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Ureteroscopy with Laser Lithotripsy

Post-Operative Care Instructions for Patients

THE FIRST FEW DAYS

- Rest the day of surgery; most people resume light activity the next day.
- **Drink plenty of water** — enough to keep your urine light yellow. This flushes fragments and reduces clotting.
- **Strain all your urine** if you were given a strainer, and bring any fragments to your follow-up for analysis.
- Walk several times a day.

LIVING WITH YOUR STENT

If a stent was placed, expect it to be noticeable. These are all normal and stop when the stent is removed:

- Urgency and frequency, sometimes intense
- **A pulling or aching sensation in the flank, especially while urinating** — this is urine traveling up the stent and is expected
- Blood in the urine, often worse after activity
- Discomfort at the bladder or tip of the penis

If your stent has a string, keep it taped to your thigh or abdomen and do not pull it unless specifically instructed. Be careful when wiping.

Stent removal date: _____ — this appointment is not optional. A stent left too long becomes encrusted and can cause serious problems.

MEDICATIONS

- **Ibuprofen works particularly well** for stent discomfort and stone pain — take with food unless told to avoid it.
- Acetaminophen (Tylenol) may be added.
- Use narcotic pain medication sparingly; take a stool softener with it.
- **Tamsulosin (Flomax)** is often prescribed to reduce stent discomfort — take it as directed.
- A bladder antispasmodic may be prescribed for urgency.
- Finish any antibiotic you were prescribed.
- Resume blood thinners when your surgeon tells you to.

ACTIVITY

- No heavy lifting over 10 pounds while the stent is in.
- Avoid strenuous exercise and cycling until the stent is out — activity increases bleeding and discomfort.
- Desk work in 1 to 3 days.
- No driving while taking narcotic pain medication.

AFTER THE STENT COMES OUT

Expect flank cramping and burning for a day or two as the ureter returns to normal. Ibuprofen helps most. The stent symptoms resolve quickly — most people feel dramatically better within a day.

PREVENTING THE NEXT STONE

- **Drink enough water to produce about 2 liters of urine daily** — this alone substantially reduces recurrence.
- Reduce salt intake.
- Send in your stone fragments for analysis; the composition guides prevention.
- Your urologist may recommend a 24-hour urine collection and blood tests 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** — especially with flank pain, this can mean an infected obstructed kidney and is an emergency
- **Severe flank pain not controlled by your pain medication**, or pain that is worsening
- Nausea and vomiting preventing you from keeping fluids down
- **Inability to urinate**
- Heavy bleeding or large clots
- A stent string that comes out or the stent appearing to have moved
- Calf pain, swelling, chest pain, or shortness of breath — **go to the emergency room**

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