Introduction
Urinary stones are reached directly by endoscopy. Laser or pneumatic lithotripsy is applied through the endoscope. Stone fragments are removed through the endoscope by instruments or allowed to pass spontaneously. Different methods of approaching the stone are required according to the location of the stone. Percutaneous Nephroscopic Lithotripsy is suitable for big renal stones and upper ureteric stones.

The Operation / Procedure
This is done under general anaesthesia. The affected kidney is punctured to allow the introduction of nephroscope into the pelvicalyceal system. The stone will then be fragmented and removed through the nephroscope. A nephrostomy tube is inserted to allow urine drainage.

Before the Operation / Procedure
1. Relevant blood and urine tests together with radiological examinations.
2. Anticoagulants e.g. aspirin may have to be stopped.
3. Fast after midnight prior to procedure performed under general anaesthesia or according your doctor’s instruction.
4. A written consent is required after doctor’s explanations.

After the Operation / Procedure
1. It is advised to drink 3-4 litres of water per day to increase the urine output to 2-3 litres a day. This will facilitate the passage of stones.
2. Urethral catheter is usually removed one day after the surgery.
3. Nephrostomy tube will be removed 3-4 days after operation.
4. Wound will heal up about one week after removal of the nephrostomy tube.
5. Please comply with the medication regime and take analgesic as prescribed by your doctor.
6. Stone formation may be prevented by a well balanced diet of high fiber, low salt, low fat and low sugar.

Risk and Complication
1. Voiding of blood stained urine.
2. Pain induced by the nephrostomy.
3. Urinary tract infection.
4. Perforation of the renal pelvis.
5. Massive bleeding due to renal vessels damage.
Percutaneous Nephroscopic Lithotripsy (PCNL)

Disclaimer
This leaflet only provides general information pertaining to this operation / procedure. While common risks and complications are described, the list is not exhaustive, and the degree of risk could also vary between patients. Please contact your doctor for detailed information and specific enquiry.

Reference
Department of Surgery, Queen Mary Hospital, Procedure Information Leaflet: Intracorporeal Lithotripsy - Percutaneous Nephroscopic Lithotripsy (2008)