Preparing and Recovering from Your Robotic Kidney Surgery

It is normal to have questions about your surgery. This handout gives you information about what will happen to you before, during and after your surgery. If you still have questions, ask your nurse or doctor for more information.

Before Surgery

- You will get instructions about the time you need to arrive at the hospital.
- Do not eat or drink after midnight the night before your surgery.
- You will meet with a member of the anesthesia team in the pre-operative area.

Important Medicine Information

Talk to your doctor about any medicines you take to thin your blood or prevent clots. You may need to change these medicines or adjust the amount you take before surgery.

These medicines include:

- Aspirin
- Clopidogrel, brand name Plavix
- Prasugrel, brand name Effient
- Ticagrelor, brand name Brilinta
- Apixaban, brand name Eliquis
- Ticlopidine, brand name Ticlid
- Warfarin, brand name Coumadin
- Enoxaparin, brand name Lovenox
- Dabigatran, brand name Pradaxa
- Fondaparinux, brand name Arixtra
- Rivaroxaban, brand name Xarelto
- Cilostazol, brand name Pletal
- Edoxaban, brand name Savaysa
If you have a stent, do not stop taking your medicines to prevent clots without first talking to the doctor who put in the stent. For more information, ask a member of your health care team for the patient education handout on protecting your stent.

If you take aspirin or medicines like aspirin for arthritis pain, your doctor may have you take a different medicine in the weeks before your surgery or procedure.

If your surgery or procedure is canceled for any reason, call your doctor because you may need to restart the medicines you take to thin your blood or prevent clots.

Day of Surgery

You will be told when your scheduled admission date is and where to check in when you get to the hospital.

After Surgery

Once your surgery is done, you will go to the Post Anesthesia Care Unit (PACU) for about 1 to 2 hours to recover. The following is what to expect after your surgery:

- **Ureteral Stents:** Ureteral stents are thin tubes which drain urine from the kidneys to the bladder. The stents allow the urine to flow freely. If your surgery involved the repair of the drainage system of the kidney, a stent may be left in place while the repair is healing. It will be removed by the surgeon at your follow up clinic visit.

- **OnQ Pain Pump:** If you have a larger incision for the removal of the entire kidney you may have an OnQ Pain Pump to help with pain control. The pump is filled with numbing medicine and attaches to a tube or tubes called catheters that are put under your skin near your incision during surgery. The medicine numbs the nerves by your incision so you have less pain. You may also have some numbness where the medicine goes into your skin.

- **Sequential Compression Devices (SCD’s):** A sleeve is placed around each leg and connected to a pump. The pump forces air into different parts of the sleeve to create gentle pressure around your calves. The pressure pushes the blood through the vessels in your legs to prevent blood clots. You will wear SCD’s during the night while sleeping, and throughout the day, except when you are out of bed or walking.
• **Incentive Spirometer:** This device will help keep your lungs clear after surgery. By using this device, you keep your lungs active. This helps to lower the risk for infection and breathing problems. Your nurse or respiratory therapist will teach you how to use your spirometer.

• **Your Skin and Surgical Incisions:** The small incisions made during surgery are called **port sites.** These sites will have special “glue” holding them together. The glue will wear off in 3 to 4 weeks. There are no staples or stitches to be taken out. You may have a small amount of drainage from your incisions. You may also have bruising around the incision area 1 to 5 days after surgery. This will go away over time.

**Pain Management After Surgery**

• Pain medicine will be prescribed for you. Take pain medicine as directed to help relieve your pain.

• Pain medicine can cause constipation. Take a stool softener pill to help reduce this problem.

• To minimize the use of pain pills, you may take extra-strength Tylenol (acetaminophen) every 6 hours, instead of your prescription medicine to control your pain. Some pain medicines such as Percocet or Vicodin have Tylenol in them. **Do not take more than 2000mg of Tylenol (acetaminophen) per day.**

**Discharge from the Hospital**

• During your hospital stay, you will meet a Patient Care Resource Manager (PCRM). The PCRM will work with the other members of your health care team to help arrange for any care you may need when you leave the hospital.