

INSTRUCTIONS FOR URETEROSCOPY AND/OR STENT PLACEMENT PROCEDURE

Tri County Urologic Associates

Day time phone: 610.323.5550 (Pottstown) or 610.935.9010 (Phoenixville)

Emergency Phone after 5 pm 610.792.2871

NATURE OF THE PROCEDURE

Ureteroscopy entails the passage of a very small fiber-optic scope (telescope) into the bladder and up into the ureter and possibly up into the kidney. This is generally done under deep sedation (MAC), general or spinal anesthesia. The bladder, ureter and the inside ducts of the kidney can be viewed on a monitor. It is sometimes necessary to dilate the ureter with a balloon or other instrument in order to pass the fiber-optic scope up into the kidney. It is not uncommon to use a laser to break up a stone, a basket to remove a stone or to perform a biopsy if there is suspicion of a malignancy. The length of the procedure can vary from 30 minutes to 1 hour or more. Because the ureter can swell and cause the obstruction of urine from flowing from the kidney and into the bladder, it is most often necessary to place a ureteral stent into the bladder at the conclusion of the procedure. Insertion of a ureteral entails the placement of a very small straw-like tube that allows drainage of the urine from the kidney into the bladder. In some cases, particularly in men, a catheter may be placed into the bladder at the end of the procedure.

INSTRUCTIONS PRIOR TO ENDOSCOPIC PROCEDURE

Do not eat or drink anything including water after midnight the evening prior to the operation. Do not smoke for at least 12 hours before or after the procedure and do not drink alcohol 24 hours prior to the procedure. Do not take aspirin or any aspirin-containing products or drugs containing Ibuprofen for 10 days prior to the scheduled treatment. You can take Tylenol or ask your physician for recommendations. If you are taking anti-coagulants such as Coumadin, please consult with your physician, as this medication may need to be discontinued 5 days prior to the procedure. **If you have had kidney or bladder x-rays taken at institutions, other than the hospital at which you are having your procedure performed, please check with our office scheduling staff to determine you need to bring them with you the day of the procedure.** Leave all valuables at home and wear comfortable clothing. If you have HMO insurance, it is your responsibility to obtain referrals from your primary care physician.

DAY OF CYSTOSCOPIC PROCEDURE

It is common to have blood in the urine. Keep in mind that it only takes one drop of blood to make a whole gallon of water red. It is important to drink plenty of fluids to keep the bladder well flushed after the procedure. You may be given Percocet to alleviate discomfort.

AFTER THE URETEROSCOPIC PROCEDURE

Blood in urine or bladder irritation may continue for a few days after the procedure which can be alleviated by rest, drinking plenty of fluids, Tylenol and certain medications (Percocet, Vicodin, Pyridium, and/or Prosed DS).

To prevent infections you may be given an antibiotic to take for 3 to 5 days after the procedure. You should contact our staff if you experience a temperature of 101° or greater. Other signs of

infection may include increasing burning, frequency, and urgency of urination. If you are unable to urinate for more than 4 hours, or if you are having mostly blood in your urine that is dark thick maroon colored with clots please contact our office.

We may provide you with Pyridium that is a medication that can alleviate flank pain or burning with urination. This tiny pill that can be taken approximately every 8 hours as needed for burning. This medication will turn the urine to an orange-yellow color. It is also available over the counter and no prescription may be necessary. Another similar medication used to relieve burning or flank discomfort is Prosed DS which can be taken up to 4 times a day. This can turn the urine green. Use these medications only as needed. Sometimes burning can be exacerbated by certain foods such as coffee, caffeinated substances, spicy foods and citrate products. In men, the prostate can become swollen and it can become increasing difficult to empty the bladder. Medications called alpha-blockers (Flomax, Hytrin and Cardura), are sometimes prescribed to prevent the inability to urinate. You will be provided this prescription if your physician feels that you are at an increase risk for this type of problem.

IF A STENT IS PLACED, IT IS VITALLY IMPORTANT THAT YOU MAKE A FOLLOW UP VISIT TO HAVE YOUR STENT REMOVED.

FOLLOW-UP APPOINTMENTS AND POSSIBLE STUDIES NEEDED

Call 610.323.5550 (Pottstown office) or 610.935.9011 (Phoenixville office) to schedule an appointment to:

___ see Dr. Rose Leech Moreno Kabler or Kalra in ___ day(s) or ___ week(s)
 for ___ routine follow-up
 for ___ cysto and stent removal (stent ON / Off string)

___ see nurse or _____ medical assistant in ___ day(s) or ___ week(s)
 for ___ Foley removal in ___ day(s) or ___ week(s)
 for ___ ureteral stent removal
 for ___ other

___ arrange for:
 ___ KUB x-ray just prior to visit
 ___ CT Scan with without contrast of the Abd Pelvis
 in in ___ day(s) or ___ week(s)

MEDICATIONS

Take ___ Levaquin one daily until finished.
 ___ Cipro XR once daily until finished.
 ___ Bactrim DS one twice daily until finished.
 ___ Prosed DS one 4 times a day as needed for burning.
 ___ Pyridium one 3 times a day as needed for burning.
 ___ Vicodin one to two every 4 hours as needed for pain.
 ___ Percocet one to two every 4 hours as needed for pain.