

Information for Patients

Nephrectomy

What is a nephrectomy?

Nephrectomy varies based on how much of the kidney is removed and how the surgery is done.

The two main types of nephrectomy surgeries are:

- **Radical nephrectomy.** This is surgery to remove an entire kidney. Occasionally, the Urologist also takes out part of the tube that connects the kidney to the bladder, called the ureter.
- **Partial nephrectomy.** This is surgery to remove part of a kidney. The Urologist removes diseased or injured tissue from a kidney and leaves healthy tissue in place.

Why do I need a nephrectomy?

Common reasons for a nephrectomy are:

- Cancer of the kidney
 - Very large kidney stones that have caused damage to the kidney
 - Non-functioning kidney causing problems like pain and infections
 - Kidney donation for transplant
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What happens before my operation?

10 days before your operation, blood and urine test need to be done.

You will be contacted by the hospital regarding your admission time and to confirm fasting instructions.

Complete all your hospital admission forms at least 5 days prior to your operation.

What happens during my operation?

The ways that a nephrectomy can be done include:

- **Open surgery.** The surgeon makes a cut along the side. This open approach is rarely needed. But it lets surgeons do some surgeries that still can't be done safely with less invasive approaches, such as laparoscopy.
- **Laparoscopic surgery and Hand Assisted Laparoscopic surgery.** The surgeon makes a few small cuts in the stomach area. A laparoscope, is placed through the cuts to see inside the body. Then surgical tools remove the part or all of the kidney. Laparoscopic surgery often has benefits compared to open surgery. These include smaller cuts, shorter recovery time and hospital stays, and fewer complications after surgery.
- **Robot-assisted laparoscopic surgery.** The surgeon uses a robotic system to do the procedure. This method can help some surgeons move the tools with more ease and exactness compared to standard laparoscopic surgery.

What to expect after my operation

For open surgery you will be in hospital for 4-6 days.

For laparoscopic or robotic surgery you will be in hospital for 2-3 days.

When the operation is completed, you will go to the recovery room for a short while where you will be cared for until you are ready to be transferred to your room.

Pain Control

Pain control is managed in conjunction with your anaesthetist. For pain relief it is likely you will have a PCA (Patient Controlled Analgesia) pump attached to your intravenous line. You will be able to control the amount of pain relief by pressing a button connected to the pump.

Wound

The wounds will depend on what type of nephrectomy operation you have had. The stitches will be dissolvable and do not need removing.

Urethral Catheter

A catheter will be coming out your urethra (water pipe). This is temporary and will be removed a few days post-operation.

After discharge

You will receive a follow-up appointment in the post to see your Urologist six weeks after the operation.

You can do most activities after your operation except any heavy lifting, straining, intercourse or strenuous activity, which should be avoided for 4-6 weeks after surgery. You will be able to continue with your normal daily routines as you feel able.

Generally when you feel that you could perform an emergency stop without being concerned about abdominal pain (at about 4 weeks), then you can resume driving.

Discharge advice

Even though one kidney functions as well as two, you may be advised to take some precautions to protect the remaining kidney. These precautions include:

- Increase your amount of exercise as tolerated
- Aim for a fluid intake of 1 to 2 L per day
- Have regular monitoring of your blood pressure and blood tests
- See your GP promptly if you experience chills, fever or pain in your bladder or back, or your urine is cloudy and smells offensive. These symptoms may indicate a urinary tract infection and require treatment.

Possible complications

Bleeding

Bleeding severe enough to bring you back to the hospital is rare. This risk disappears when healing is complete, six to eight weeks after surgery. If you notice an increase in bleeding or are unable to pass urine, contact your GP.

Wound Infection

Your wound may become infected post-operation. Symptoms can include:

- Redness
- Swelling
- Pain
- Hot to touch
- Discharge from wound

You will need to contact Urology Associates if you think you have an infection. The nurses can assess your wound and refer you to a Urologist if treatment is required.

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