

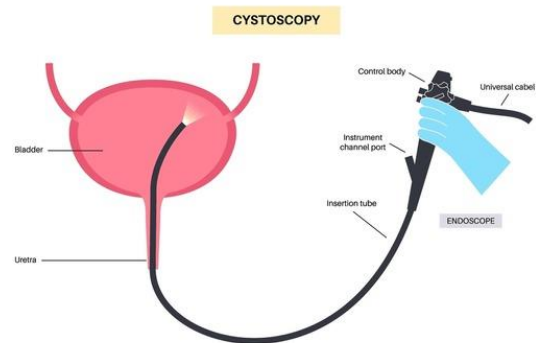
Cystoscopy and Ureteral Stent

What is a Cystoscopy?

A cystoscopy (sis-Tos-kuh-pee) is a procedure that allows your doctor to examine the inside of your child's bladder and the urethra (tube that carries urine out of your body). The cystoscopy is done as an outpatient procedure and your child will go home the same day. During the cystoscopy your doctor may perform an x-ray (called retrograde pyelogram) to look at the ureters (the tubes that drain urine from the kidneys to the bladder).

When will I need a Cystoscopy?

A cystoscopy is needed to remove the internal stent your child has in place. Before this procedure, we typically get a pre op urine to make sure the urine is clear from infection or being treated with an antibiotic.



What happens during a Cystoscopy?

Your child will receive general anesthesia to help them sleep and not feel pain during the surgery. Numbing gel will be used in the urethra. A cystoscope (thin tube with camera and light) will be placed through your child's urethra and into his or her bladder. The surgeon will look at the urethra and the bladder and its lining.

What is a Ureteral Stent?

A ureteral stent is a soft hollow tube used to keep the ureter open temporarily. The top portion of the stent has a curl and sits in the kidney and the opposite end curls in the bladder.

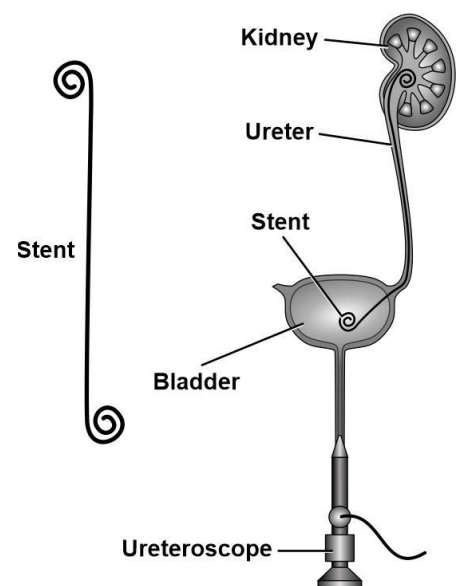
Why did I need a Stent Placement?

The stent was placed inside the ureter to help urine drain from the kidney into the bladder. This may have been placed post operative procedure or due a blockage or narrow area in the ureter, or to make way for a kidney stone to pass.

When will the Stent be removed?

An internal stent can be in place for a few weeks up to a couple of months. Your child will be scheduled to have the stent removed under anesthesia or have another procedure if needed.

A urine collection for culture pre op will be requested about 7-10 days before stent removal.



Will my child be in pain?

Most children do well with the surgery. If your child is in pain, pain medicine can help. You may alternate Acetaminophen (Tylenol® or another brand) and Ibuprofen (such as Advil® or Motrin®). Do not give aspirin because it may cause bleeding.

After the procedure, your child may have some increased sensitivity in their peri area. Like after having a catheter test. Warm baths, being well hydrated and soft passage of stools will help keep them comfortable.

What can I expect after surgery?

Before your child is discharged you will be given written information about their care at home and any questions you have will be answered.

- **Diet:** Resume regular diet as tolerated. Have your child drink plenty of fluids, as there could be blood in the urine. This will keep the urine clear and make it less irritating to the bladder and urethra while peeing.
- **Activity:** May return to school or daycare when pain is well controlled.
- **Bathing:** Ok to take a bath the day of surgery. Bathe in plain water for the next week. A daily warm bath will help heal and provide comfort.
- **Medicines:** Pain can be controlled by alternating Acetaminophen (Tylenol® or another brand) and Ibuprofen®. Do not give aspirin because it may cause bleeding.
 - If your child is prescribed an antibiotic, follow your surgeon's specific instructions
- **Do not give the bladder spasm medicine once the stent has been removed.**

What to call the surgeon for:

- Large amounts of blood or blood clots in the urine
- Fever associated with burning or frequency of urination
- Lower belly or side pain
- Nausea or vomiting

Call your primary care provider for any other concerns.

Follow-up care:

Follow-up with your child's surgeon as directed following the surgery. Call your surgeon's office to schedule an appointment. If your child has a stent, schedule an appointment for removal.

Questions? This information is not specific to your child but provides general information. If you have any questions, please call 612-813-8000.

