**Name of Operation:** *Upper-moiety hemi-nephro-ureterectomy* (removal of top part of kidney and most of its ureter [urine-tube from that part of kidney to the bladder]).

**Main issues:**

- Wound across the upper tummy on either side:

- Dissolving stitches.

- Often a bladder drainage-tube ("catheter") is needed for several days.

- Likely post-operative schedule and recovery-time.

**Intended benefits:**

- Removal of tissue that is causing harm and doing no good.

- To reduce (but not completely get rid of) the risk of urine infections, kidney stones, and high blood-pressure.

- To stop any urinary incontinence that is due to the abnormal plumbing of this bit of ureter (but this operation will not stop any urinary incontinence that is due to a different cause).

**Common or serious risks:**

- Overall success-rate for infections of about 75% (3 out of 4), and for wetting of about 95% (19 out of 20).

- Bleeding (rarely serious, but occasionally a blood transfusion is needed).

- Infection, usually prevented by the antibiotics given in hospital, by drinking plenty for a while afterwards, and by any preventative antibiotics your child may already be on. If you are worried later at home, a urine sample should be checked for infection via your family-doctor or your local hospital. Sometimes such an infection can be quite serious.

- Damage to the good part of the same kidney or its ureter (urine-tube from kidney to bladder), or to the bladder: unlikely to be serious, but occasionally further surgery may be needed.

- Damage to the bowel, liver, or spleen: rare, but could be serious.

- Damage to the sperm-tube in a boy: rare, and should not affect his future fertility.

- Early leak of urine from good part of same kidney (usually settles with the catheter).
Common or serious risks (cont’d):

- On-going infections in the remaining bit of the abnormal ureter that cannot be removed from this wound. In about 1 in 20 children, a second operation, via a new lower wound, is needed to remove the rest of this ureter.

- On-going urine infections or high blood-pressure, often for other reasons despite a technically successful operation.

- Ongoing urinary incontinence (if a different cause).

- Poor healing of the wound: unusual, but very occasionally may need later surgery.

- Anaesthetic problems (rarely serious, but around 1 in 250,000 general anaesthetics in children can be fatal).

1. A diagram of normal waterworks
To accompany DHSSPS Consent Form 2

2. A diagram of a double kidney-system

3. A diagram of the waterworks after removal of the top part of a kidney