

Urinary Reflux Reimplant

Care after Surgery

Urinary reflux is a condition in which pee (urine) travels from the bladder back up to the kidneys. It should go down from the kidneys to the bladder. To correct this problem, we reattach (or reimplant) the tubes (called ureters) from the kidneys to the bladder. Your child will be in the hospital for 1-3 days after urinary reflux reimplant surgery.

How do I care for the cut (incision) after surgery?



- The incision may be in the shape of a smile. It is just above the pelvic bone. It is likely this will not be visible after puberty when body hair grows.
 - If your child had a laparoscopic procedure, there will be 2-3 smaller incisions.
 - The incision should look clean and dry. A little blood under the bandage is normal. The incision may be covered with surgical glue or small pieces of tape (Steri-Strips) and a clear bandage. Leave these in place.
 - If the bandage or strips curl up at the ends, you can trim them.
 - The surgical glue will peel off on its own.
 - We do not remove stitches. They are under the skin and will dissolve on their own.
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Will my child have pain?

Your child may have some pain around the incision and may have bladder spasms (see below). The most discomfort occurs 24 to 48 hours after surgery while your child is still in the hospital. If your child has a laparoscopic procedure, irritation along the lower ribs, back or shoulder is common.

How do I manage my child's pain?



- When your child is back home, use children's acetaminophen (Tylenol, Tempra, Liquiprim, Panadol, etc.) as directed by your child's doctor.
 - In addition to medicine prescribed for pain, we will work with you to create a plan that encourages coping activities to treat pain and provide support. We encourage you to take an active part in your child's recovery by talking with your care team about options for your child.
 - Check with your child's healthcare provider before giving any type of medicine to your child. No matter the level of your child's pain, we join you to assess and respond right away. Help your child get better faster with good pain treatment.
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To Learn More

- Urology
206-987-2509
- Ask your child's healthcare provider
- seattlechildrens.org

Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.

How do I dispose of leftover opioid pain medicine?

- To keep your family safe, store medicines inside a locked cabinet or location where others cannot easily get to them. Once your child has recovered from surgery, dispose of all unused prescription medicines. Taking leftover pain or other medicines on purpose or by accident, can be very dangerous.
- For more information about safe disposal of unused opioid medications, read our handout “Safe Use and Disposal of Opioid Medicines” (seattlechildrens.org/pdf/PE3140.pdf) or visit takebackyourmeds.org to find a take back place near you.

What is a bladder spasm?

- A bladder spasm is a contraction, cramp or tightening of muscles in the bladder wall. Causes of bladder spasms include when:
 - The urinary catheter irritates the bladder wall
 - The urinary catheter gets bent (kinked) or blocked
 - The bladder wall is healing
- A bladder spasm usually lasts less than 1 minute and can cause your child to wince. You may also see your child pee urine that is pink (colored with blood) after a spasm. This is normal and should not harm your child.
- We may give your child medicine for bladder spasms, if needed.

Will my child have a tube (catheter) to drain urine?

- After surgery, your child will have a drainage catheter for 1-3 days to keep the bladder empty.
- After we take the catheter out, your child may have some discomfort peeing for 1-2 days.
- Your child may also have ureteral stents. Ureteral stents are small internal tubes that keep the ureters open. We need to remove stents in a second, very brief day surgery 6 to 8 weeks after the first surgery. For more information, read our handout “Ureteral Stents”. seattlechildrens.org/pdf/PE1949.pdf

What if my child goes home with a catheter?

- We will teach you how to take care of the catheter and change the urine bag.
- Please read the Seattle Children’s handout called “Urethral Catheter Care.” seattlechildrens.org/pdf/PE117.pdf
- If your child does go home with a catheter, we will take it out in about 1 week.

Will there be blood in the urine?

Your child’s urine may still be pink when it is time to go home. It will clear up in the next few weeks but may become bloodier after vigorous play or activity. This is normal and should not harm your child. If there are blood clots in your child’s urine, call the Urology Clinic.

When can my child begin activity?

- Most children should avoid climbing, biking and gym class (PE) and sports for 1 month. After that time, it is OK to do all usual activities.
- Ask your child’s doctor about your child’s plan.



Can my child take a bath, shower, swim or get wet?



Your child can bathe as usual 2 days after surgery. Ask your child's doctor.

What can my child eat?



- Your child will be back to their regular diet by the end of the hospital stay.
- Ask your child to keep drinking as much liquid as possible. If your child is drinking enough, their urine should be clear in the toilet.
- Offer a variety of fruit and vegetables. This will help prevent constipation. It is harder to pee when the bowel is full of stool. Constipation will increase bladder spasms and pain after surgery.

When should I call the doctor?



Monday to Friday, call the Urology Clinic at 206-987-2509 for questions or any of the concerns listed below. Send MyChart messages for non-urgent questions.

Nights, weekends and holidays, call 206-987-2000 and ask the hospital operator for the urology resident on call for urgent concerns from the following list:

- Has a fever of 101.5° F (38.6° C) or chills
- Throwing up (vomiting)
- Redness, drainage or swelling of the incision
- Severe, constant pain that is not helped by pain medicines
- Ongoing blood clots in the urine
- Catheter has stopped draining urine
- Symptoms of a urinary tract infection, including:
 - Fever
 - Irritability
 - Burning when they pee
 - Needing to pee very often or very badly
 - Smelly, cloudy or bloody urine
 - If your child is potty trained, peeing in their clothes (wetting)