

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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Percutaneous Nephrolithotomy

Urologist: _____
Clinic phone: _____

Percutaneous Nephrolithotomy

- You have a large stone in your kidney. Your urologist (urinary tract specialist) has recommended a percutaneous nephrolithotomy to treat your stone.
- You will stay in the hospital for 1 to 2 days.
- This pamphlet will help you learn about your surgery and care after you leave the hospital.

Day of surgery

- You will be taken to the Operating Room (O.R.).
- **You will be asleep during the procedure.**
- We will use general anesthetic (freezing) so that you will not have any pain.
- Your urologist will use a cystoscope to look inside your urethra (where urine [pee] comes out) and bladder.
- The urologist will then insert (put) a needle through your back into your kidney. They will use the needle to insert a hollow tube into your kidney.
- They will then use a special instrument that lets them see the inside of your kidney through the hollow tube. They will then be able to remove or crush your kidney stone.

After you leave the hospital

If you have a nephrostomy tube:

- Once the tube is removed, you will need a bandage on the area until it is fully healed. This usually takes a few days.
 - › You may see leakage. Your nurse will teach you how to change the bandage, if needed.
- Drink lots of fluids.

Call your primary health care provider (family doctor or nurse practitioner) or surgeon if you have:

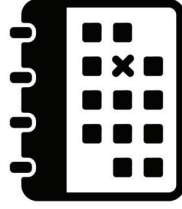
- › Fever (temperature above 38 °C or 100.4 °F)
- › Chills
- › Pain
- › Blood in your urine after your stent is taken out
- › Cloudy and/or bad-smelling urine

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

If you only have a stent:

- You will not need a visit from a VON nurse.
- There may be a string coming out of your urethra. Make sure it does not get pulled on or the stent may come out.

Follow-up appointment

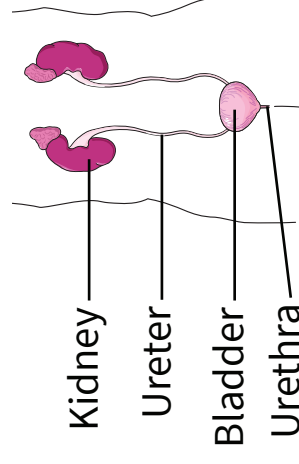


- Before leaving the hospital, you will get a follow-up appointment to see your urologist.
- If you have a stent, your urologist will see you in the Urology Clinic to remove it.
 - › If the stent has a string, your urologist will remove the stent by pulling on the string.
 - › If the stent does not have a string, your urologist will do a cystoscopy to remove the stent. You will not need to be put to sleep for this procedure.

- Your urologist may order an X-ray, a CT scan, or an ultrasound before removing the stent or nephrostomy tube.
 - › You will need to have these tests before your follow-up appointment.

- They will remove as much of the stone as they can. Everything is done through the tube, so you will not have a big incision (cut). Having a small incision will make your recovery easier.
- At the end of your surgery, your urologist will put a:
 - › Ureteric stent: A soft tube placed in your ureter (tube that carries urine).
- or
 - › Nephrostomy tube: A tube inserted through your side directly into your kidney.

This will help your kidney drain and heal.



After surgery

- You will have an intravenous (I.V.) until you are eating and drinking well.
- You may be given antibiotics through the I.V. or by mouth.
- **If you have a nephrostomy tube** in your side, it will drain urine. It will stay open until your urologist feels it should be clamped (closed off).

- You will have a bandage around the nephrostomy tube. **If the bandage gets wet, tell your nurse.**
 - › It is common to have some leaking around the tube. If it leaks a lot, the nurse may put a plastic pouch over the area to collect the drainage.
- You will have a Foley catheter to drain your bladder. A Foley catheter is a soft, plastic or rubber tube left in the bladder to drain urine. This is usually taken out the morning after your surgery.
- You may have another tube, called a stent, placed to drain urine from both kidneys into your bladder.
- There will be a bandage covering the area where the surgery was done. **If the bandage gets wet, tell your nurse.**
- **Before you get up for the first time after surgery, ring your call bell so that your nurse can help you.** You can get out of bed and walk as soon as you can.
- Tell your nurse if you have any pain or nausea (upset stomach). They can give you medication(s).
- It is common to have blood in your urine for a few days after surgery or while you have a stent.

If you have a nephrostomy tube:

- Your urologist will decide when to clamp the tube.
 - › Your nurse will monitor the amount of fluids you take in and the amount of urine you make, until they are sure that your kidney is draining well.
 - If you do well with the tube clamped for several hours, your urologist or a resident (doctor in training) will take it out, or you will leave the hospital with it still in. Your urologist will decide what is best for you.
 - If you do not do well with the tube clamped, it will be re-opened and you will leave the hospital with it still in.
 - › A VON (home care) nurse will visit you to change the bandage.
 - › Your urologist will take the tube out at a follow-up appointment.
 - **If your tube is clamped, tell your nurse if you have any of these symptoms:**
 - › Severe (very bad) pain (this could mean that your urine is not draining into your bladder)
 - › Leaking around the tube
 - › Chills
 - › Fever (temperature above 38 °C or 100.4 °F)
- They may need to re-open the tube.