soap and water.
- **Secure the catheter to your leg** — tugging is painful and can injure the healing urethra.
- Empty the bag when about two-thirds full.
- Blood and sediment in the bag are normal.
- Some urine leaking around the catheter can happen with bladder spasms; call if it is constant.

Catheter removal appointment: _____

MEDICATIONS

- Acetaminophen (Tylenol) or ibuprofen for discomfort.
- A bladder antispasmodic may be prescribed for spasms.
- Finish the entire antibiotic course.
- Resume blood thinners when your surgeon tells you to.

ACTIVITY

- No heavy lifting over 10 pounds for 2 weeks.
- No strenuous exercise or cycling for 2 to 4 weeks — **cycling puts direct pressure on the healing urethra.**
- **No sexual activity for about 2 to 4 weeks**, or until cleared.
- No driving while taking narcotic pain medication.
- Desk work in a few days.

AFTER THE CATHETER COMES OUT

- Expect burning and a weak stream at first; this improves over days.
- Blood in the urine on and off for a week or two.
- **Pay attention to your stream.** Note whether it is strong and steady.

SELF-DILATION, IF YOU WERE TAUGHT IT

Many patients are taught **clean intermittent self-catheterization** to keep the channel open while it heals. If this was recommended:

- Follow the schedule you were given — often daily at first, then tapering over months
- Use the catheter size you were given, with plenty of lubricant, and never force it
- **Call us if you cannot pass the catheter** — this may mean the stricture is recurring

WATCHING FOR RECURRENCE — LONG TERM

Strictures commonly recur, often gradually. Call us if you notice your stream weakening, splitting or spraying, straining to urinate, incomplete emptying, or urinary infections returning. **Catching a recurrence early gives you more options.**

Follow-up appointment: _____

CALL THE OFFICE RIGHT AWAY IF YOU HAVE

Call 909.236.3333

- **Inability to urinate after the catheter is removed** — this needs prompt attention
- A catheter that stops draining
- Fever over 101°F or shaking chills
- Heavy bleeding or large clots
- Severe pain not controlled with your medication
- Increasing swelling, redness, or pain in the penis, scrotum, or perineum
- Inability to pass your self-dilation catheter

If you have severe symptoms or an emergency, go to the nearest emergency room.
