

- You are expected to return to baseline function and can ambulate on the same day of the surgery.
- Your doctor will advise on resuming your old medications.
- There are no dietary restrictions after the surgery.

E. Commonly asked questions

How long should I fast for?

Kindly refer to anesthesia leaflet on fasting instructions.

How long does a URS take?

In general, most URS takes between 30 to 60 minutes, but this may be shorter or longer depending on the complexity of your condition.

What is a ureteric stent?

A ureteric stent is a thin plastic tube that is placed in your ureter. One end of the stent will be in your kidney and the other in your bladder.

When will the ureteric stent be removed?

Your surgeon will advise you on the optimal time of removal of the stent if it was inserted.

What are the risks associated with a ureteric stent?

It may cause bladder irritation (making you feel the need of passing urine frequently), blood in your urine and back pain on passing urine. Do inform your surgeon you experience any of these

symptoms. Occasionally, a stent may harbor bacteria – and cause urinary tract infection or form crystals on its surface – making it difficult to remove. Hence, it should be removed or changed on time as advised by your surgeon.

I had an allergic reaction when I had contrast in my previous computed tomography (CT) scan. Is this important to let my surgeon know about this?

Yes, you should let your surgeon know about any form of allergy you have so that the necessary precautionary measures can be undertaken.

F. Useful contact numbers

- UMMC general line : 03-7949 4422
- Surgical Clinic UMMC : 03-7949 2736 (Office hours only)
- Urology ward (9TD) : 03-7949 4328 / 6712



URETEROSCOPY (URS) SURGERY

A. Information on the surgery

Introduction

Ureteroscopy (URS) is an endoscopic procedure using a telescope to examine the upper urinary tract (the ureter and pelvis of the kidney). The ureter is a tubular structure connecting the kidney to the bladder and functions to transport urine produced in the kidney to the bladder for storage prior to voiding. Depending on the type of telescope used, it can be a flexible URS or a rigid URS. The surgery is usually done under either general or spinal anesthesia. URS can be combined with a variety of endourological techniques to diagnose or treat diseases of the ureter.

Indications

1. Diagnostic – to look for causes of abnormal urine tests, further investigate abnormal CT / MRI findings, assess ureteric injuries
2. Therapeutic – Ureteric stone, ureteric stricture, ureteric injuries, encrusted ureteric stents

Advantages of the surgery

- The surgery is done via the natural opening of the urethra (the tube that passes urine from your bladder out of your body) and does not involve any cuts on your skin.
- A URS can be done in a daycare setting (not requiring hospitalization) if you fulfill the necessary criteria. Otherwise, a hospitalization may be needed – but this is usually short-term.

Risks of the surgery

- Common risks: Bleeding (in urine), urinary tract infection
- Less common risks: Failure of passing the telescope, ureteric injury and stricture formation.

Other options if surgery is declined

The URS may be the only way to have a proper examination of the upper urinary tract to diagnose or treat certain ureter and kidney conditions.

Discuss with your doctor whether there are alternatives other than URS to diagnose or treat your condition.

B. Before the surgery

- At the clinic, the doctor will go through the details on your health and your medications. This is to assess your fitness for the surgery.
- There may also be a need to stop certain medications you regularly consume before the operation (i.e. blood-thinners), this should be discussed with your doctor.
- Prior to admission, you should bring all relevant health documents (previous scans or reports) and your medications to the hospital.
- Your doctor will advise you on the time to begin fasting from home if it is a daycare procedure. If you will be admitted to the hospital a day prior to the procedure, your doctor will advise on fasting times after arrival.
- If you smoke, it is advised that you stop smoking, as it increases your risk of deep vein thrombosis (DVT) and chest infection.

C. Operation

- You will need to remove dentures, jewelry or clothing with metallic components before going to the operation theater.
- Inform the staff if you had any implants (e.g. heart pacer / metallic implants) inserted before. You will be required to change into a hospital gown and put on a disposable cap.

Anesthesia

Kindly refer to the anesthesia leaflet.

Surgery

- Antibiotics may be given in the operation theater (advise your doctor on your allergies).
- During the procedure, your surgeon may use contrast media and X-ray during the procedure (do inform your surgeon if you have allergies or are pregnant).
- If necessary, a ureteric stent (a thin plastic tube) may be inserted into the ureter and remain in your body at the end of the procedure, this stent is NOT a permanent implant and is required to be removed at a later point.
- You may be required to undergo a repeated URS procedure if your condition cannot be rectified in a single setting.

D. After the operation

Occasionally, you may return to the ward with a urine catheter (in your bladder) which will be removed when it is no longer needed.

- You may pass some blood in the urine after the procedure which should resolve on its own.
- You may experience mild to moderate pain after the procedure – appropriate pain-killers will be given. It is normal if you have some discomfort on passing urine which may last for some days after the surgery. In some cases, you may need to have a longer stay in the hospital after your URS for antibiotic therapy if you develop or are suspected of having a urinary tract infection.