

WHAT TO DO WHEN THINGS GO WRONG: AN HONEST LOOK AT COMPLICATIONS

URETERAL REIMPLANTATION

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- Prenatally identified bilateral hydroureteronephrosis
- FT delivery
- Healthy infant on room air
- Antibiotic prophylaxis started at birth

LONG RK

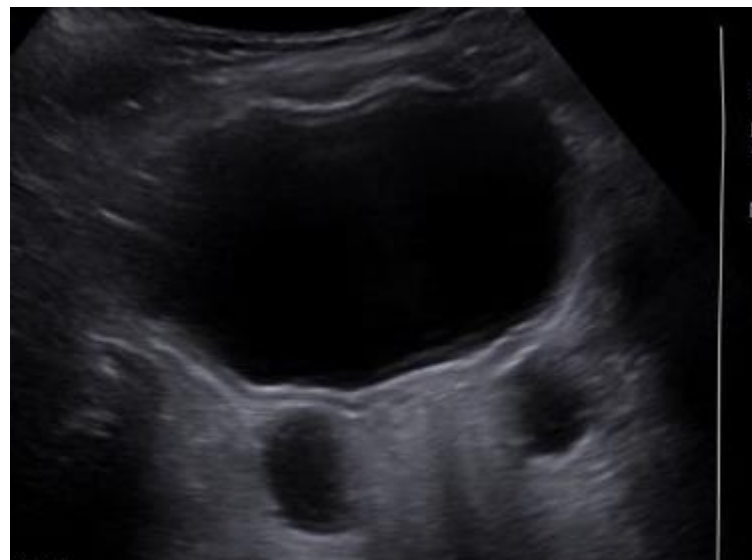
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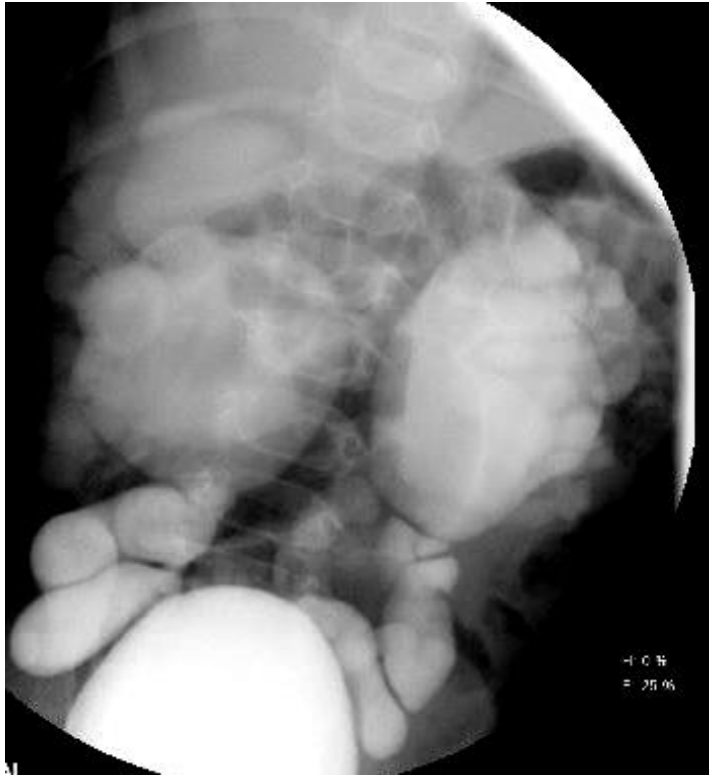


LONG LK

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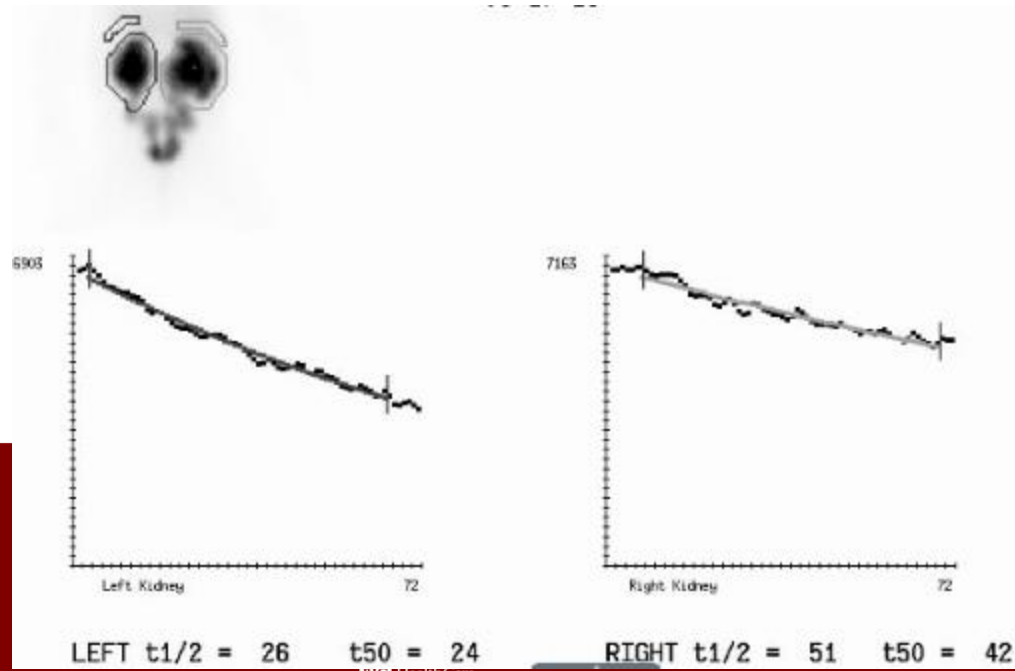
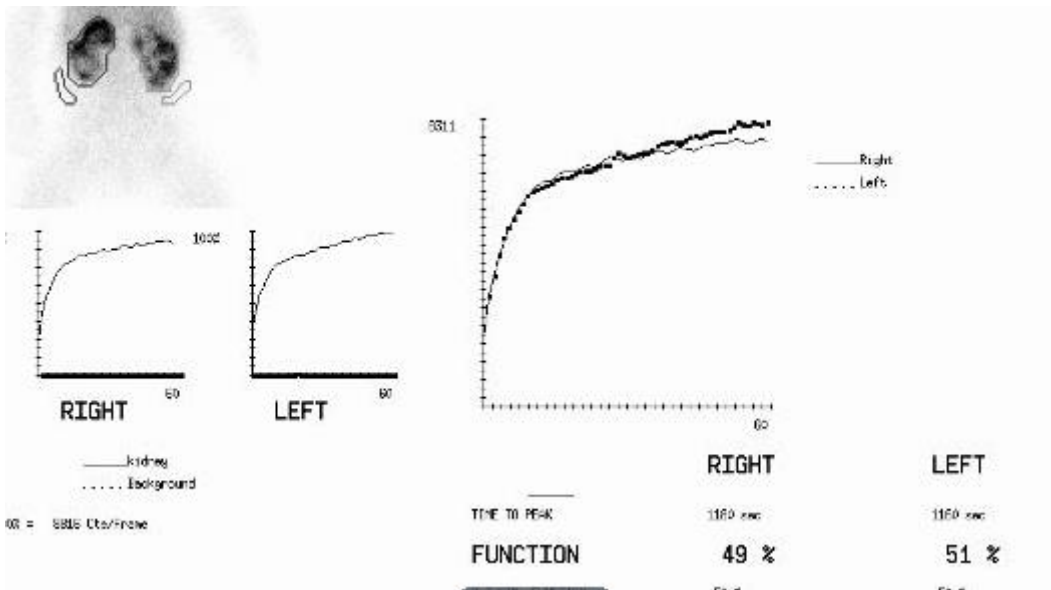
1 L 5.95 cm





- Cystoscopy with incision of bulbar urethral membrane
- Creatinine 0.3 mg/dl
- Antibiotic prophylaxis continued



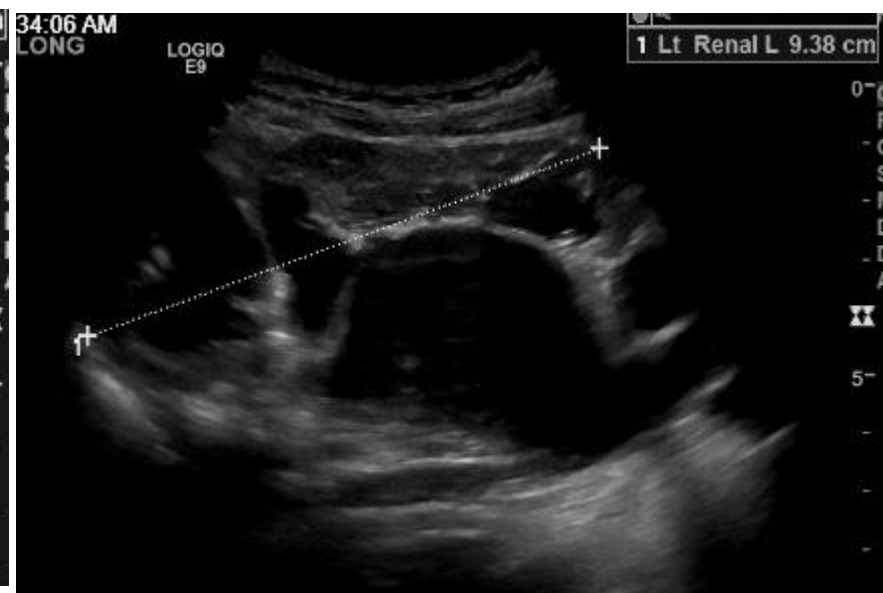
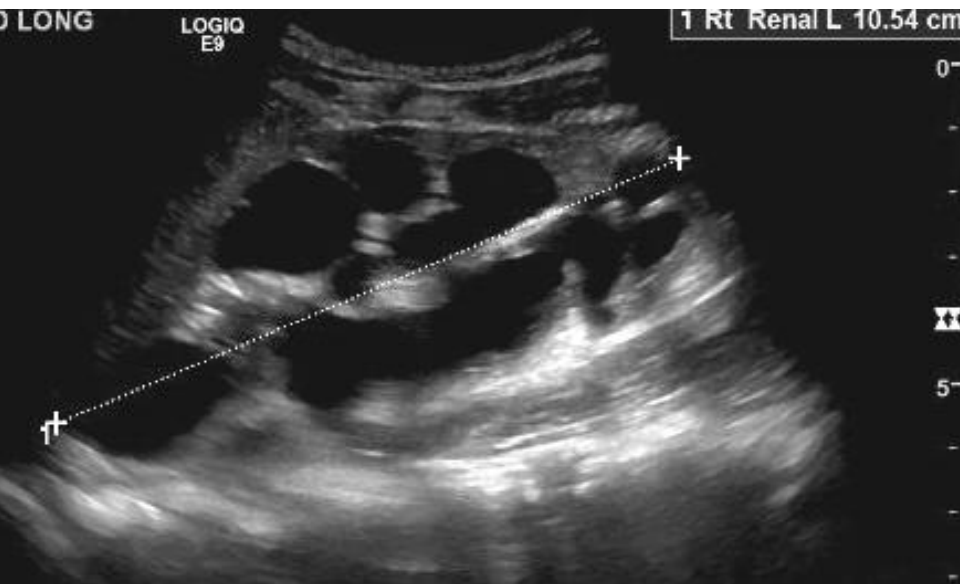


Thought process

- Marked reflux with stasis
- Renal function stable
- No infections
- Could benefit from reimplant but reluctant to proceed
 - ? Bladder function
 - ? Ureteral function

3 years of age

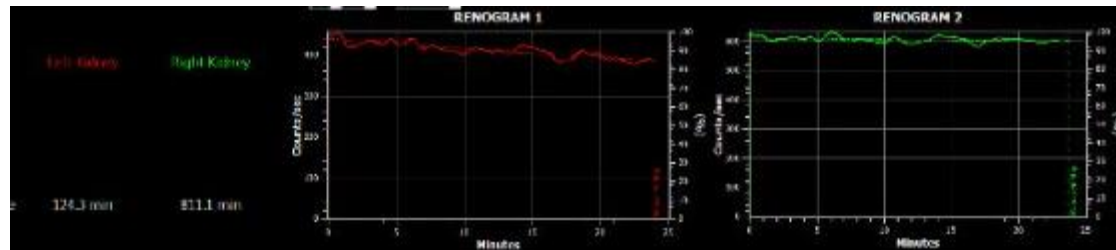
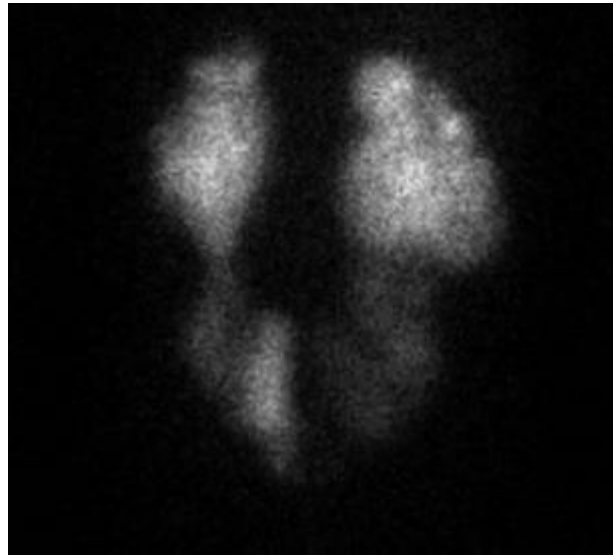
- No infections on antibiotics
- Creatinine 0.35 mg/dl
- Toilet trained
- Voids every 2-3 hours



Creatinine .41 mg/dl



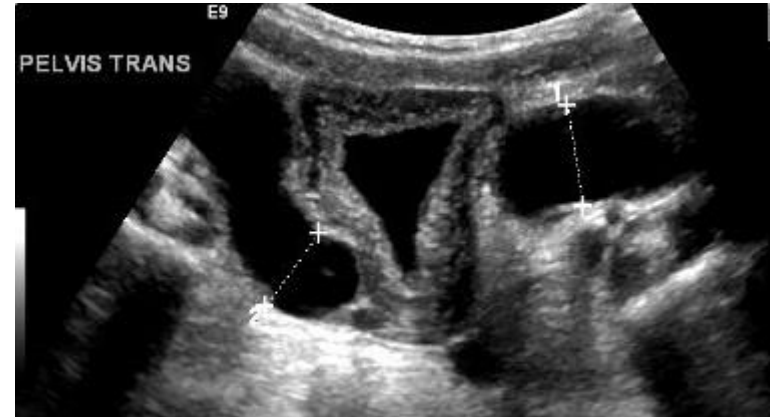
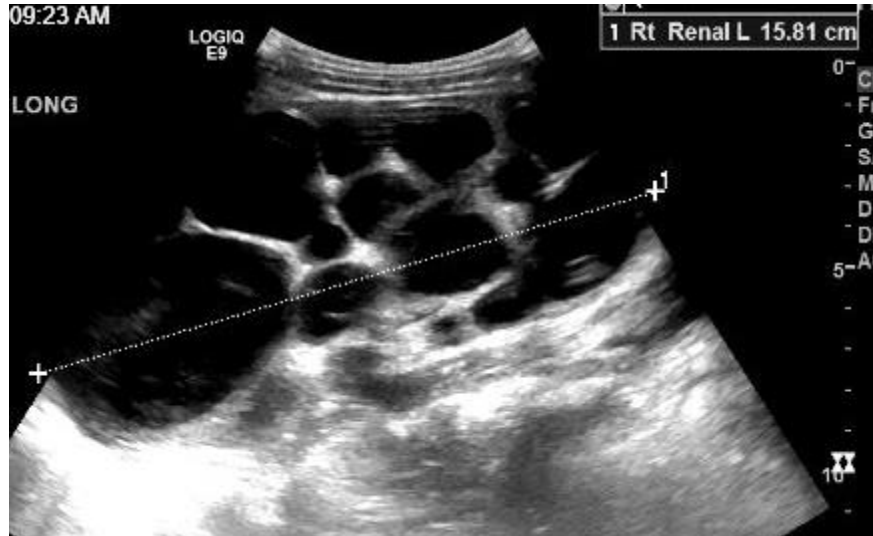
700 cc bladder
Reflux occurred at 650 ml



I recommend that he undergo cystoscopy (to reassess his urethra) with bilateral tapered ureteral reimplantation and insertion of bilateral indwelling ureteral stents. I described the surgery, its risks (anesthesia, bleeding, infection, persistent VUR, urinary obstruction, need for additional surgery), and expected post-op course, including the need for an inpatient stay of 2-5 days post-po and the need to return for outpatient cystoscopy with ureteral stent removal one month later.

- Bilateral tapered ureteral reimplantation
- Ureteral stents placed
- Stents removed 6 weeks after procedure

6 weeks after stent removal



Creatinine .84 mg/dl

Management?

Management

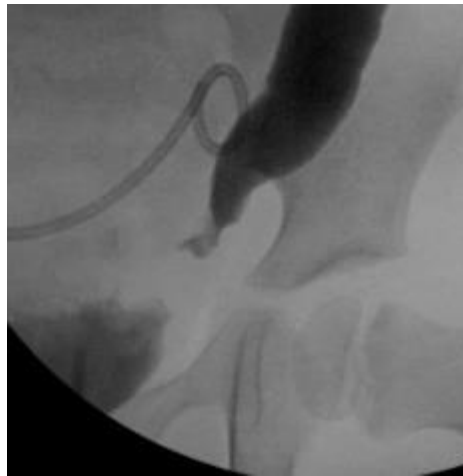
- cystoscopy
- Both ureteral orifices appear normal
- Ureteroscopy shows no obstruction on either side
- Indwelling stents placed
- Foley catheter
- Creatinine returns to baseline (.4mg/dl)



Next step?

Management

- Endoscopic unroofing of both ureters
- Stents removed 6 weeks later
- Endoscopy at this time shows essentially no ureteral tunnel



US 2 months after stent removal



- Creatinine 0.44mg/dl

Next steps?

- Toilet trained
- Voids every 2-3 hours
- Has never had a UTI

