

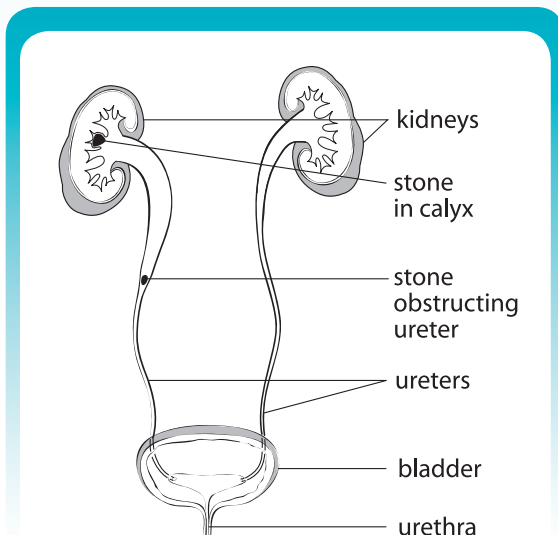


Shock wave lithotripsy

Discharge instructions

Shock wave lithotripsy has been used to pulverize a kidney stone so that it can pass more easily and with less pain.

You have just completed shock wave lithotripsy (SWL) for treatment of a stone in a kidney or a ureter, the long narrow tube connecting each kidney to the bladder. Your stone was targeted with X-ray or ultrasound after which shock waves were administered to break the stone into smaller pieces which should pass more easily and with less pain.



The X-ray taken several weeks after shock wave lithotripsy will show how successful your treatment has been.

What to expect after your treatment

After SWL, small stone fragments often will pass in the urine for several days or weeks. This may be accompanied by some degree of pain often starting in the flank or back from where it may travel to the lower abdomen or groin. You may also have brief pain in the urethra (the bladder outlet) as stone fragments come out in the urine.

Acetaminophen (e.g. Tylenol™) or ibuprofen (e.g. Advil™) can be used as directed for mild pain. You may require stronger prescription pain killers such as acetaminophen with codeine (e.g. Tylenol #3™).

Prior to your discharge, you will have been given a prescription for such a pain killer to be used as needed. Medication may be prescribed to help the body pass the small stone fragments after SWL.

A few patients experience severe pain after shock wave lithotripsy. Usually this is caused by a larger stone fragment becoming stuck and blocking drainage of urine from a kidney. This pain may occur several days after your SWL treatment. If the pain cannot be controlled with the medication that you have available, you should go to a hospital emergency room for treatment. Rarely, this pain may occur from a burst blood vessel on the surface of the kidney. You should notify the emergency room staff that you have had shock wave lithotripsy for a kidney stone.

Increased frequency and urgency of urination are common after SWL. You may also note blood-staining of the urine. This is a common problem and should clear up within a few days. Drinking a lot of fluid (at least two litres of fluid every day) will help flush out stone fragments and clear any blood from the urine.

You may have some bruising of the skin where the shockwaves entered the body. Generally, this will resolve over the first week.

Medications

Unless otherwise advised, you should take all of your usual medications. Aspirin-containing products and arthritis medication generally can be resumed on the day after your SWL treatment. If you normally take stronger blood-thinners, like warfarin, (i.e. Coumadin™), check with your doctor for instructions about restarting. If you have any concern regarding medications, ask your doctor or urologist.

Diet and activity

It is safe to resume your normal diet and physical activity the day after your treatment. Increasing your fluid intake may help with the passage of stone fragments.

Stone fragments

Analysis of stone fragments can be useful to your urologist in giving you advice to prevent further stone formation. You may be provided with a strainer to filter your urine with every void until you have collected several fragments. Allow the stones to dry and bring the fragments with you to your follow-up visit. Sometimes, the stone fragments are so small that they may pass through the strainer.

Follow-up appointment

A follow-up X-ray after shock wave lithotripsy is important. This will indicate whether any stone material remains and the need for additional treatment. Your X-ray should be obtained immediately prior to the scheduled follow-up appointment.

A follow-up appointment will be arranged with the lithotripsy unit urologist, your own urologist or your family doctor depending on what is most convenient for you. Your urologist can determine if there is any other problem, including the possibility of kidney obstruction without pain. The first follow-up appointment is usually scheduled within several weeks after your treatment.

If a ureteric stent was inserted prior to the procedure, you must ensure that arrangements are made with your doctor regarding its removal after SWL. Ureteric stents that are left in for a long time (i.e. years) can cause serious kidney damage.

Call your doctor or go directly to a hospital emergency room if you have:

- **severe and persistent pain** not relieved by the prescription medication that you have been provided
- chills or **fever** above 38.5°C or 101°F
- persistent nausea and **vomiting**
- on-going heavy **urinary bleeding** or the passage of blood clots

Notes / Diagrams:

Follow-up

- Please arrange a follow-up appointment with
Dr. _____
in _____ days / weeks.
- An X-ray should be obtained immediately prior to your follow-up appointment.

This publication is produced by

Canadian Urological Association
The Voice of Urology in Canada



Association des Urologues du Canada
La voix de l'urologie au Canada

The information in the publication is not intended to convey medical advice or to substitute for direct consultation with a qualified medical practitioner. The Canadian Urological Association disclaims all liability and legal responsibility howsoever caused, including negligence, for the information contained in or referenced by this brochure.

© 2014. Canadian Urological Association. All rights reserved.

cua.org