

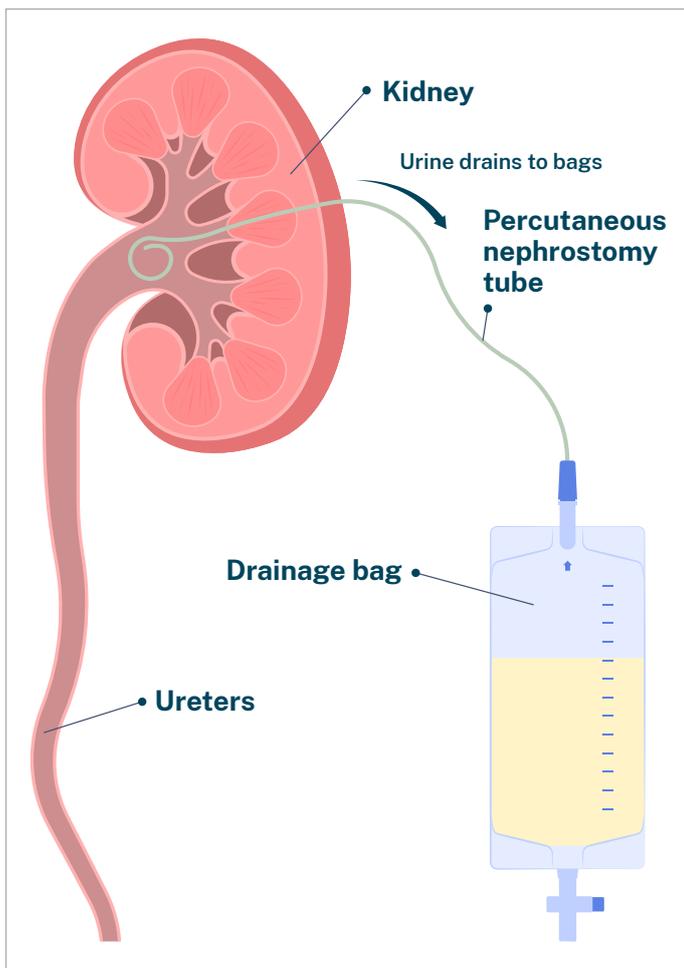
# What to expect when you are getting a nephrostomy tube

## Patient fact sheet

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A nephrostomy is an artificial opening created between the kidney and the skin. This allows urine to drain from the upper part of the urinary system.

Figure 1: Nephrostomy tube



### Why do I need a nephrostomy tube?

- You may have a blockage of the ureter (the structure that normally carries urine from the kidney to the bladder). Your doctor might insert a stent (thin, plastic tube) or a nephrostomy tube if the stent cannot be placed.<sup>1</sup>
- There may be a hole in the ureter or bladder causing urine to leak.
- To prepare for surgery or other procedures on the kidney and ureter, such as removal of a large kidney stone.
- Cancer in the pelvis or its treatment, causing blockage of the ureter.<sup>2</sup>

### Before the procedure or operation

- You will receive information to prepare you before the procedure or operation.
- Tell your doctor if you are taking any medications, especially blood thinning medication (such as warfarin, aspirin or clopidogrel). These are usually stopped 7 to 10 days before surgery as they can increase the risk of bleeding. The doctor will inform you when to stop and restart the medications.
- You will give a blood and urine sample for testing.

## After the procedure or operation

- A dressing will cover the site of the tube.
- There may be blood draining from the tube, which is normal and will decrease in a few days.
- You should drink 1,500-2,000mL (6 to 8 glasses of 250mL) fluid to flush the blood from the kidneys unless you are fit to leave hospital.
- Your stay in hospital may be two to three days, or until you are fit to leave the hospital.
- The tube is usually removed before you leave the hospital, but in some instances you may still have the tube attached to a drainage bag.

## Questions to ask your doctor or nurse specialist before you leave hospital

- What is the minimum amount of urine you should expect to pass each day?
- How and where do you get more drainage bags if needed?
- When is your next appointment to change or remove the nephrostomy tube?
- When are you booked in to see the community nurse?

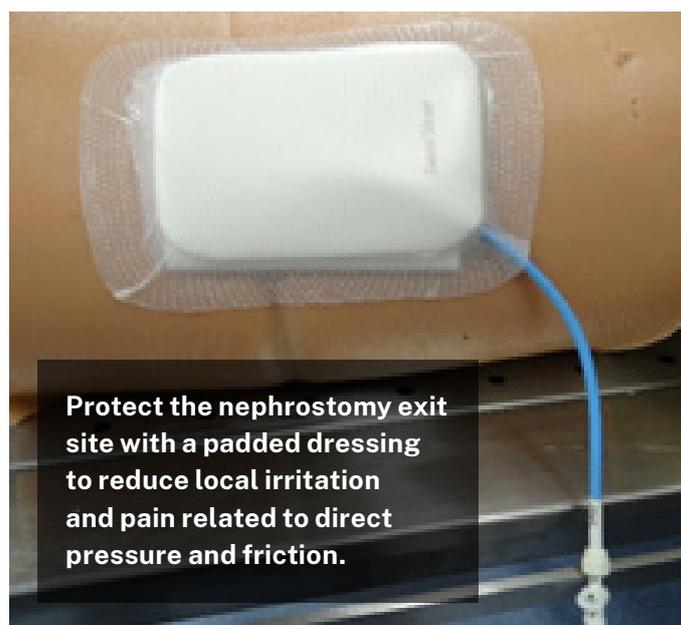
## How to care for your nephrostomy tube

You and your family or carer will receive information about how to care for your nephrostomy tube before leaving the hospital. This will include the following:

- How to empty the drainage bag, as required.
- How to ensure there are no bends in the tube to allow proper flow of urine.
- How to keep the tube well secured.
- How to tape the tube in a way that protects the skin.
- How to dress around the tube and the dressing options available, for example:– a specialised catheter anchor called a drain fixation device, e.g. Drain-Fix. This stays in place for approximately two weeks– a skin-friendly protective dressing to prevent moisture related skin problems, e.g. Comfeel wafer, placed around the exit site– a transparent waterproof dressing, e.g. Opsite waterproof dressing– dry dressing.

- How to waterproof the dressing by covering it with a large piece of cling wrap before showering.
- If the nephrostomy tube falls out, it is essential that it be replaced quickly as the insertion site may begin to close. Go to the hospital emergency department immediately for the tube to be replaced.

**Figure 2: Nephrostomy tube exit site**



## Changing the bag

- Change the urine drainage bag every seven days, or as recommended.
- Always wash your hands before and after changing the bag
- If another person is assisting, they must wear disposable gloves and protective eyewear.
- Clean the tubing connection with an antiseptic swab. Disconnect the existing bag and empty the contents into the toilet.
- Gently pinch with your fingers on the soft nephrostomy tubing to prevent any leakage and gently disconnect the bag.
- Connect the new bag and release the tube to allow for urine to drain.
- Make sure the bag is below the level of your kidneys to prevent urine going back into the kidney.
- Place the old, empty urine drainage bag in a disposal bag before placing it in the household rubbish bin.

## When to call your nurse or doctor

- If the daily urine amount draining is less than what you were told to expect by your doctor.
- If you are experiencing:
  - excessive pain (not relieved by medication)
  - a temperature
  - chills
  - nausea and vomiting
  - back pain.
- If you have:
  - cloudy and smelly urine
  - blood in your urine
  - blood around the tube
  - leaking of urine from insertion site.

## Follow up appointment

Date: \_\_\_\_\_

Who with: \_\_\_\_\_

## Emergency contacts

### Family doctor

Phone: \_\_\_\_\_

### Primary health nurse

Phone: \_\_\_\_\_

### Local hospital

Phone: \_\_\_\_\_

## References

1. Nakada S, Patel S. Placement and management of indwelling ureteral stents. UpToDate [cited 26 May 2022; updated 3 August 2020]. Available from: <https://www.uptodate.com/contents/placement-and-management-of-indwelling-ureteral-stents>
2. Nephrostomy. MacMillan Cancer Support [cited 26 May 2022; updated 1 February 2020]. Available from: <https://www.macmillan.org.uk/cancer-information-and-support/%20treatments-and-drugs/%20nephrostomy>