PCNL

Percutaneous nephrolithotomy is a procedure to remove medium or large stones that are present in the kidneys.

Percutaneous: means doing the procedure percutaneously
nephrolithotomy: A Greek word meaning removal of a kidney stone by incision.
This surgery is performed with a small incision in the patient's kidney area
In this surgical procedure, very small and microscopic stones up to large stones the size of a golf ball can be removed from the kidney through the skin.

The great advantage of PCNL over open surgery is the absence of large skin incisions and the lack of kidney manipulation
A standard PCNL surgery is performed under general anesthesia for 3-4 hours.
The incision made on the side is usually 1.3-0.5 cm.

After the stone is broken and removed, a nephrostomy is fixed at the operation site. A nephrostomy is a tube that can drain urine from the kidneys directly to the surface of the skin. secretions by nephrostomy contains urine and blood, which gradually becomes lighter in color after receiving more fluids.

Preoperative care:
Performing tests such as CBC and coagulation tests, electrocardiography, urine tests
It is best to stop aspirin 10 days before surgery to prevent postoperative bleeding. It is best to consume a low-fat diet such as soup and liquids 24 hours before the operation and NPO from 8 hours before the operation.

Postoperative care:

- Controlling the patient's vital signs after surgery accurately
- Controlling patient connections (Foley catheter, nephrostomy, ureter catheter) and their drainage rate
- The patient may have double J after surgery. Double J stents are used to treat ureteral stones and large kidney stones to ensure drainage and kidney function during treatment. Although safe to use, early complications such as pain, irritating symptoms, hematuria, infection and even Eurospesis have been reported.
- Double J tube remains in body for at least 3-6 weeks, and then it will be removed from patient’s body by doctor in a determined day.
- Fluid intake usually starts 1 day after surgery and the diet should gradually return to the previous days
- The postoperative position is better lying on your back and the top of bed should be 30 degrees to reduce pain and better breathing.
• Hematuria is normal in the first days after surgery and usually dilute blood may come out of the urine 1-2 weeks after surgery.
• Examine the presence of surgical complications such as: bleeding from the site of surgery, urinary infections and damage to the organs around the kidney in the patient and in case of complications, inform the doctor immediately.
• In very rare cases, PCNL may damage the spleen, liver, pancreas or gallbladder.
• It is very important to control the patient's pain, pain that is not relieved with injectable painkillers should be reported to the doctor.

If you have any questions or ambiguities, call the following number:

023-33437824, Surgical ward of Kosar Hospital