UROLOGY ASSOCIATES of Green Bay

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Kidney Stone Surgery: Extracorporeal Shock Wave Lithotripsy (ESWL) and Ureteroscopy

Procedure

To treat your kidney stone, you may have either ESWL or ureteroscopy, often times both, to clear out the stone completely. Depending on the size and location of your stone, **this may take more than one procedure**. Extracorporeal Shock Wave Lithotripsy (ESWL) is where soundwaves are sent into the stone to break it up into smaller pieces. Ureteroscopy is when a scope is placed into your bladder and then advanced into the ureter (tube that connects the kidney and bladder). This allows the doctor to break the stone up with a laser as well as remove remaining stone fragments. After the stone is treated, a ureteral stent is typically placed.

What are the risks?

- Bleeding-there is a low risk for significant bleeding but it is very common to have intermittent **blood in the urine**. We stop blood thinning medications and aspirin prior to your procedure. Tylenol is okay to take prior to your procedure.
- Infection-An antibiotic will be administered to you at the hospital prior to surgery to help prevent infection
- Ureteral injury/scarring- Using a scope in the ureter can cause injury or scarring long term. Placement of the ureteral stent helps prevent this from happening.

Ureteral Stents

What is a ureteral stent?

A ureteral stent is a thin tube that is placed inside the ureter and stretches from the kidney to the bladder. It keeps the urine draining out of your kidney after the procedure. The stent prevents the kidney from becoming blocked and helps prevent scarring of the ureter. Stents are typically removed in our clinic 1-2 weeks after your stone(s) are treated.

What symptoms can I expect from the stent?

- Blood in the urine-this can be intermittent and often occurs after increased activity or long car rides.
- Urgent urination-the stent can irritate the bladder and cause you to go to the bathroom more frequently and urgently.
- Back or pelvic pain-this can occur particularly with urination or increased activity and is normal with a stent in place

How can I help manage my symptoms?

- Drink plenty of fluids to keep the kidneys flushed
- Use heat pads/baths/showers to help the muscles relax
- Alternate 1000 mg Tylenol every 6 hours with 600 mg Ibuprofen every 6 hours (as needed) so that you take something every 3 hours
- Take tamsulosin and oxybutynin as prescribed

Approved By: S. Schneider & C. Boehm 5/27/2020