

When you get home

- It is normal for your child to feel uncomfortable for a day or two after the surgery
- A CUH pain information leaflet will be provided on discharge to assist you keeping your child comfortable
- You should contact your GP if your child complains of a lot of pain, if there is redness/ discharge from the wound, if their urine is cloudy/ smelly or if they have a temperature
- Your child can return to school when they are feeling well, but should avoid rough play and contact sports until after their follow up outpatient appointment
- Your child's urine may contain some blood which will make the urine pink or red. Encouraging your child to drink lots of fluid will help flush any blood away and prevent the stent from blocking

What is the follow up after surgery?

The ward staff will provide you with details of the follow up appointment prior to discharge. If your child has a JJ stent in place, this will be removed approx. around 6 weeks after in a short procedure under anaesthetic. The doctor will see you and your child for a check up about 3 months after the removal procedure is done.



If you have any concerns contact your GP or contact CUH on 021- 4292000 and ask to speak to the surgical team your child is under

Developed by: Orla Curtin & Lucy Crowley
BSc Children's & General Integrated Nursing Interns

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Acknowledgments;

Urology Surgical Team, Cork University Hospital (CUH)

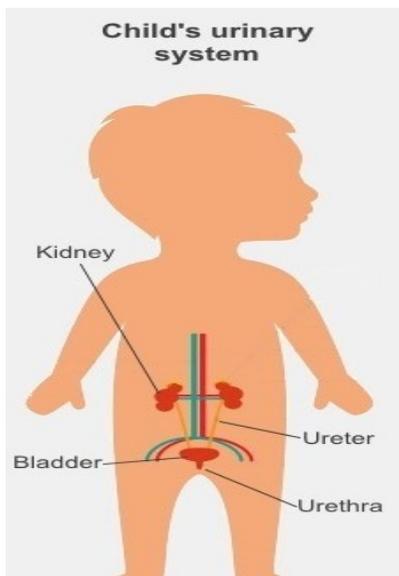
PYELOPLASTY



Information for Parents & Guardians on Caring for of a child undergoing Pyeloplasty

What is a pyeloplasty?

A pyeloplasty is an operation to remove a blockage in one of the ureters which urine passes through. A stent/drain, which is a small tube, will be put in the ureter for approx. 6 weeks.



What causes the blockage?

The condition is most commonly present from birth. The blockage happens when the area between the ureter and part of the kidney (utero-pelvic junction) becomes too narrow. It can result in a damaged kidney from urine build-up and increased pressure in the kidney. Usually, only one kidney is affected.

How is utero-pelvic junction (UPJ)

obstruction treated?

An UPJ obstruction is treated with surgery. The surgery is carried out under general anaesthetic. The blockage can either be removed using keyhole surgery (laparoscopy) or by traditional open surgery. Your surgeon will advise you which method is most appropriate for your child.



The surgeon will insert either a Blue stent or a JJ stent into the ureter to keep it stable while it heals. Both types of stent will need to be removed a few weeks after the operation, and this will be discussed with you on discharge.

Preparing for surgery

On the day of surgery, your child's surgeon will meet with you to go through the operation in detail, discuss any worries you might have and ask you to sign a consent form. You will also see another doctor called an anaesthetist who explains the type of anaesthetic your child will be having and to pain relief after the operation.

If your child has any medical problems, such as allergies, please tell the doctors. It is also important to bring in any medicines your child is currently taking and show them to the Surgical Team

On return to the ward after the Pyeloplasty

When your child returns to the ward after the surgery, there may be a thin, plastic tube (a catheter) draining urine from your child's kidney to give the ureter time to heal; this is usually closed off one or two days after the surgery.

We will give your child regular medicine to ensure they comfortable.

Urinating after surgery

A urinary catheter will drain the urine initially.



When the bladder catheter is removed, it is common for children to feel the need to urinate frequently and to have discomfort when urinating the first few times. Sitting your child in a shallow bath of warm water may provide relief. Placing a damp, warm cloth on the perineum (the skin between the anus and scrotum in males, and between the anus and the vulva in females) may also make your child more comfortable.