REMOVING THE STENT

Your child will return to the Day Unit to have his stent removed approximately 2 weeks after surgery. This is a simple procedure performed on the ward.

He will not need to fast. Encourage him to drink plenty of fluids that morning. This will help him to pass urine after the stent is removed.

You can give your child painkillers in the morning before he comes to the Day Unit.

Remember, do not give your child the anti-spasmodic medication on the morning before coming to the Day Unit, as this may cause difficulty in passing urine.

Once the stent is removed, your child will pass urine normally. Once he has passed urine without difficulty, he can be discharged home.

CONTACT DETAILS

Phone 01 409 6100 Bleep 8687 / 8686

If you need assistance out of hours please contact your local GP or emergency department.

Remember: Ask your nurse if you are unsure about anything about your child’s care.

Additional instructions

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Discharge information for parents / guardians of a child post

EPISPADIAS REPAIR

WITH

DRIPPING URETHRAL STENT

Developed by the CNSp Urology

Date issued: December 2017
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Our Lady’s Children’s Hospital, Crumlin, Dublin 12
STENT
Your child has a Urethral “Dripping” Stent in place to drain his urine. This protects his operation site. It is stitched to the tip of the penis to secure it.

To prevent the urine from wetting his wound, the stent is threaded through a hole in his nappy. Then a second nappy is placed over the first. The stent drains into the second nappy.

We recommend that you use a nappy without a silicone filling as the inside nappy. The silicone forms beads when wet, which may block the stent.

Encourage your child to drink plenty of fluids, as this will help ensure he passes enough urine. If the nappies are dry and the child is uncomfortable, contact the hospital.

Your child may be prescribed an antibiotic while he has the stent in place. If so, please give this as prescribed.

IF THE STENT FALLS OUT CONTACT THE HOSPITAL

WOUND
Usually your child’s dressing will be removed 24 hours after his surgery.

The penis may look bruised and swollen. This is normal and it will resolve.

The wound will be left exposed when he goes home. Do not apply any creams to the wound.

You may apply a thin layer of vaseline to the tip of the penis to prevent it sticking to the nappy.

It is important to keep the wound clean and dry to prevent infection. If your child has a bowel motion and soils his wound, wash the area with warm water/soft cloth.

You can shower / wash as normal, with a mild body wash. Avoid the bath.

SIGNS OF WOUND INFECTION:
• Pain / Redness / Oozing / Odour / Swelling
• Please contact the hospital or your GP if you notice any of these signs.
• Avoid rough play / sports / cycling while stent is in place.

PAIN
If your child complains of pain, you can give him painkillers as directed on discharge.

Please read and follow the instructions on the medications carefully.

If you notice that your child’s pain increases or is difficult to relieve, contact the hospital or your GP.

URINARY TRACT INFECTION
Observe your child for signs which may indicate a urine infection:
• Temperature / unwell / off feeds / cloudy or foul smelling urine / pain / vomiting.

Please contact the hospital or your GP, if you notice any of these signs.

To prevent infection, it is important that you wash your hands before and after any handling of your child’s stent.

BLADDER SPASM
Spasm is a result of the stent tip irritrating the trigone which is the sensitive area at the base of the bladder. Spasm often presents as sharp gripping pain which your child may feel in their bottom or tip of the penis.

You may be prescribed a bladder relaxant medication (oxybutynin).

This medication is readily available in your local pharmacy. Depending on the dose prescribed you may need to split/crush tablets. Your nurse will liaise with pharmacy.

However, you should not give this medication to your child on the morning his stent will be removed, as he may find it difficult to pass urine. He can get his last dose the night before coming to the Day Unit.

Constipation can cause your child to strain which can put pressure on your child’s bladder. As a result your child may pass urine around his stent and increase bladder spasm.

To prevent constipation, encourage plenty of fluids and a balanced diet.

A mild laxative may be required if your child becomes constipated.