

Having a Ureteral Stent

My stent was inserted (put in) on:

My stent will be taken out or replaced on:

Urologist: _____

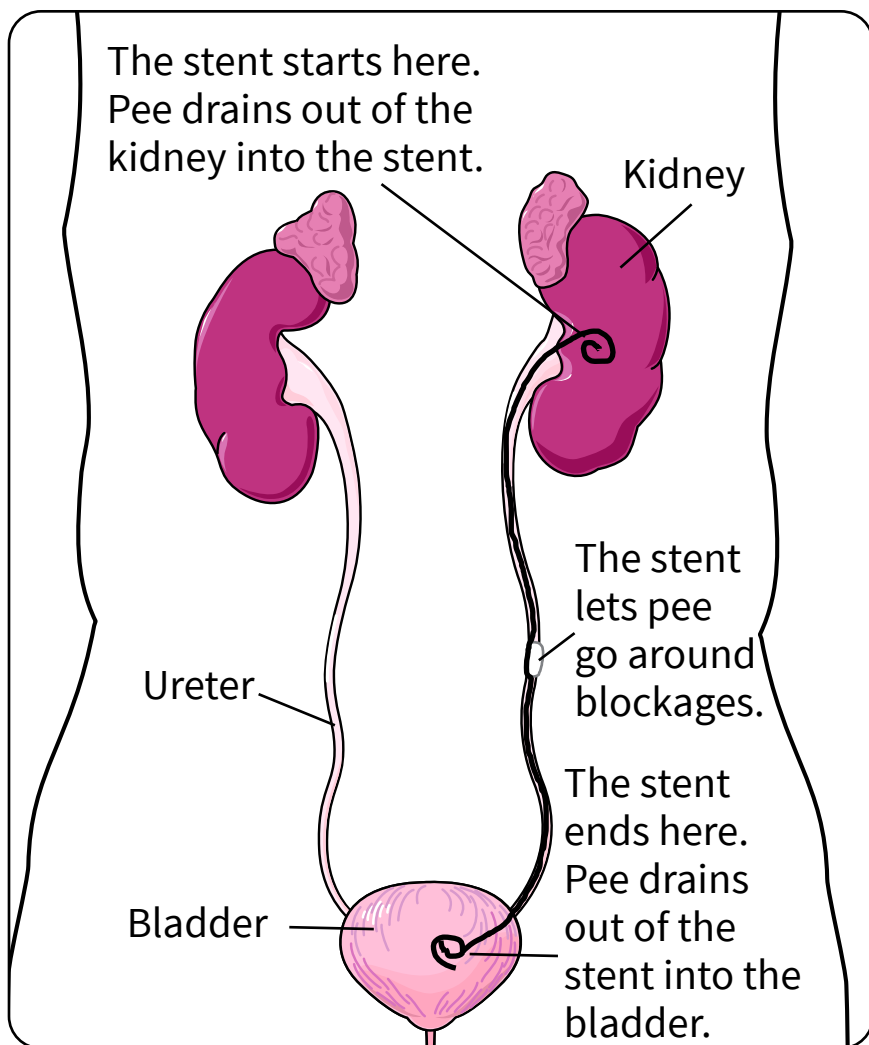
Clinic phone: _____

Having a Ureteral Stent

If you have had surgery on your kidneys, ureters, bladder, and/or your urethra, you may have a ureteral stent.

What is a ureteral stent?

- A ureteral stent is a long (about 25 cm), hollow tube with a coil at each end. It is put in your ureter (tube that drains urine [pee] from the kidney into the bladder) to help urine pass through. The coils keep it in place.
- A ureteral stent helps:
 - › drain pee from your kidney after surgery.
 - › allow your ureter to heal.
 - › lower the risk of possible complications (like a blockage of the ureter because of swelling, a blood clot, or a kidney stone).
 - › pass small kidney stones after surgery.



How is a ureteral stent put in?

- The stent is put in during a cystoscopy. Your urologist (urinary tract specialist) will use a cystoscope to look inside your urethra (where pee comes out) and bladder. A cystoscope looks like a thin telescope with a lens and a light on the end.

How long will I have the stent?

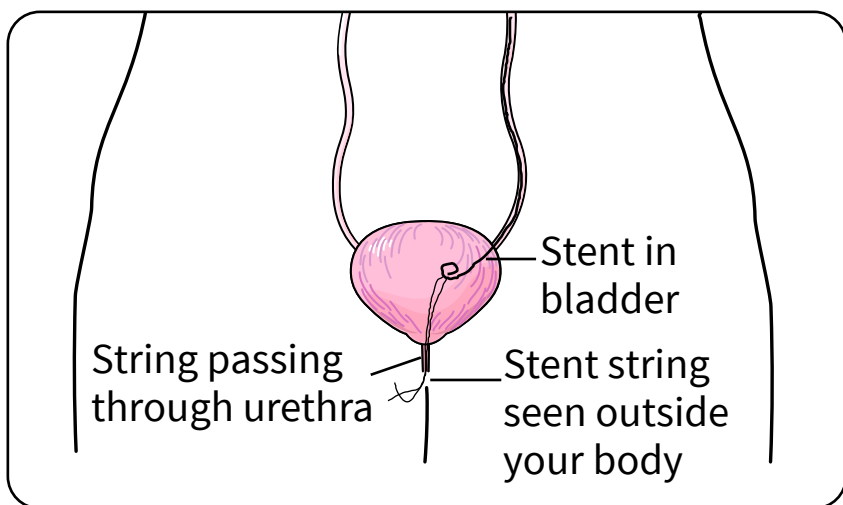
- The stent can stay in for up to 3 months.
- **If you have had a stent for more than 3 months**, call your urologist to ask about getting it changed or taken out.
- If you will need a stent for a long time, your urologist may use a different type (like silicone) that can be left in for longer than 3 months.
- If you think you are overdue for getting your stent changed or taken out, check with your urologist's office.

How do I take care of my stent?

- Follow your urologist's instructions.
Remember to:
 - › Drink plenty of fluids (like water, juice, or drinks **without caffeine**), unless you have been told not to because of another medical condition. Water is best.
 - › Take pain medications and any other prescribed medications to help with discomfort and/or pain from the stent and surgery

How is a stent taken out?

- There may be a string attached to your stent.
- **If you have a string**, it will be hanging out of your urethra. Your urologist may tape the string to your leg or your belly. **Be careful not to pull on or snag the string, as this can move the stent.**
 - › Your urologist will tell you when to take out the stent.
 - › When it is time to take out the stent, pull on the string until the stent comes out. This may cause mild discomfort, but should not be painful.



- **If you do not have a string**, you will have a procedure called a **local cystoscopy**.
 - › Your urologist will put numbing gel in your urethra to help with any pain.
 - › They will put the scope into your bladder to find the coil of the stent and gently pull it out of your urethra.

If you have a stent that does not have a string:

- If your stent needs to be taken out in the clinic and you do not have an appointment within 14 days (2 weeks), call your urologist.

What are the possible side effects?

- The stent is made for you to be able to do your usual activities.
- It is normal to feel the stent during some activities.

Side effects may include:

- Discomfort and/or pain
 - › This is usually a dull ache in your sides and groins, which may get worse when you pee.
- Blood in your pee
 - › This is normal. Drinking plenty of fluids can help lower the chance of blood clots in your pee.
- Urinary tract symptoms
 - › Feeling like you have to pee right away
 - › Peeing more or feeling like you have to pee all the time
 - › Feeling like you cannot empty your bladder fully
 - › A burning feeling when you pee or move
 - › Bladder muscle spasms (pelvic cramps)
- Urinary incontinence
 - › Feeling like you have to pee right away
 - › Leaking pee. This may be a sign that your stent has moved (see page 7).
- Nausea (upset stomach)
- Vomiting (throwing up)

What happens if my stent moves?

- Most stents do not move.
- **If your stent does move:**
 - › You may have leaks and need to wear an incontinence pad (this is not the same as a period pad). This is usually **not** an emergency.
 - › **Call your urologist to ask what to do.**
- **If you think your stent has moved and you have leaks, watch for any of these symptoms:**
 - › Fever (temperature above 38 °C or 100.4 °F)
 - › Chills
 - › Nausea
 - › Vomiting

If you have any of these symptoms, go to the nearest Emergency Department right away.

Will a stent affect my usual activities?

- Most people can go back to their usual activities 2 to 3 days after their stent is put in.

Being active

- It is OK to be active or play sports while you have a stent.
- Activity may cause discomfort or blood in your urine. **It is important to rest if an activity is painful or makes your symptoms worse.**

Work

- You can keep working as usual.

Social life

- A stent does not usually affect your social life.
- If you have leaks or a sudden urge to pee, you may need to pee more often.

Sex

- If you have a stent with a string, **do not** have sex until the stent is taken out. Having sex may move the stent.
- If you have a stent with no string, you can have sex.

Travel

- You can travel with a stent. Talk with your urologist or your primary health care provider (family doctor or nurse practitioner) before travelling.

Does a stent raise my risk of getting urinary tract infections (UTIs)?

- A stent does not raise your risk of UTIs. It may lower your risk of infection by letting pee pass out of your body.

**Go to the nearest Emergency
Department right away if you:**

- › Have a fever (temperature above 38 °C or 100.4 °F)
- › Have chills
- › Have pain that you cannot handle or that is getting worse even after taking pain medications
- › Cannot eat or drink
- › Have a lot of blood in your pee that looks like ketchup (red, thick, and solid) and you cannot see through the blood
- › Are having trouble peeing or emptying your bladder

- It is normal to have some blood in your pee after a stent is put in. The colour of your pee may be light pink, reddish, or even brownish, but you should be able to see through it.
- Medications to help with burning when you pee may turn your pee orange or blue.

Notes:

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find all patient education resources here:
www.nshealth.ca/patient-education-resources

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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