



Care After Reimplant Surgery for Urinary Reflux

Reimplant surgery fixes urinary reflux. This is a condition in which urine travels from the bladder back up to the kidneys. To correct this problem, the tubes from the kidneys to the bladder (the ureters) are reimplanted in the bladder wall. Your child will be in the hospital for 3 to 5 days when having this surgery.

How do I care for the cut from surgery (incision)?

- The incision may be in the shape of a smile. It is just above the pelvic bone. This will not be visible later in life, since it will someday be covered by hair.
- If your child had a laparoscopic procedure, the incisions are smaller.
- The incision should look clean and dry. A little blood under the bandage is normal. The incision may be covered with surgical plastic glue or small pieces of tape (Steri-Strips) and a clear bandage. These should be left in place. If the bandage or strips curl up at the ends, they can be trimmed. The surgical glue will peel off on its own. You can remove the Steri-Strips and bandages in 1 week. When it is time to remove the bandages, bathing will help loosen them.
- The stitches will dissolve on their own. They do not need to be removed.

Will my child have pain?

- After a surgery some pain and discomfort is normal. You know your child best. We encourage you to take an active part in your child's recovery by talking with your care team about how your child shows pain. In addition to medicine given while in the hospital, encourage coping tools (like games or books) to treat pain and provide support. No matter the level of your child's pain, we also believe that they are hurting and will respond right away.
- Your child may have some pain around the incision and may have bladder spasms. The most discomfort occurs 24 to 48 hours after surgery while your child is still in the hospital. If your child has a laparoscopic procedure, irritation along the lower ribs, back or shoulder is common.
- Your child will be given stronger medicines during this time to lessen the pain, often through a thin tube called an epidural catheter. This tube is removed in 2 days.
- When your child is back home, use children's acetaminophen (Tylenol, Tempra, Liquiprim, Panadol, etc.) as directed by your child's doctor. Your child may also be given medicine for bladder spasms, if needed.

What is a bladder spasm?

A bladder spasm is a contraction or tightening of muscles in the bladder wall.

They can happen when the urinary catheter irritates the bladder wall or when the urinary catheter gets kinked or blocked. They also can happen as the bladder wall is healing. A bladder spasm usually lasts less than a minute and can cause your child to wince. You may also see your child pee urine that is tinged with blood after a spasm. This is normal and should not harm your child.

Will my child have a catheter to drain urine?

- After surgery, your child will either have an indwelling catheter called a Foley or a suprapubic (SP) drainage catheter for 3 to 5 days.
- Right before the catheter is taken out, your doctor may have your nurse clamp the catheter so your child can get used to peeing on their own.
- Right after the catheter is taken out, your child may have some discomfort peeing for awhile.
- Your child may also have ureteral stents. Ureteral stents are small internal tubes that keep the ureters open. Your child may have strings coming out of the penis or urethra that connect to the stents to allow for clinic office removal. If this is not possible, then these stents may have to be removed in a second surgery 6 to 8 weeks after the first surgery. After the stents are removed, your child may have bladder spasms for a few minutes.

What if my child goes home with a catheter?

- You will be taught how to take care of the catheter and change the urine bag.
- Please read the Seattle Children's flyer called [Indwelling Urinary Catheter Care](#).
- You will soon be able to care for your child's urinary catheter on your own.
- If your child does go home with a catheter, it will be taken out in about a week.

Will there be blood in the urine?

Your child's urine may still be pink when it is time to go home. It will clear up in the next few weeks, but may become bloodier after vigorous play or activity. This is **normal** and should not harm your child. If there are blood clots in your child's urine, call the Urology Clinic.

When can bathing and activity begin?

- Most often, your child can bathe as usual 2 days after surgery. Ask your child's doctor.
- Most children should avoid climbing, biking and contact sports for 1 month. After that time, it is OK to do all usual activities. Ask your child's doctor about your child's plan.

To Learn More

- Urology
206-987-2509
- Paging Operator
206-987-2131
- Ask your child's nurse or doctor
- www.seattlechildrens.org

Free Interpreter Services

- In the hospital, ask your child's nurse.
- From outside the hospital, call the toll-free Family Interpreting Line 1-866-583-1527. Tell the interpreter the name or extension you need.
- For Deaf and hard of hearing callers 206-987-2280 (TTY).

What can my child eat?

- Have your child drink liquids after surgery. The evening of surgery, serve your child a light meal.
- The next day, give your child regular food.
- Ask your child to keep drinking as much liquid as possible.
- Offer a variety of fruit and vegetables. This will help prevent constipation. It is harder to pee when the bowel is full of stool.

Will my child still continue with the antibiotic?

Your child probably will need to continue a low dose of the antibiotic.

Give the medicine at bedtime when the bladder goes for longest time without emptying while your child sleeps.

When should I call the doctor?

Please call your doctor if your child:

- Has a fever of 101.5°F or chills
- Is vomiting
- Has redness, drainage or swelling of the incision or the SP catheter sites
- Has severe, constant pain that is not helped by pain medicines
- Has blood clots in the urine
- Has an indwelling catheter that has stopped draining urine
- Has symptoms of a urinary tract infection, including:
 - Fever
 - Irritability
 - Burning when they pee
 - Needing to pee very often or very badly
 - Smelly, cloudy or bloody urine
 - Wetting if otherwise potty trained

If you have questions or concerns, please call the nurse in the Urology Clinic at 206-987-2509. After hours or on weekends, call the paging operator and ask for the urologist on-call: 206-987-2131.