



## Ureteroscopy

### **What is ureteroscopy?**

It is a procedure in which a small scope (like a flexible telescope) is inserted into the bladder and ureter and it is used to diagnose and treat a variety of problems in the urinary tract. For ureteral stones, it allows the urologist to actually look into the ureter, find the stone and remove it. The surgeon passes a tiny wire basket into the lower ureter via the bladder, grabs the stone and pulls the stone free. This is an outpatient procedure with or without a stent inserted (a tube that is placed in the ureter to hold it open).

Ureteroscopy can be used for virtually any stone of a size appropriate for it. Fragmentation of stones using holmium laser device ureteroscopically is more assured than with shock wave lithotripsy (SWL).

### **When is ureteroscopy used?**

Most often ureteroscopy is used for stones in the ureter, especially for stones closest to the bladder, in the lower half of the ureter. It is the most common treatment of lower ureteral stones. For stones in the kidney, shock wave lithotripsy (SWL) is often recommended. SWL treatment cannot be used in everyone. For patients who are pregnant, morbidly obese, or have a blood clotting disorder, ureteroscopy is a good choice. For very large or oddly shaped stones, or stones that are very hard, other treatments such as percutaneous nephrolithotomy or, rarely, open surgery may be needed.

### **Is a basket always used during ureteroscopy?**

Not always. In addition to the basket, the surgeon performing ureteroscopy has several other options for stone treatment. If the stone is too large or too tightly stuck in the ureter, it can be fragmented with a laser (pulsed dye laser), shock waves (high frequency sound waves) or electrical energy (electrohydraulic lithotripsy).

### **Will I be hospitalized?**

Most often, this is an outpatient procedure.

### **What are the risks?**

There is a small chance of infection, bleeding, or injury to the ureter. If the ureter is too small, a stent may be left in place for one or two weeks to keep the ureter open and then the procedure is performed at a later date.