A ureteric stent is placed to relieve obstruction of a ureter or to assist urine drainage from a kidney.

Follow-up

Date of stent placement: ________________

☐ Please contact your urologist’s office within the next week to arrange for a follow-up appointment in _______ weeks/months.

or

☐ Your follow-up appointment has been arranged for ________________ (time) on ________________ (date) at ______________________________ (location)

Remember you must have your stent removed.
A ureteric stent is placed to relieve obstruction of a ureter or to assist urine drainage from a kidney. The ureter is the tube draining urine from each kidney into the bladder. A ureteric stent is a thin plastic tube that sits within the ureter, from the kidney to the bladder, allowing urine to drain freely.

A ureteric stent is not permanent. It may be left in for a few days, or even up to several months. The stent eventually must be removed or replaced as it can become obstructed with debris.

The stent will often be removed in an outpatient clinic by cystoscopy (insertion of a scope into the bladder through its outlet). In some cases the stent is required for a brief period of time. In these cases your urologist may have left a thread attached to the stent that comes out of the urethra to allow easy removal.

Stent symptoms

Although some patients feel no differently after placement of a ureteric stent, most are aware of some changes. It is not unusual to have some bladder discomfort, especially with urination. There may be increased urgency and frequency of urination. Mild blood staining of the urine or passing small blood clots may be seen when a stent is in place. These symptoms may increase with physical activity, are related to bladder irritation from the stent and are normal. Restriction of strenuous physical activity may become necessary while a ureteric stent is in place.

There may be mild discomfort in the back with urination while a ureteric stent is in place. This is harmless and related to backflow of urine toward the kidney through the stent, by-passing the one-way valve that normally prevents such backflow. There may be small traces of blood in the urine, or more frequent and urgent urination.

Any discomfort can usually be controlled with acetaminophen (e.g. Tylenol™) or ibuprofen (e.g. Advil™). Occasionally, discomfort is such that a stronger painkiller available only by prescription, such as acetaminophen with codeine (Tylenol #3™), may be required. Frequent or urgent urination and discomfort may be relieved with urinary muscle relaxant medication, such as oxybutynin (Ditropan™), tolterodine (Detrol™), or tamsulosin (Flomax™).

Stent related symptoms may be troublesome, but they do not cause any serious physical damage. These symptoms will resolve quickly after the ureteric stent is removed.

See a doctor if:

- You develop a high fever.
- Urination becomes difficult.
- Pain is not controlled by available medication.
- Continuous urinary leakage develops.

Your urologist will have informed you about the next step in your investigation or treatment. Ensure that you have an appointment with your physician to have your stent removed.