

## Let's Talk About...

# Ureteral reimplant surgery

Ureteral (you-REE-ter-ul) reimplant is a surgery that corrects urine flow through the ureters (tubes that carry urine from the kidney to the bladder).

## Why does my child need a ureteral reimplant?

Your child may need a ureteral reimplant if:

- Their urinary system did not develop right
- They injured their kidney or bladder
- Urine is not flowing from the kidneys to the bladder and is backing up

## What happens during a ureteral reimplant?

Your child will be sedated (receive medicine to make them sleep) before the ureteral reimplant. The surgeon will make an opening (incision) just above your child's pubic bone in the groin area. They will then reattach the ureter to the bladder and cover the incision with tiny stitches that dissolve on their own. The surgeon will also cover the incision with a dressing. Ureteral reimplant surgery can take 2–3 hours.

Your child may have a urinary catheter, a small tube that drains urine from the bladder, after surgery. They may also have a catheter near the incision to drain fluids.

## When can my child go home after a ureteral reimplant?

Your child usually goes home 1–3 days after a ureteral reimplant. Watch your child carefully during the ride home to make sure their head and neck don't slump forward and close their airway.

## What should I expect after my child's ureteral reimplant?

Your child may have mild burning when peeing and swelling in the groin for 48–72 hours after the procedure. They may also have some blood in their urine off and on for the first week or so. Mild fevers and a small amount of blood and oozing from the wound site are normal.

If the incision is dripping blood, hold gentle pressure with a clean, dry washcloth for 5–7 minutes. If blood continues to drip, hold pressure again and call your child's surgeon's office.



## What can my child eat?

After your child wakes up from surgery, they can have clear liquids, including an electrolyte drink (such as Pedialyte™), water, apple juice, sports drinks, ice pops, and plain gelatin. These are easily digested. Most babies can take a bottle or breastfeed. Your child may eat a normal diet after being discharged from the hospital. Start with soft, easily digested foods. Avoid high-fat or greasy foods, like hamburgers and pizza, the first 24 hours after surgery.

## What should I do about nausea and vomiting?

After surgery, many children feel nauseated and may vomit in the first 24 hours. This can be caused by medicines during surgery, car movement, or pain medicine after surgery. Help control nausea by:

- Encouraging your child to lie still
- Offering clear liquids, which are important after surgery to help prevent dehydration
- Slowly offering regular foods over a few days until your child can eat a normal diet

If your child vomits, let their stomach settle for 30–60 minutes and offer clear liquids. If your child vomits for several hours, call their healthcare provider for instructions. It may take 1–2 days before your child is interested in solid foods.

## What are the signs of dehydration?

Your child may be low on body fluids (dehydrated) after surgery. Signs of dehydration include:

- Dark yellow urine
- Dry mouth (no spit)
- Chapped lips
- Sinking soft spot on a baby's head

### Urinary System

**Kidney:**  
a bean-shaped organ that makes urine.

**Ureter:**  
a tube that carries urine from the kidney to the bladder.

**Bladder:**  
an organ that holds urine.

**Urethra:** a tube or canal leading from the bladder to outside the body (through the penis in males, near the vagina in females).

After surgery, encourage your child to urinate (pee) every 2–3 hours. Usually, normally voiding (peeing) resumes within 24 hours after surgery. A baby should have 6–8 wet diapers within a 24-hour period; an older child should pee every 3–4 hours.

## How do I help my child manage pain after a ureteral reimplant?

To help your child manage pain, comfort them and listen to their concerns. Make your child as comfortable as possible to encourage healing. Talk to an older child about pain levels, and watch for signs of pain in a younger or developmentally delayed child. A child in pain may moan, whimper, make a face of pain, cry, be irritable, be inactive, not eat, or not sleep.

If it is not time for pain medicine, try other ways to control pain, like watching a favorite show, giving massages, using a heating pad (after the first day), or playing games.

## What medicines does my child need?

Alternate doses of acetaminophen (such as Tylenol®) and ibuprofen every 3–4 hours for the first couple of days. If your child is sleeping, do not wake them to give them another dose. Your child's doctor may prescribe a stronger medicine (such as oxycodone). Most children will need the stronger pain medicine for 3–4 days with over-the-counter medicines used in-between. If this does not seem to be enough, call your child's doctor.

Give your child all antibiotics if their doctor prescribes them. If they have problems keeping them down or have side effects, call your child's doctor.

## How do I care for my child's wound?

To care for your child's wound:

- Remove the gauze dressing over the incision the day after surgery.
- Trim the small Steri-Strip™ skin closures supporting the incision as they start to peel up and remove them after 1–2 weeks.
- Let the stitches dissolve on their own; do not remove them.
- Wash and care for the skin as normal after the Steri-Strips come off.

- Use lotion on the surrounding skin and incision 2 weeks after surgery (if needed).
- Use adhesive remover if needed to remove the adhesive on the skin (if any) after the Steri-Strips come off.

It is normal for the incision to be red, slightly raised, and swollen at first and to see small amounts of dried blood.

## How much drainage is normal after ureteral reimplant?

A small amount of blood and oozing after ureteral reimplant is normal. If blood is dripping (like a nosebleed), apply pressure with a clean, dry washcloth and call your child's doctor. If the bleeding continues after 10 minutes of pressure, call your child's doctor or take them to the emergency room.

## When can my child take a bath or shower?

Your child can have a sponge bath right after surgery. Unless they have a urine drainage stent, they should wait 48 hours after surgery to take a shower or short tub bath. Pat the incision dry with a towel and allow the Steri-Strips to dry before your child gets dressed. If your child has a stent, they should only have short showers or sponge baths until the tube is removed. The tube is stitched in and should be secured to the skin with tape.

## How active can my child be after a ureteral reimplant?

Anesthesia medicine can affect balance, so don't let your child do any activities that require balance the first day after surgery. This includes riding a bike, playing on playground equipment, and riding a scooter. Watch your child carefully if they are taking a narcotic medicine for pain, such as hydrocodone. These can make your child sleepy or dizzy. Your child should not participate in gym activities for 2 weeks and sports for 3 weeks.

## What is normal behavior after a ureteral reimplant?

It is normal for your child's behavior to change after surgery. They may act like a younger child (bed wetting or acting out), change sleep and eating patterns, or have nightmares. Be patient. Most



behavior changes last a few days to 2 weeks. Remember that your child's routine was upset by surgery and comfort them. If the behavior lasts longer than 4 weeks, call your child's doctor.

## How do I schedule a follow-up appointment?

Call the pediatric urology clinic at 801.662.5555 (option 2) to make a follow-up appointment after your child's ureteral reimplant. The surgeon will tell you when they'd like to see your child. They sometimes recommend following up with your child's primary care provider instead.

## When should I call my child's surgeon?

If you are concerned about your child, call the urology office at 801.662.5555 and choose option 3. If the office is closed, call the operator at 801.662.1000 and ask them to page the on-call pediatric urology resident.

Call your child's surgeon if:

- Your child has a fever higher than 102°F (lower fevers are normal after surgery)

