

Kidney Stone Surgery Post-Operative Care

Activity Restrictions

Resume normal activity as tolerated. Please know that if a stent was placed, with increased activity, you may see some blood in the urine. This is normal. If it becomes very bloody, decrease activity level.

Diet

Before your child is discharged from the hospital, they should be able to drink clear liquids and keep them down without vomiting. Once your child can drink liquids, you may add progressively to his diet with:

1. A full liquid or "light" meal, which may include toast, crackers, soup or gelatin
2. Regular meals if your child tolerates the above

If your child vomits, wait approximately 45 minutes and start this process over with sips of clear liquids. Gradually increase the amount of clear liquids. When your child can tolerate them, follow the guidelines above.

Post-Operative Expectations

During surgery, your child may have a stent inserted; if so, they may experience the urge to urinate more frequently. This is normal and likely from stent irritation to the bladder. Your child may also experience kidney soreness or aching on the affected side. You should expect the urine to be pink or blood-tinged with small clots. This may continue while the stent is in place. Your child may have burning and/or pain when they urinate. If they have trouble urinating, place them in a warm bath and encourage them to drink water. Your child may have a string coming out of the urethra and taped to the penis (in boys) or the lower belly or inner thigh (in girls). **AVOID PULLING THE STRING.**

Bathing And Showering

Your child may resume bathing and showering as usual. If a string on the stent is taped to your child, shower and pat dry. If the tape starts to peel off, you may add more from home or call the office.



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Pain

Many patients' pain is controlled by taking alternating ibuprofen (Motrin) and acetaminophen (Tylenol) every three hours. You may be given a prescription for Tylenol with Hydrocodone (Hycet or Norco) if appropriate. If a narcotic pain medication is provided, most children will only need it for 1-3 days following surgery. Narcotic pain medication can cause constipation, so this should be monitored. If your child is experiencing constipation, please begin Miralax, 1 capful daily or twice daily until soft daily bowel movements resume. If this is not successful, notify our office.

You may alternate **Children's Tylenol and Motrin** as directed on the package. ****DO NOT use Children's Tylenol and Hycet or Norco together (use one OR the other), as this can lead to an overdose of Tylenol.**

If your child was given a medication called Pyridium, this is for bladder pain and urinary urgency. Please note that this will stain their urine yellow (and subsequently, everything that the urine touches may turn yellow).

If your child was given a medication called Ditropan or Oxybutynin, this is for bladder pain and spasms. Please note this may constipate your child.

If your child was given a medication called Tamsulosin or Flomax, this medication will help with ureteral stent pain.

Follow-Up

Your child will have a surgical follow-up in 4-6 weeks for a post-operative evaluation unless specified otherwise. If you do not have an appointment already scheduled, please call our office to arrange it.

When To Call the Office

- ☐ Fever more than 101.5°F
- ☐ Your child is unable to urinate
- ☐ There is active (dripping) bleeding from the surgery site
- ☐ Your child cannot keep liquids down (vomiting)
- ☐ Your child is in pain despite the use of recommended medications
- ☐ You have other questions/concerns

If you have any questions or concerns **during regular business hours**, please do not hesitate to call the urology nurse at 512-472-6134 extension 103.

During non-business hours, please call 512-406-3112 and ask to speak to the urologist on call.