Extracorporeal Shock Wave Lithotripsy

SUNA Postoperative Care Task Force

Overview

Extracorporeal shock wave lithotripsy (ESWL) is a procedure that uses shock waves to break a kidney stone into smaller pieces. The smaller pieces (as small as grains of sand) should be easier to pass through the body along with urine. The treatment is done outpatient in a hospital, and you will usually go home the same day. Not all kidney stones can be treated with ESWL. The most common method of ESWL is the patient lies on top of a soft cushion or membrane. The waves pass through the cushion to crush the stones. The complete treatment takes about 45 to 60 minutes.

Indications

The size, number, location, and type of the stones need to be considered to discuss treatment options. In addition, the stones must be clearly viewed by the X-ray monitor so the shock waves can be targeted accurately.

Shock wave lithotripsy usually works best to treat smaller stones inside the kidney or upper part of the ureter (urine tube). Your provider will consider a stone’s size, your medical problems (including medications), and your body structure before deciding what is best for you.

Providers often use shock wave lithotripsy to treat kidney stones that:
- Are too large to pass on their own (larger than 5 millimeters in diameter – about the size of a pencil eraser).
- Block urine flow.
- Are very painful.

What to Expect with ESWL

Risks

Potential risks of shock wave lithotripsy include, but are not limited to:
- Blockage in the ureter.
- Blood in the urine or bleeding around the kidney.
- Infection.
- Mild discomfort or bruising on the back (near the treated area).
- Painful urination.
- Failure to break the stone or failure to break the stone into small enough pieces to pass.

Expectations

- You may see blood in your urine: It’s common to see small amounts of blood in your urine. (Your pee may look pink.) It may hurt to urinate. These symptoms usually go away after a few days.
- Drink plenty of water: Staying hydrated helps stone fragments move through your body.
- Passing the stone pieces: It can take several weeks to pass the pieces of stone through your urine.
- You should collect stone pieces that you pass: Testing the stone may tell your provider what caused your kidney stones (and how to prevent new stones). Your provider may give you a urine strainer. It looks like a funnel with mesh at the bottom. It collects stone fragments when you pee.
- You should drop off the stone sample for testing: You can store the stone fragments you collect in a specimen cup your provider gives you or a plastic bag. Follow your provider’s instructions. You may need to take it to your next follow-up visit or drop the sample off at a lab.

Complications/When to Call the Provider

Call your doctor or go to the emergency room if you have sudden, severe belly or back pain that does not go away, or persistent nausea or vomiting. These symptoms are signs that a kidney stone may be blocking urine flow. Rarely, a blockage can lead to a serious infection (that causes fevers or chills) that may pose a danger to your health.

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We hope you and all your family members may benefit from these handouts.
Call your provider anytime you have concerns, especially if you have:

- Blood clots in your urine.
- Fever of 101 degrees F or higher.
- Pain that gets worse, even after taking pain medication.
- Problems peeing (you feel the urge to pee but cannot).
- Nausea or vomiting.
- Dizziness or light-headedness.

Resources


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