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PCNL Aftercare at Home

PCNL is an operation in which large kidney stones are broken up and removed through a small channel made in the back. In the first weeks after discharge, keeping the tube site clean and dry, drinking plenty of fluids and avoiding heavy lifting support recovery. If a double-J stent has been placed, it is important not to forget its removal date.

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Seek help immediately

- A temperature of 38 °C or higher, or shivering
- Back or side pain that keeps increasing or does not settle with painkillers
- Heavy bleeding or clots in the urine, or bleeding from the tube site that soaks the dressing
- Shortness of breath or chest pain
- Being unable to pass urine, or no urine draining from the nephrostomy tube

In an emergency call 112 (the European and Turkish emergency number) or go to the nearest emergency department.

This guide is general information; the instructions you receive personally always take priority.

Percutaneous nephrolithotomy (PCNL) is an operation in which the kidney is entered through a channel of about 1 cm in the back, and the stone is broken up and removed. At the end of the operation a **nephrostomy tube** or a **double-J stent** may be placed as needed, or the operation may be finished without a tube. The hospital stay is usually 1–3 days. This guide covers the period after you go home.

Before you leave hospital

Make sure you know the following before discharge:

- Whether a tube or stent remains in your body and, if so, when it will be removed
- How and how often to change the dressing at the tube site
- Which medicines to take and how
- **When to restart your blood thinners.** Do not stop, change or restart your blood thinners without talking to your doctor.

- The date of your follow-up appointment

After the procedure: the first days

The following are common and usually ease within days:

- **Tenderness and pain** in the back at the tube site
- **Pink urine or slight bleeding**
- For a while after the tube is removed, **leakage of urine-tinged fluid** from the tube site; this opening usually closes on its own
- Tiredness and getting tired easily
- If you have a stent, passing urine often, a sense of urgency and side pain when passing urine

Take the painkillers your doctor has recommended as instructed. If you have been prescribed antibiotics, finish the course even if you feel well.

Bleeding can, rarely, appear in the days after discharge. If your urine becomes darker or you see clots, do not wait; seek help.

Care at home

- **Tube site:** Change the dressing as you have been shown and keep the area clean and dry. If there is leakage, replace the dressing whenever it gets wet.
- **If you go home with a nephrostomy tube:** Keep the drainage bag below the level of the kidney, empty it regularly, do not pull the tube and stop it from kinking. If the tape holding the tube loosens, secure it again.
- **Fluids:** Drink plenty of water spread through the day; the aim is pale-coloured urine. If you have been told to limit fluids, ask your doctor how much to drink.
- **Activity:** Take short, frequent walks. Avoid heavy lifting, straining and strenuous exercise in the first weeks. Your return to sport will be planned at your follow-up visit.
- **Constipation:** To avoid straining, eat a high-fibre diet and drink enough fluids. If you become constipated, talk to your doctor.
- **Showering:** Ask your doctor when you can shower and how to protect the dressing. Avoid baths, swimming pools, the sea and saunas until the tube site has fully healed.
- **Driving:** You may drive at the end of the period your doctor recommends, provided pain does not limit your movement and you are not taking medicines that make you drowsy.

- **Work:** Most people return to desk work within 1–2 weeks. If your work is physically demanding, your return will be planned at your follow-up visit.
- **Sex:** Wait for the period your doctor recommends; if you have a stent, ask about this at your follow-up visit.

Follow-up

- **If a double-J stent has been placed, do not forget its removal date.** Write the date down and book your appointment in advance. Stents left in place for too long can become encrusted and cause infection.
- Whether any stone fragments remain is assessed with follow-up imaging. Large, branched stones may need an additional procedure.
- The analysis of the removed stone is discussed at your follow-up visit. Where needed, further blood and urine tests are used to guide advice on reducing the chance of new stones.

For more information, see the [PCNL page](#).

Contact

- **Appointments and follow-up visits:** Özel Medicabil Nilüfer Hastanesi, 444 8 112 (weekdays 08:30–12:00); Özel Jimer Hastanesi, 444 45 67 (weekdays 13:00–17:00).
- **Emergencies:** Call 112 or go to your nearest emergency department. Do not use messaging apps (such as WhatsApp) for emergencies.

Follow-up and appointments

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