



1818 N Orange Grove Ave, Suite 101, Pomona, CA 91711 • 909.236.3333 • FHUrology.com

Percutaneous Nephrolithotomy (PCNL)

Post-Operative Care Instructions for Patients

THE FIRST TWO WEEKS

- Rest, but **walk several times a day** starting the day after surgery to prevent blood clots and pneumonia.
- **Drink plenty of water** — enough to keep your urine light yellow.
- Expect to feel more tired and sore than you would after a smaller stone procedure. This is normal; there is an incision through muscle.
- Use a pillow to splint your flank when coughing.
- **Deep breathing and coughing exercises several times daily** — this prevents pneumonia, especially important after flank surgery.

INCISION AND TUBE CARE

- Keep the incision clean and dry. You may shower after 48 hours unless told otherwise; pat dry.
- **No baths, pools, or hot tubs until cleared.**
- Some drainage from the tract site for several days is normal — change the dressing as needed.
- If you have a nephrostomy tube, keep the bag below kidney level, secure the tube, and empty regularly.

Nephrostomy tube removal: _____ Stent removal: _____

MEDICATIONS

- Take pain medication as prescribed; transition to acetaminophen and ibuprofen as you improve.
- **Take a stool softener daily** while on narcotic pain medication — constipation after this surgery is miserable.
- Finish the entire antibiotic course.
- **Resume blood thinners only when your surgeon tells you to.**

ACTIVITY

- **No lifting over 10 pounds for 4 weeks.**
- No strenuous exercise, running, or cycling for 4 to 6 weeks.
- No driving while taking narcotic pain medication.
- Desk work in 2 to 3 weeks; physical work 4 to 6 weeks.
- Climbing stairs and short walks are encouraged from the start.

WHAT IS NORMAL

- Blood in the urine for **1 to 2 weeks**, sometimes with a heavier episode as scabs separate
- Flank soreness and bruising
- Fatigue for several weeks
- Passing small fragments

- A low-grade temperature under 101°F in the first day or two

FOLLOW-UP IMAGING — DO NOT SKIP THIS

Imaging is done after surgery to confirm the stone is cleared and the kidney is draining.

Residual fragments are common with large stones, and a second procedure is sometimes planned. Keep this appointment even if you feel completely well.

PREVENTING THE NEXT STONE

- **Drink enough water to produce about 2 liters of urine daily.**
- Reduce salt intake.
- Stone analysis guides prevention — your results will be reviewed with you.
- A 24-hour urine collection may be recommended to identify why you form stones.

Follow-up appointment: _____

CALL THE OFFICE RIGHT AWAY IF YOU HAVE

Call 909.236.3333

- **Fever over 101°F or shaking chills** — this can indicate serious infection and needs immediate attention
- **Heavy bleeding, bright red urine that does not clear, or passing large clots**
- **Shortness of breath, chest pain, or pain with breathing** — go to the emergency room; this can indicate a lung complication
- Severe flank or abdominal pain not controlled by your medication
- Increasing redness, swelling, warmth, or pus-like drainage at the incision
- Persistent leakage of clear fluid from the tract site
- Nausea and vomiting preventing fluid intake
- Calf pain or swelling — **go to the emergency room**
- Feeling faint, weak, or lightheaded

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