

# Radical Kidney Removal (Radical Nephrectomy)

My surgery date: \_\_\_\_\_

Time: \_\_\_\_\_

My surgeon:

\_\_\_\_\_

Clinic phone: \_\_\_\_\_

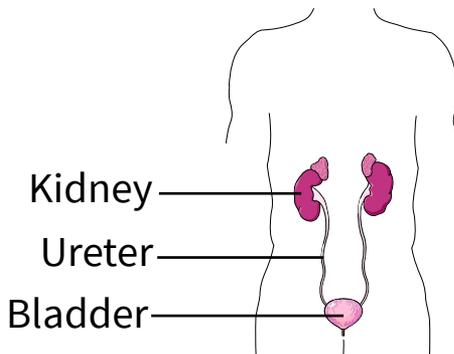
# Radical Nephrectomy (Kidney Removal)

## What is a radical nephrectomy?

- This is a surgery to remove:
  - › 1 kidney
  - › The tissues around the kidney
  - › Your adrenal gland and nearby lymph nodes, if needed

## How do my kidneys work?

- A kidney is the same shape as a kidney bean. It is about the size of your fist. The kidneys are just above your waist and are partly covered by your rib cage.
- The kidneys make urine (pee) by taking away waste material from your blood that your body does not need. The urine then travels through hollow tubes (ureters) to the bladder. It is stored here until you urinate (pee).



## Can I be healthy with only 1 kidney?

- Yes, if your other kidney is healthy, it can do all the work.
- You will need to be more careful to protect your remaining kidney from getting hurt.
  - › For example, after your surgery, we recommend that you do not play contact sports (like football, hockey, rugby).

## What will happen during the surgery?

- **Laparoscopic (keyhole) radical nephrectomy:** Your surgeon will make a few small incisions (cuts) and 1 larger incision in your abdomen (belly area). Your kidney will be taken out through the larger incision.
- **Open radical nephrectomy:** Your surgeon will make 1 large incision.

## Before your surgery

Plan to have a responsible adult drive you home after your surgery. **You will not be able to drive yourself.**

- Keep all appointments (pre-surgical consultations) with your surgeon and your anesthesiologist (a doctor who puts you to sleep for your surgery).

- Tell them if you have any:
  - › Medical conditions
  - › Allergies

## Medications

- Tell your health care team about all your medications (including prescription and over-the-counter products, inhalers, creams, eye drops, patches, herbal products, vitamins, and supplements).
- You may be told to stop taking certain medications (like blood thinners) several days before your surgery.
- Your health care team will tell you what stool softeners to use for 7 to 14 days (1 to 2 weeks) before your surgery and for 6 weeks (1 ½ months) after your surgery.
- **At least 1 week before your surgery**, tell your surgeon or nurse if you are taking:
  - › ASA (acetylsalicylic acid, Aspirin®)
  - › Anti-inflammatory medication (medication usually used for arthritis)
  - › Warfarin or another prescribed blood thinner
  - › Any other medication that might be a blood thinner
  - › Vitamin E
  - › Garlic extract



- To help you get ready for your surgery, ask a member of your health care team for pamphlet 1395, *Planning for your Hospital Stay After Surgery - Halifax Infirmary (HI), Victoria General (VG), Dartmouth General Hospital (DGH)*, scan the QR code below, or visit:
  - › [www.nshealth.ca/patient-education-resources/1395](http://www.nshealth.ca/patient-education-resources/1395)

Scan the QR code on your device (open the camera on your device, point the camera at the code, and tap the banner or border that appears)



## Night before surgery

- **Do not eat or drink anything** after midnight the night before your surgery, unless told otherwise by the anesthesia group. **Your stomach must be empty before your surgery.**
- Shower the night before or the morning of your surgery. Use an antibacterial soap as told by your health care team.



## Day of surgery

- Leave all valuables (like jewelry, money, credit cards, cheque books) at home. The hospital is not responsible for any lost items.
- **Do not** wear any jewelry, including toe rings. Take out piercings in any body part (like the nose, belly button, tongue, or ear) at home.
- Remove any makeup and nail polish.

## What should I bring to the hospital?

- Your provincial (MSI) health card
- All of your medications in their original containers (including prescription and over-the-counter products, inhalers, creams, eye drops, patches, herbal products, vitamins, and supplements)
- CPAP machine (if you use one)
- Walking aids (like crutches, a cane), if needed
- Loose-fitting clothes to wear home (like a sweat suit and comfortable shoes)
- Wear your dentures
  - › Just before you go to the operating room (O.R), we will ask you to remove them and put them in a denture cup labelled with your name.
- A storage case for your hearing aid, if you have one

- A storage case for your glasses, if you are wearing them
  - › We will take your glasses just before you go to the O.R.
  - › You get your glasses back in the recovery area.
- **Do not** wear contact lenses.
  - › If this is not possible, bring your lens container and cleaning solutions.
  - › Remember to tell your nurse that you are wearing contact lenses.
  - › You must remove them before you go to the O.R.
- After you arrive, you will be taken to the pre-operative (pre-op) area. We will ask you to change into a hospital gown.
- A member of your health care team will check your vital signs (like heart rate, breathing) and start an intravenous (I.V.) in your arm or hand.
- You will have **general anesthesia** (medication to put you to sleep for surgery). Talk with your anesthesiologist about any questions or concerns you may have.

## After surgery

- After surgery, you will be taken to a recovery room. Your health care team will check your vital signs and ask about your pain.
- You may have pain at the incision site. Talk with your health care team about ways to manage your pain. Take any prescribed pain medications as directed.

## Incision care

- Keep the incision site clean and dry. Follow your health care team's instructions on how to care for your incision, including when to change the dressings.
- Your incision will be closed with staples or Steri-Strips™ (strong pieces of tape).
- **If you have staples:**
  - › Your nurse may take the staples out before you leave the hospital.
  - › If they do not, you will need to make an appointment with your primary health care provider (family doctor or nurse practitioner) to take them out 7 to 10 days after your surgery.
- **If you have Steri-Strips™:**
  - › You can peel them off when they get loose. This is usually about 7 to 10 days after surgery.

## **Drainage tube**

- You may have a drain near the incision for a few days. This is to drain blood and fluid from the area.

## **Eating and drinking**

- For about 24 hours (1 day) after your surgery, you will likely have an I.V.
  - › You will get fluids through the I.V. to make sure you stay hydrated (have enough fluids).
- When your surgeon feels you are ready to eat and drink on your own, your health care team will take out your I.V.
- Drink lots of fluids, unless you have been told to limit the amount of fluids you drink.
  - › Start with clear fluids (like water).
- You can go back to your usual eating habits slowly over time.
  - › Follow any nutrition guidelines from your health care team.

## Bladder catheter

- You may have a catheter in your bladder that is connected to a collection bag. **The bag should always hang below your bladder.**
- The catheter is usually taken out 24 to 48 hours (1 to 2 days) after surgery.

## After you leave the hospital

### Discomfort and/or pain

- You may get a prescription for pain medication for a short time. Take it as told by your health care team.
- **Do not drink alcohol** while taking pain medication.
- **Do not drive** while taking pain medication.



## Healthy eating



- It may take time for your appetite (feeling hungry) to go back to normal. During this time, it may help to eat smaller meals more often.
- Healthy foods will help your body heal.
- Pain medications can cause constipation (not being able to poop). Eating foods that are high in fibre (like bran, vegetables, and fruit) can help with this.
  - › Your surgeon may have told you about taking a stool softener (medications to help you poop). Take this medication as prescribed or follow the directions on the package.
- Drink 8 glasses of water a day (unless you are told not to because of another health condition).
- **Remember:** You do not need to have a bowel movement (poop) every day to be healthy.

## Activity

- **For 4 to 6 weeks after your surgery:**
  - › **Do not** lift anything heavier than 10 pounds (like children, laundry, groceries, luggage).
  - › **Do not** do strenuous (hard) exercise or work (like move furniture, mow the lawn, or shovel snow).
  - › **Do not** do any activities that strain your abdomen (like play sports or vacuum).
  - › **Do not** take long car trips. If you have to take a long car trip, have someone else drive.
- You may find that you will get tired easily and need extra rest. Your energy will come back slowly over time.
- Walking is the best exercise after surgery. Start slowly and go farther each day.
- You can have sex when you feel well enough.
- **Do not** drive for 2 weeks after your surgery.
- **Do not** drive while taking pain medication.
- **Always wear a seatbelt** to lower the chance of injuring your kidney.
- When you can go back to work will depend on your general health, your recovery, and the type of work you do. Talk about this with your surgeon.

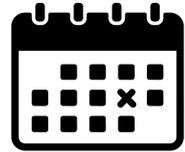
## Emotional support

- It is normal to feel emotional after surgery. Ask your support persons or a mental health professional for support, if needed.
- For more information, scan the QR code, or visit:
  - › <https://mha.nshealth.ca/en>



## Follow-up care

- You will get an appointment to see your surgeon after you leave the hospital.
- **Keep all follow-up appointments with your surgeon.** This will let them check your recovery.



**Call your surgeon or your primary health care provider if you have any of these symptoms:**

- › Fever (temperature above 38 °C or 100.4 °F)
- › More pain or swelling at the incision site
- › Trouble breathing
- › Nausea (upset stomach) or vomiting (throwing up) that does not get better
- › Blood in your urine

**If you cannot reach your surgeon or your primary health care provider, call 911 or go to the nearest Emergency Department right away.**

**Your recovery is a very important part of your treatment. Following the guidelines in this pamphlet will help you recover well.**

# Notes:

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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](http://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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