

PREOPERATIVE DIAGNOSIS:, Residual stone, status post right percutaneous nephrolithotomy.,POSTOPERATIVE DIAGNOSES: , Residual stone status post right percutaneous nephrolithotomy, attempted second-look nephrolithotomy, cysto with insertion of 6-French variable length double-J stent.,ANESTHESIA:, General via endotracheal tube.,BLOOD LOSS:, Minimal.,DRAINS: , 16-French Foley, 6-French variable length double-J stent.,INTRAOPERATIVE COMPLICATIONS: , Unable to re-access the collecting system.,DESCRIPTION OF PROCEDURE: ,The patient was brought to the operating room and laid supine. General anesthesia was accomplished. A 16-French Foley was placed using aseptic technique. The patient was then placed on the operating table prone. His right flank was prepped and draped in a sterile fashion. At this point, contrast was injected through his existing nephrostomy tube and there was no continuity with the collecting system and it was removed. The 5-French Pollack catheter was used to pass a 0.38 super-stiff Amplatz wire. The wire would not go down the ureter. Multiple attempts were made using Pollack catheters and Cobra catheters and attempts were made to dilate the track, both with rigid dilator and the balloon dilator and access could not be obtained. After multiple attempts, access was lost. At this point, the tubes were left out of the kidney and sterile dressings were applied. The patient was then placed on another operating table supine. His genitalia were prepped and draped after removing his Foley catheter. Flexible cystoscopy was performed and the right orifice identified, which was

edematous and erythematous. The wire was passed up to kidney and a 5-French Pollack catheter was then passed over to after the removing the scope. The wire was removed.

Contrast injection with good placement in the collecting system. The wire was replaced. The Pollack catheter removed and 6-French variable length double-J stent was inserted using fluoroscopic guidance. The wire was removed leaving the double-J stent in good position. _____

16-French Foley was reinserted and connected to close drains., Procedure was terminated at this point and had been well tolerated. The patient was awakened and taken to recovery room in satisfactory condition having tolerated the procedure well.