



A **Urethroplasty** is a surgery to repair narrowing in the urethra (the tube where urine is removed from the body). This allows for the free flow of urine. There are two common ways that your surgeon may perform this surgery:

- An **anastomotic urethroplasty** is the simpler procedure that is done by removing the damaged portion then stitching the two ends back together.
- **Urethroplasty using buccal mucosal (cheek) graft** is a more extensive repair and involves replacing a portion of the damaged area with a patch of tissue that is obtained from the inner lining of your cheek.

What should I expect before surgery?

- You may need to have lab tests, X-rays, and electrocardiograms (EKGs) completed before your surgery if ordered by your surgeon.
- You may be asked to attend a visit at the preoperative clinic before surgery.
- **You will need to stop taking blood thinners before your surgery** (the length of time depends on the type of blood thinner. Make sure you understand how many days you need to stop before surgery). You will be instructed when to resume them after your surgery.
 - People taking **Plavix, Coumadin, Eliquis, Aspirin and NSAIDS** (non-steroidal anti-inflammatory drugs) may have special instructions or may need to take a different blood thinner instead. **We will need to contact your doctor who prescribes these medications to verify that it safe for you to be off of them during the time of surgery. Do not stop taking these until we verify.**
- If you start any new medications before your surgery, please contact our office as soon as possible to discuss whether or not the medication may be taken up to and including the day of the surgery.

- **If you visit anyone other than your Michigan Medicine provider, or go to the Emergency Department because you are unable to urinate before surgery, tell them that you cannot have anything passed through your urethra. Additionally, please tell them to call us at (734) 936-7030.**

Do not allow anyone to dilate or stretch your urethra or attempt to put a scope or Foley catheter in. This can interfere with the surgery. You will need to have a suprapubic catheter inserted to collect urine before your surgery. A **suprapubic catheter** enters your bladder through your abdomen (belly) and allows urine to drain into a collection bag. It will be removed at the time of your urethroplasty.

What can I expect during the procedure?

- After you are asleep, the surgical team places you very carefully on your back with legs elevated.
- Your surgeon will make an incision underneath your scrotum to access the urethra. You may have an incision inside your mouth if you will need a buccal (cheek) graft.
- The duration of the surgery depends on the complexity of the repair, but typically takes 2-4 hours.

What can I expect after surgery?

- Generally, this is an outpatient procedure, meaning you do not stay the night. You may stay overnight in the hospital if there are any concerns after the surgery. You will have a Foley catheter (urinary catheter through the penis) in place. Your catheter will be removed in the clinic 2-3 weeks after surgery.
- You may receive antibiotics after surgery. Please take the antibiotics as instructed. **Please note:** You will also receive instructions for taking antibiotics before your catheter is removed in clinic.

- Once you are home, you may shower and resume self-care. You may wash your incision gently with soap and water and pat dry. A small amount of ointment may be placed at the end of your penis where the catheter is inserted for comfort.
- If a buccal (cheek) graft was taken, you may have pain in your mouth. It is normal for this area to develop a white or yellow film over it, do not pick at it. You can soak a small gauze pad with magic mouthwash and place it in your cheek several times daily. This will help with the discomfort.
- If you wear any dentures, partials, or mouth appliance, it is important that you wear them during the healing period so that scar formation does not prevent proper fitting later. However, adjustments may still be necessary after the mouth heals.
- Do not drive any motor vehicle or operated motorized equipment for at least 24 hours after your procedure or while taking narcotic (opioid) pain medications.
- Do not make any complex decisions, sign legal documents, or participate in activities potentially harmful to others, e.g., cooking, nursing infants, without supervision for at least 24 hours after your procedure.
- Do not drink alcohol for at least 24 hours after the procedure.
- Begin eating food slowly. Start with sips of liquids, followed by the addition of solid food as tolerated. If you do not feel like eating solids, take liquids. Nausea or vomiting commonly occur during this period and is not considered harmful unless severe or persistent beyond the first day.
- You can resume normal physical activity (walking, flights of stairs, driving, etc.) after surgery.
 - Avoid aerobic and strenuous activity for 6 weeks.
 - Do not engage in any activities in the straddle position (bicycle, motorcycle, snow mobile, etc.) until cleared by your urologist to do so.
- You may resume sexual activity 6 weeks after surgery. It is **ok** to have an erection, but not to act on it.

When should I call for help?

Call the clinic if you notice any of the following symptoms:

- Fever of more than 101.5 Fahrenheit along with sweats and shivering
- Bright red blood in urine and large clots that make it difficult to urinate.
- Severe pain that persists and is not relieved with pain medications
- Leg pain

What is the contact information for the clinic?

- During business hours between 8 a.m.-5p.m. Monday through Friday:
 - Call (734) 936-7030
- After 5 p.m. or on weekends
 - Contact the On Call Urologist at (734) 936-6267

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