

Having ureteroscopic stone removal (Day case)

Department of Urology

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Information for patients

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Introduction

The tests that you have had show that you have stones in your ureter or kidney. The aim of the procedure that you are going to have is to remove these stones, or break them into smaller pieces.

How is the procedure performed?

You will usually have a general anaesthetic (you will be asleep) for this procedure. Before the procedure you will usually be given intravenous antibiotics (into your vein).

The surgeon will insert a telescope along your water pipe (urethra) into your bladder. Using X-ray guidance, a flexible guide wire will be inserted into the tube (ureter) that runs from your kidney to your bladder on the affected side. A longer telescope will then be inserted and passed into your ureter or kidney to locate the stone(s).

The stones will be broken into smaller pieces using a laser, and the surgeon may then use special instruments to remove the pieces.

A plastic tube (stent) may be left in place in your ureter, and you may have a urinary catheter to drain urine from your bladder into a bag. If you have urinary catheter, this will usually be removed on the day after the procedure. You will be able to go home once you are passing urine normally.

You will either go home on the same day as the procedure, or the day after.

What are the alternatives to this procedure?

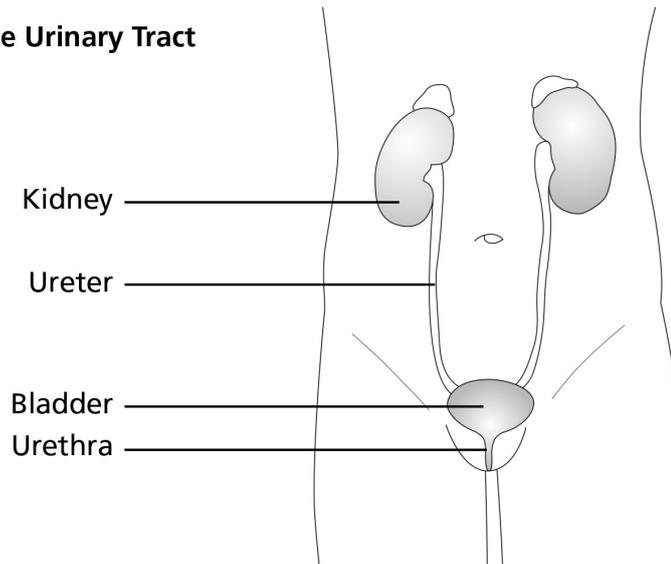
Alternatives include shock wave treatment to break the stones into smaller pieces and then allowing them to pass out in your urine.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

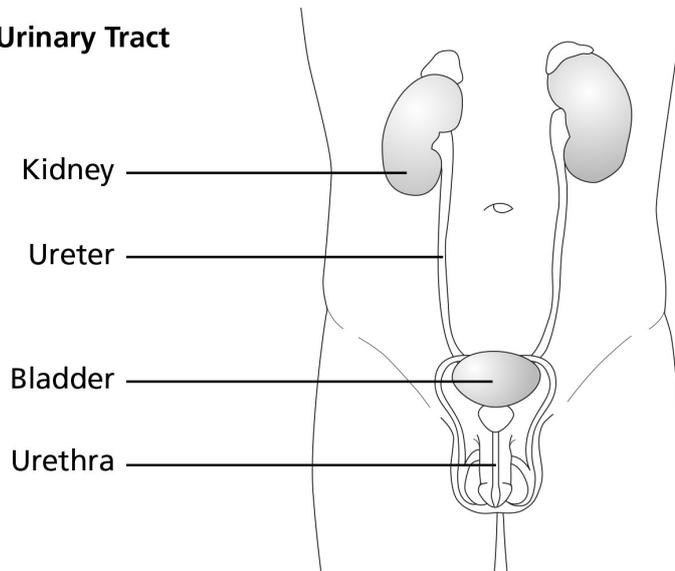
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To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

Understanding your anatomy

Female Urinary Tract



Male Urinary Tract



Are there any side effects?

As with all operations, there are associated risks involved. These include:

Common (greater than 1 in 10)

- Mild burning or bleeding on passing urine for short period after operation.
- If you have a stent in place, it may cause some discomfort, and can also cause you to pass urine more frequently or cause your urine to have blood in it.
- You may get more stones in the future.

Occasional (between 1 in 10 and 1 in 50)

- Failure of the procedure - it may not be possible for the surgeon to remove the stone if you have a narrow ureter, or if the stone has moved into part of the kidney that cannot be reached.
- Kidney damage or infection needing further treatment.

Rare (less than 1 in 50)

- Damage to the ureter, which may mean that you need either an open operation or a tube placed into your kidney directly from the back (nephrostomy) to allow any leak to heal.
- Scarring or stricture of the ureter needing further procedures to widen it.

Your procedure

Please read the following important information:

- If you are ill, or cannot keep your appointment for some other reason, please let us know as early as possible. Another patient may benefit from the cancellation of your appointment.
- If you feel worried or nervous and want to talk to someone, please feel free to ring the nurses on the Day Case Unit.

Please ring us using the following numbers; Monday to Friday 9.00am - 6.00pm.

Leicester General Hospital 0116 258 4192 (Day Case 1)

0116 258 8130 (Day Case 2)

**Outside these hours contact: Urology Emergency Admissions
0116 258 4247**

What happens before my procedure?

You will be seen in a pre-assessment clinic at some time before your operation, to make sure you are fit to have the procedure as a day case. At this appointment the nurse will go through paperwork with you and you will be given information about your procedure.

You will be told about the consent form that you will be asked to sign to give your permission for the procedure. This appointment is a good time for you to ask any questions you may have - please write these down if that will help.

Depending on your general health and your age, we may need to carry out some tests. These will be discussed with you as necessary and may include an electrocardiograph (heart tracing / ECG), swabs and blood tests.

What arrangements do I need to make?

Before you can have your procedure as a day case, you need to plan the following things:

- You must be collected by a responsible adult, who must take you home in a car or taxi following your operation.
- You must have a responsible adult at home with you for at least 24 hours after your operation.
- You must have a telephone at home.

You **must not** drive, cycle, operate machinery or drink alcohol for a minimum of 48 hours after your procedure.

Important: driving after an anaesthetic is a criminal offence, and will affect your insurance cover.

What do I need to do before my procedure?

- Read your admission letter carefully.
- Do not eat or drink anything from the time stated in your letter.
- Do not wear any nail polish, false nails or make up.
- Do not wear contact lenses.
- Do not wear any jewellery, except for a wedding ring.
- Do not bring any values with you into hospital. University Hospitals of Leicester NHS Trust cannot accept responsibility for loss or damage to personal belongings.
- Do have a bath or shower before you come into hospital.
- Do wear comfortable clothing and footwear to go home in.

Expect to wait on the unit before your procedure.

What do I need to bring with me?

On the day of your procedure please bring with you:

- **Your appointment letter.** The time you are given to arrive is not the time of your procedure. The surgeon needs to see you before the start of the list, so you may be waiting for your procedure for between two and four hours.
- **Any drugs, medicines or inhalers you are using.** Please take your necessary medication before attending; the pre-assessment nurse will advise you when you should take your medication.
- A contact number for your lift home.
- A dressing gown and slippers, if you have them.
- Something to do while you are waiting, such as a book or magazine to read.

What will happen when I am on the Day Case Unit?

You should come to the Day Case Unit and report to reception. Your details will be checked and you will be directed on to the ward or to the waiting room where a nurse will collect you.

The nurse will talk to you about your procedure and ask a few questions.

You will meet one of the surgical team who will ask you to sign a consent form. If there is anything you are concerned about or do not understand, please ask your surgeon before you sign the form.

You will also be visited by your anaesthetist - this is the doctor who will look after you while you are asleep.

The nurse will tell you when to change into your theatre gown, and then take you to the operating theatre.

Advice for after the procedure

You will return to the day ward and staff will make sure you are comfortable, and provide you with refreshments. If you have any discomfort or sickness please let the staff know so that they can help you.

You will recover on the ward until your nurse is happy that you are well enough to go home. You will need to eat and drink before you can go home. You will also need to pass urine before you go home.

If you have a raised temperature, pain or persistent burning or bleeding when you pass urine, please contact us immediately using the telephone numbers on page 3.

Pain

You may experience some burning on passing urine for a short period after the procedure. This can usually be controlled with paracetamol (or a similar pain killer). If you are unsure, contact us for advice.

Diet

You can eat and drink as normal straight away, but do not drink alcohol for 48 hours. It is best to drink plenty of fluids, at least two to three litres (four to five pints) in the first 24 hours. This will make you pass more water, flushing your bladder regularly.

Driving

You must not drive for at least 48 hours after a general anaesthetic. You will not be covered by your car insurance. Do not drive until you can keep control of your car in an emergency. You should contact your insurance company if you are not sure.

Work

Depending on your job, you will need to take one to two weeks off work after your procedure. Your surgeon can advise you about how long you need to take off work.

Sex

You can resume sexual activity as soon as you feel comfortable.

Physical activity

Do not do too much too soon. It is usual to feel some aches and pains for a few days, perhaps up to two weeks.

Holidays

Flying too soon after an operation can increase the chance of problems, and you may not be covered by your insurance: please discuss this with your insurance company.

When will the stent be removed?

If you have had a stent inserted during the procedure, we will let you know (before you go home) when the stent needs to be removed. Ureteric stents are usually removed in the outpatient clinic.

If you do not hear from the hospital regarding the removal of your stent within four weeks after discharge please contact us unless it has been specified that it needs to stay in longer.

You can help prevent further stones by changes to your diet and fluid intake. This will be explained to you in more detail in the outpatient clinic.

Contact details

If you have any concerns or questions contact us using the following telephone numbers:

Booking clerks

(for enquiries about appointment times and dates)

Telephone: 0116 258 8268
Monday to Friday 9am to 4pm

Urology Assessment Centre

Telephone: 0116 258 4632
Monday to Friday 8:30am to 4:30pm

Ward 28 / 29

Telephone: 0116 258 4247 (24 hours)

Urology Nurse Specialists

Telephone: 0116 258 4635
Monday to Friday 9am to 5pm

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਸਿ ਹੋਰ ਭਾਸ਼ਾ ਵਜਿ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk