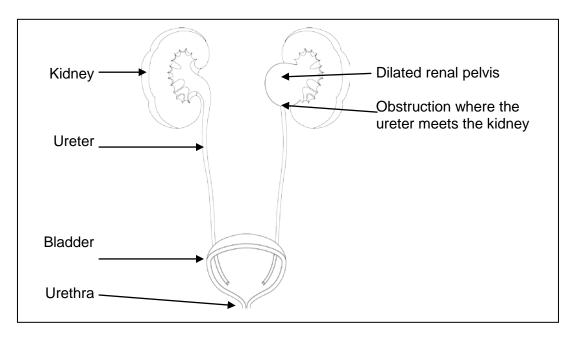


## **Pyeloplasty**

## What is pyeloplasty?

Pyeloplasty is a surgery to clear a blockage (obstruction) in the area where the ureter meets the kidney (ureteral pelvic junction).

When this area becomes blocked, urine cannot flow from the kidney down through the ureter and into the bladder. This may damage the kidney.



An obstruction can occur when:

- the ureter is too narrow
- the ureter becomes kinked
- a blood vessel passes over the ureter

This surgery is needed to keep your child's kidneys healthy and working properly.

## What happens before the surgery?

Your child will have an appointment in the Pre-op Clinic to meet with the doctors and nurses and prepare your child for the surgery. They will give you a checklist of instructions to follow the day before your child's surgery.

On the day of the surgery, take your child to the Surgery Unit, following the instructions given in the pre-op visit. When it is time for the surgery, your child will go to the operating room. One parent can walk in with your child and stay until he or she is asleep.

The Anesthesiologist will give your child medication to breathe in through a mask, which will help your child fall asleep. Then, he or she will put in an intravenous (I.V.) which will be used to deliver the rest of the sleeping medication (anesthesia) for the surgery.

The surgery usually takes about 3 hours.

## What happens after the surgery?

After the surgery, your child will go to the Post Anesthetic Care Unit (PACU) to be closely monitored until he or she is fully awake. As soon as possible, the nurse will bring you to the PACU to be with your child.

When your child is fully awake, you will go to the ward where your child will stay for a few days. While in the hospital, the doctors and nurses will monitor your child, ensure that he or she is not in pain, and care for the surgical site.

After surgery, your child will have a catheter which will stay in place while he or she is in the hospital. This is a small, flexible tube that goes through the urethra and into the bladder to drain urine.

Most children who have a pyeloplasty will have a stent. A stent is a small, plastic tube that is placed inside the ureter to keep it open. In 4 to 6 weeks, the stent will need to be removed in the operating room.

Before you go home, a follow-up appointment will be arranged.

If you do not know your follow-up plan, please ask your nurse before you leave the hospital.

## What can I do to make my child more comfortable?

If your child has pain after surgery, he or she will be given pain medication through the I.V. at first, and then by mouth when he or she starts to feel better. Please tell your nurse if you feel your child is having pain while in the hospital.

## What can I feed my child?

After surgery your child can have sips of clear fluid and gradually return to a full diet over a couple of days.

The I.V. will be taken out when your child is eating and drinking well, and no longer needs antibiotics or pain medication. At this time, your child can eat his or her normal diet.

### How do I take care of the incisions?

The incision is where the surgeon cut the skin. It will be covered with a dressing that will stay on for a few days after the surgery.

When you go home, your child will no longer need a bandage. Your child can have a bath or shower at home.

## What activity can my child do?

Your child may need to rest for the first few days at home. After that, he or she can resume normal activities, such as school.

Your child should not play sports or do strenuous activities until you see the surgeon at the follow-up visit.

## When should I call the hospital?

It is normal for children who have had a pyeloplasty to have some blood in the urine (hematuria) for up to 2 weeks after surgery.

#### Call the hospital if you notice any of the following problems:

- you are unable to control your child's pain.
- your child has a fever, a temperature of 38.5°C (101.3°F) or higher.
- redness, swelling or drainage around the surgical site.
- constant, bright red bleeding from the incision.
- constant, bright red urine.
- your child is unable to pass urine (pee).

#### Who do I call?

# During business hours (Monday to Friday), call McMaster Children's Hospital: 905-521-2100:

- Natasha Brownrigg, Pediatric Urology Nurse Practitioner, ext. 73070
- Pediatric Urology Offices, ext. 73777

# For urgent issues after hours and on weekends, call Paging at 905-521-5030:

Ask them to page the Pediatric Urologist on-call.

### If your child is unwell and needs immediate attention:

- Bring your child to the Emergency Department at McMaster Children's Hospital.
- If you live outside Hamilton, take your child to the nearest hospital Emergency Department.