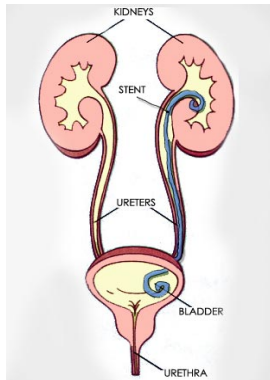


ABOUT A STENT INSERTION?

50% of people do not realise they are present; the other 50% may experience frequency, urgency or perineal/penile tip referred pain. Use oxytrol patches for these symptoms.

A small portion (10%) will suffer from severe stent pain. Use endone as required or mechanically obstruct your stent. To do this, push hand immediately below ribs on stent side where the pain is present and lean over on to this side to mechanically kink the stent.



BENEFITS OF A URETEROSCOPY

The stone is usually directly seen allowing the delivery of special instruments or lasers to break the stone. The ureteroscope is passed through natural channels in the body and involve no skin incisions. Providing the stone can be seen, there is a very high chance that the stone will be broken in one session.

The success rate of ureteroscopy is over 95% for the majority of stones that are treated this way.

LONG-TERM STONE PREVENTION

All stone formers should:

- Increase their fluid intake (judge the amount of fluid you need by your urine colour – the darker the urine the more fluid you need)
- Reduce dietary salt
- Recurrent stone formers will be referred on to a renal physician for further fine tuning



DR MARTIN ELMES
UROLOGICAL SURGEON

Specialising in

Robotic Prostate and Kidney surgery

Advanced BPH treatments

Tailored Erectile Dysfunction medications

With over 10 years of expertise in the field of Urology, Dr Elmes provides a full range of high quality urological services for patients with the use of advanced techniques and cutting edge equipment to perform procedures. Dr Elmes is highly qualified in the field of urology having completed extensive surgical training throughout Melbourne and Sydney.

His main interests in the field include:

Minimally invasive Robotic Prostate & Kidney surgery

Advanced BPH treatments

Laser prostate enucleation (HoLEP)

Rezum water vapour steam therapy

UroLift

Erectile Dysfunction

Hidden needle Intracavernosal injections

Penile Prosthesis (no-touch technique)

Peyronie's Xiaflex injections

Visit our website or call us on (07) 5575 7922 for more information about our urological services.

Varsity Lakes

Suite 2 Level 1
2 Lake Street
Varsity Lakes QLD 4227

Pindara

Suite 8 Level 1 - Pindara Place
13 Cararra St
Benowa QLD 4217

Contact us

Phone: 07 5575 7922

Fax: 07 5575 8922

Email: admin@goldcoasturologist.com.au

www.goldcoasturologist.com.au

Twitter: @DrMartinElmes

YouTube: Gold Coast Urologist

A PATIENT GUIDE TO URETEROSCOPY



DR MARTIN ELMES
UROLOGICAL SURGEON

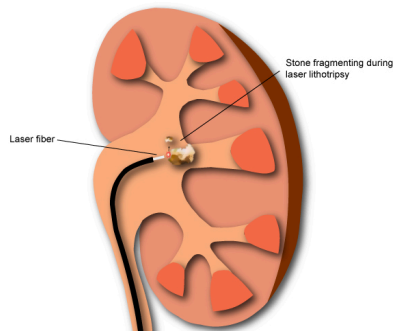
WHAT IS A URETEROSCOPY?

In most cases this is performed because you have a stone trapped in your kidney or in the “ureter” (the drain pipe that connects the kidney to the bladder). The most common cause for Kidney stones is dehydration. Symptoms you will experience with a kidney stone include:

- Severe pain in the side and back, below the ribs
- Pain that radiates to the lower abdomen and groin
- Pain that comes in waves and fluctuates in intensity
- Pain on urination
- Pink, red or brown urine
- Cloudy or foul-smelling urine
- Nausea and vomiting

Most situations necessitate a 2–3 stage procedure under general anaesthetic:

1. Insertion of a stent (a thin plastic internal drain tube) from the bladder up to the kidney to allow pain and infection if present to settle
2. Approximately 2 weeks later the stent is removed and the now dilated ureter is much easier to traverse with a very fine camera and laser. The stone is vaporised in this procedure. In almost all cases a new stent is placed to minimise pain and roughly a week later the stent is removed either as an in-patient or out-patient.



BEFORE SURGERY

You will be instructed by the hospital or Dr Elmes' rooms when to fast (food & fluid).

TABLETS AND BLOOD THINNERS

Dr Elmes rooms will advise you to cease or continue medications prior to your procedure. Consult Dr Elmes rooms if you have questions and be sure to follow instruction given by Dr Elmes regarding ceasing any medications.

INSULIN

Please let Dr Elmes know if you are on insulin.

PATHOLOGY TESTS

Dr Elmes rooms will advise you pre-operatively when to do any pathology tests required, usually 1–2 weeks pre-operatively.

WHAT TO EXPECT POST YOUR PROCEDURE

Expect:

- Sensation of needing to urinate (settles 24hrs in 50% of people)
- Some mild burning or blood in the urine (may come and go until after the stent is out)
- Stent insertion – you are likely to need a stent (a fine plastic tube). It allows urine to drain from your kidney into your bladder when you have a blockage (such as a stone or growth) in your ureter.
- A further procedure to remove your stent (internal drain)
- Return to work when you are feeling comfortable. Dr Elmes rooms can provide you with a medical certificate if required.

What to do:

- **Drink plenty of fluid** – to avoid blood clots blocking to stent, causing severe pain
- Do NOT dehydrate
- You can exercise and do most normal activities with a stent in

Avoid:

- Working/strenuous activity for 24hour

Inform Dr Elmes' rooms if:

- Unable to urinate
- Heavy continuous bleeding / multiple clots
- Fevers / unwell
- Severe stent pain (especially if with every urination)
- Bladder spasms (may need Oxytrol patches to settle this)