



Procedure Information – Percutaneous Nephrolithotomy

Visit No.: Dept.:
Name: Sex/Age:
Doc. No.: Adm. Date:
Attn. Dr.:
Patient No.: PN

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*Please fill in /
affix patient's label*

Introduction

PCNL is a technique of removing stones from the kidney via a nephoscopy passed into the kidney through a track from the skin surface previously established by the presence of a catheter.

Indications

Renal stones or ureteric stones

The Procedure

1. The operation is usually performed under general anaesthesia.
2. X ray guidance is required throughout the operation.
3. Doctor may first perform endoscopy within your bladder and pass a catheter into the ureter for injection of contrast material.
4. Doctor will make a small cut on your back and pass a needle through the skin to the kidney. The needle tract will be dilated.
5. Instruments would be passed through the dilated tract and doctor will use these instruments to break the stone and to take them out.
6. After the operation, a tube is usually placed into the kidney and a urinary catheter is generally required.

Possible risks and complications

A. Common risks

- Like other invasive procedures, PCNL has some risk: bleeding, infection, wound pain, residual stone fragments requiring additional or ancillary procedures.

B. Uncommon risks and serious consequences

- Injury to adjacent organ, including perforation of gastrointestinal tract (<1%), pleural cavity and lung (1-3%), spleen and liver.
- Injury to urinary tract.
- Bleeding causing haematoma and clot retention, that requires blood transfusion (10-30%), radiological or surgical intervention (1-3%) and possibility of nephrectomy.
- Failed percutaneous access or stone retrieval, ureteric obstruction due to stone fragment.
- Conversion to open surgery or other interventional procedure.
- Sepsis (1-2%)
- Impairment or loss of kidney function.
- Mortality (<0.5%)

Before the Procedure

1. Your doctor will explain to you the reason, procedure and possible complications. You will need to sign a consent form.
2. Inform your doctor if you are pregnant.
3. Inform your doctor of any medical condition, for example diabetes, heart diseases, high blood pressure and any medications you take.
4. You would be assessed for your medical fitness for the procedure by your doctor, including a series of investigations, including blood, urine tests and X-ray.
5. Fasting for 6-8 hours before operation.
6. Your doctor will tell you whether you should continue your regular medications during the fasting period or may give you other instructions.
7. Some drugs including blood thinners and aspirin must need to be discontinued before operation.
8. Preventive antibiotics therapy would be given to reduce risk of infection.



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After the procedure

A. Hospital care

1. You will be closely monitored your blood pressure, pulse, and signs of bleeding and level of pain by doctor and nurse.
2. Mild pain is expected at the incision area.
3. You may have intravenous fluid prescribed and doctor will resume normal diet when your conditions have improved.
4. You are encouraged to do deep breathing and coughing exercise to prevent chest infection.
5. Blood stained urine is expected coming out from the kidney drain and the urinary catheter for a few days. They will be removed as indicated.

B. Home care

1. Please comply with the medication regime and take analgesic as prescribed by your doctor.
2. It is advised to drink 3-4 liters of water per day to increase the urine output to 2-3 liters per day. It will facilitate the passage of stones.
3. Wound will heal up about one week after removal of the nephrostomy tube.
4. Stone formation can be prevented by a well-balanced diet of high fiber, low sugar and fat.
5. Please contact your doctor or go back to hospital if excessive bleeding, collapse, severe pain or signs of infection at your wound site such as redness, swelling or fever (body temperature above 38°C or 100°F) etc.
6. Attend follow up appointment as scheduled by your doctor.

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. Should a complication occur, another life-saving procedure or treatment may be required immediately. For further information please contact your doctor.

Reference

Hospital Authority – Smart Patient Website

I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. _____. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

Patient / Relative Name

Signature

Relationship (if any)

Date