



10 Parsonage Road, Suite 117, Edison, N.J. 08837 Tel: (732) 494 9400 Fax: (732) 548 3931  
3 Hospital Plaza, Suite 200, Old Bridge, N.J. 08857 Tel: (732) 679 2010 Fax: (732) 679 2077

## **Post – Percutaneous Nephrolithotomy Surgery Instructions**

PROCEDURE: Removal of stone from kidney through small flank incision

### What to Expect:

1. Small flank incision may drain urine, serum, or blood for several days after discharge from the hospital. It is important to keep the wound clean and dry. You may need to change the dressing frequently initially but eventually a small band aid can be applied.
2. You may note blood in your urine for several days after discharge.
3. Though a small incision, you may feel discomfort in a wider area of the flank since internal manipulation occurred to both the muscles of the flank as well as the kidney to remove the stone(s). This is normal and will subside over the first week.
4. You will be discharged on oral pain medication and antibiotics
5. Occasionally, the need for discharge with a kidney tube in place will occur. This tube will allow inflammation and/or bleeding to subside and allow for normal internal urinary drainage. You will be given instructions as to the care of this tube as well as indications when a subsequent x-ray will be performed to determine when the tube can be safely removed.
6. You will be seen in the office approximately one week post-operatively.

### Activity and Limitation:

1. No lifting greater than 10 pounds or exercise for approximately two weeks
2. No driving for one week
3. You may shower immediately upon discharge
4. You should be drinking plenty of fluid to ensure hydration and flushing of the urinary system
5. Please limit the use of aspirin and anti-inflammatory medication for the first week.
6. Tylenol may be used as mild pain reliever.

### Return to Work:

You may resume work in a sedentary job in approximately one week. Jobs with more vigorous work requirements may be resumed in two weeks.

### Call your physician for the following:

1. Fever greater than 101.5.
2. Persistent drainage or bleeding from the flank or in the urine beyond 1-2 weeks
3. Worsening abdominal pain which is unresponsive to the pain medication given.