



COMPREHENSIVE

UROLOGIC CARE

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Ureteroscopy and Laser Lithotripsy/Stone Extraction

Postoperative Instructions

Ureteroscopy involves placing a small flexible scope into the bladder and up the ureter. This can then be used to treat kidney stones (either by fragmenting them with a laser or extracting them out with a basket-device) or to investigate kidney obstruction, blood in the urine, or abnormal findings on imaging tests. There are no incisions or sutures, but a temporary ureteral stent may be left that facilitates stone-fragment passage and healing after the procedure.

DIET:

You may resume a normal diet as soon as you feel ready after your procedure. It is common for 24 hours after anesthesia to avoid heavy meals and start slowly with clear liquids. Alcoholic beverages are best avoided in the first 24 hours and while taking any narcotic pain medications. It is important to drink plenty of water (6-8 glasses daily) after your Ureteroscopy.

ACTIVITY:

You can resume normal daily activities as soon as you feel ready after your procedure. It is common for many patients have discomfort for several days that limits their activities.

MEDICATIONS:

Your urologist will likely prescribe a narcotic pain medication-take this as needed per the instructions. Note that these medications can cause upset stomach and be constipating. You may also be prescribed additional medications that soothe the urinary tract and/or minimize spasms of the bladder. An alpha-blocker (tamsulosin, uroxatral) may be prescribed to lessen stent-related discomfort. A preventative antibiotic may be given for a 24-hour period after your surgery.

It is important that if you take a daily blood-thinning/anti-platelet medication (Coumadin/warfarin, aspirin, Advil/Motrin, Lovenox, Pradaxa, Eliquis, Xeralto, Plavix, etc.) that you only restart this as instructed by your physicians.

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BOWELS:

It is important to avoid constipation as you recover from your ureteroscopy. Drink plenty of fluids (especially water). Narcotic pain medication can be constipating and it is important to take an over-the-counter stool softener/laxative to help prevent constipation (Miralax, milk of magnesia, Colace, etc.).

EXPECTED SYMPTOMS:

It is common to have pain or a burning sensation when urinating, urgency to urinate frequently, bladder spasms, and blood in the urine for several days after your procedure. If your urologist left a ureteral stent in place, you may have discomfort in the back, especially after urinating. If you had renal or ureteral stones treated you may see gravel or debris pass intermittently in the urine. Contact us for worsening/severe pain and/or burning, fevers and chills, severe bleeding with passage of large blood clots, or inability to pass urine.

FOLLOWUP APPOINTMENT:

Our office will contact you to schedule your follow-up appointment, which may be to have your ureteral stent removed. This will typically be in 1-2 weeks. If you had renal or ureteral stones treated, your urologist may want to have a KUB X-ray done at the office prior to removing your stent.