

INSTRUCTIONS FOR ENDOSCOPIC LAPAROSCOPIC PYELOPLASTY SURGERY

Academic Urology-Pottstown/Phoenixville

Day time phone: 610.323.5550 (Pottstown) or 610.935.9010 (Phoenixville)

Emergency Phone after 5 pm 610.792.2871

NATURE OF THE PROCEDURE

Laparoscopic pyeloplasty involves repair of UPJ obstruction. It takes about 3-4 hours to perform. As in all laparoscopic procedures the surgeon may find the need to convert it to a traditional open operation in order to control bleeding or to complete the procedure in a safe manner.

INSTRUCTIONS PRIOR TO ENDOSCOPIC PROCEDURE

Do not eat or drink anything including water after midnight the evening prior to the operation. Do not smoke for at least 12 hours before or after the procedure and do not drink alcohol 24 hours prior to the procedure. Do not take aspirin or any aspirin-containing products or drugs containing Ibuprofen for 10 days prior to the scheduled treatment (see complete list). You can take Tylenol or ask your physician for recommendations. If you are taking anti-coagulants such as Coumadin, please consult with your physician, as this medication may need to be discontinued 5 days prior to the procedure. If you have had kidney or bladder x-rays taken at institutions, other than the hospital at which you are having your procedure performed, please check with our office scheduling staff to determine if you need to bring them with you the day of the procedure. Leave all valuables at home and wear comfortable clothing. If you have HMO insurance, it is your responsibility to obtain referrals from your primary care physician.

We recommend a clear liquid diet the whole day prior to the procedure along with taking magnesium citrate on that morning one day prior to the procedure.

DAY OF PROCEDURE

You may require Foley urinary catheter that drains your bladder. An additional temporary drain is used which will be removed prior to leaving the hospital. You will have an indwelling ureteral stent that will be removed upon follow up in our office-in 4 to 6 weeks. You will need to call upon discharge to schedule a cysto/stent removal (approximately 4 – 6 weeks after procedure). Abdominal pain is common and can be alleviated with narcotic medications. Back and shoulder pain can be experienced due to the gas used during the procedure and this usually clears within 24 hours.

DAY AFTER THE PROCEDURE

A rectal suppository is commonly administered the morning after the operation to help with the recovery of bowel function. Once you have signs of bowel activity such as flatus or you feel hungry you will be started on a clear liquid diet and a regular diet will be ordered once you tolerate the clear liquids. Abdominal discomfort should begin to diminish and you will be encouraged to get out of bed into a chair.

SECOND DAY AFTER THE PROCEDURE

You may be started on a regular diet. You may be encouraged to walk. Once you begin walking your compression stockings may be discontinued.

AFTER HOSPITAL DISCHARGE

You may be sent home anywhere between the 2nd and 4th day after your operation. You are advised not to do heavy lifting (anything greater than 10 lbs) for approximately 2 weeks. You can shower. You are not allowed to drive until you are cleared by your surgeon which may be anywhere between 3-6 weeks from the time of your operation. The date you can return to work is also variable and it can range from 3-8 weeks.

Abdominal discomfort can be controlled with either Tylenol or a stronger medicine such as Vicodin or Percocet. In certain cases an antibiotic will be prescribed.

You should call us if you experience: 1) a fever of greater than 100.5 degrees, 2) increasing abdominal pain especially if it is associated with nausea, vomiting or dizziness or 3) sudden light headedness or dizziness.

FOLLOW-UP APPOINTMENTS AND POSSIBLE STUDIES NEEDED

Call 610.323.5550 (Pottstown office) or 610.935.9010 (Phoenixville office) to schedule an appointment to:

- see Dr. Rose Leech Moreno Kabler or Kalra in ___ day(s) or ___ week(s)
- ___ with bladder scan ___ with straight cath residual check
- see nurse in ___ day(s) for Foley catheter removal.
- see medical assistant in ___ day(s) for catheter removal.
- arrange to have a cystogram in approximately ___ days or ___ weeks

MEDICATIONS

- Take Levaquin one daily until finished.
- Vicodin one to two every 4 hours as needed for pain.
- Percocet one to two every 4 hours as needed for pain.
- Take Pyridium/ Prosed DS as directed for catheter irritation
- DO NOT TAKE PYRIDIUM/PROSED DS WITHIN 12 HRS OF CATHETER REMOVAL**
- Cipro as directed

Regarding Spinal Anesthesia: If you develop a headache specifically after **SPINAL ANESTHESIA**, we recommend drinking more fluids, a caffeinated beverage (ie coffee, coke) and bed rest. If this does not relieve your “spinal headache” you should contact the hospital anesthesiologist on call.

Pottstown Hospital (610) 327-7000
Phoenixville Hospital (610) 983-1000