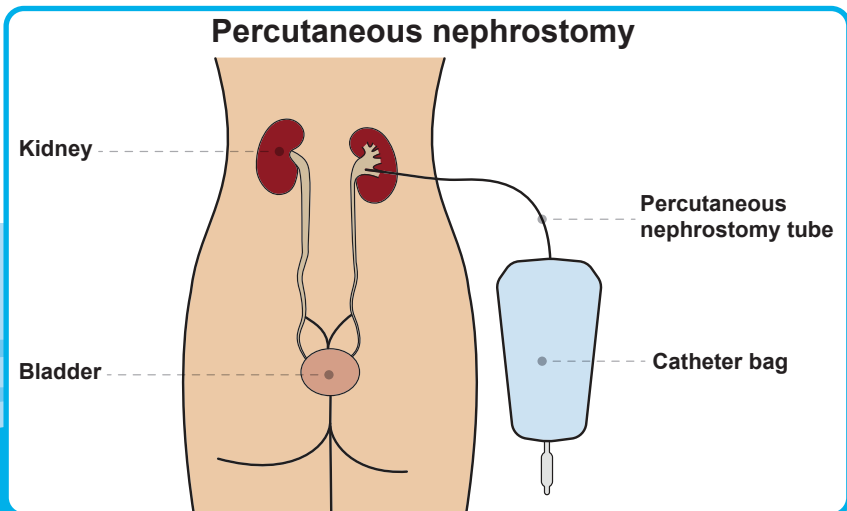


# Guidelines for Caring for a Nephrostomy at Home



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## Information about your Nephrostomy

You have a narrow plastic tube which drains urine from your kidney (or kidneys) to the outside of your body. It is called a nephrostomy tube or catheter.

**Your nephrostomy was inserted on:** \_\_\_\_\_

If your nephrostomy tube is to remain in place long term, it must be changed every 3–4 months. We call this a nephrostomy exchange.

This leaflet explains how to look after your nephrostomy at home and when to get help. Please read this carefully.

## Nephrostomy Exchange

If you cannot for any reason keep the appointment to change your tube, please telephone ☎ **0141 211 0057** to book another appointment. Letting us know as soon as possible helps us to avoid delays and keep our waiting list as short as possible.

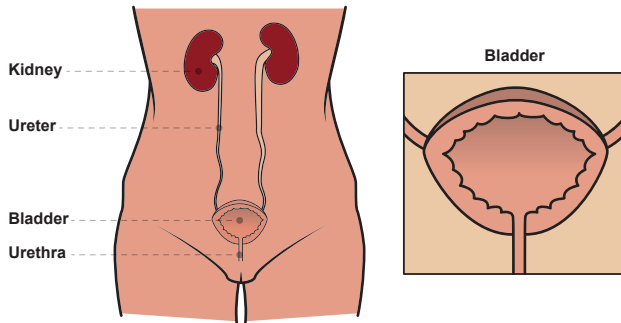
If you not been given an appointment for a Nephrostomy exchange, please telephone the Interventional Radiology department on ☎ **0141 211 0057**.

## Understanding The Urinary System

Your urinary system is made up of several difficult parts including the kidneys, ureters, bladder and the urethra.

The kidneys sit at the back of the body, one on each side, just underneath the ribcage.

They filter your blood to remove waste products which they change into urine. Urine is carried from each kidney through a fine tube called a ureter to the bladder where it is stored. When you are ready to pass urine, it leaves the bladder through a tube called the urethra.



## What is a Nephrostomy?

A nephrostomy is a thin plastic tube (catheter) that is inserted through the skin on your back and into your kidney.

- It helps to relieve a build-up of urine in the kidney, caused by a blockage and prevents the kidney from being damaged.
- It drains urine directly from one or both kidneys into a collecting bag outside your body.

The bag has a tap so you can empty it. You may still pass urine in the normal way even if you have a nephrostomy tube in one or both kidneys.

## Why do I need a Nephrostomy tube?

You may need a nephrostomy tube if your ureter (the tube that connects the kidney to the bladder) becomes blocked and urine cannot flow through from the kidney to the bladder. This blockage can be caused by a kidney stone, a growth such as cancer, a narrowing of the ureter (stricture) or pressure from something pressing on the ureter.

## **How long can the Nephrostomy stay in for?**

Your doctor will explain how long the nephrostomy tube is likely to remain in place. It will depend on your individual situation.

If treatment can relieve the blockage (for example with a stent), then we will remove the tube... A stent is a specially designed hollow tube made of a flexible plastic material that is placed in the ureter (the tube that connects the kidney to the bladder). However, some patients are not suitable to have treatment or a stent. In these cases, the nephrostomy will be permanent but will still need to be changed regularly.

## **Looking after a Nephrostomy**

The nephrostomy is held in position as the end of the tube forms a curly line like a pigtail within the urine collecting system in your kidney.

The tube drains into a bag which is not attached to the tube itself but sticks to the skin around it. This can be connected to a leg bag if you prefer.

Usually you wear the drainage bag(s) under your clothes.

## **How do I empty the nephrostomy bag?**

The nursing staff will teach you how to empty the drainage bag before you leave the hospital.

- You should empty the bag when it is half to two-thirds full.
- Do not allow the bag to become full as it may leak or burst.
- Empty it into the toilet using the tap at the bottom of the bag.

## **How do I change my nephrostomy bag?**

Sometimes patients can change the nephrostomy bag and leg bag on their own or they may need to get help from someone to do it for them. If there is nobody that can help you with this at home, we can refer you to the district nurse team.

As you become more confident with the nephrostomy tube, you may be able to care for it yourself with guidance from the District Nurses.

The nephrostomy bag should be changed at least once a week. (You can change it more often if you wish, but this is the minimum required to keep it clean and prevent infection).

### **To change the bag yourself:**

- Before changing the drainage bag, you should empty it into the toilet to avoid spillage.
- Wash your hands before and after changing the drainage bag. You do not need wear gloves.
- The drainage bag is held in place with an adhesive glue. You can gently soak off the glue using warm water (boil tap water and allow it to partially cool). Some patients prefer to use commercially bought adhesiolysis sprays (to break down the glue) or soak the bag off in the shower. You should roll the soiled drainage bag away from the skin starting at the top and placed in a plastic bag for disposal.
- Gently clean the skin around the nephrostomy with warm water and the swabs provided. If you wish to also use soap, this should be mild and non-perfumed. It's important that you clean the skin thoroughly and remove any residual soap.
- Pat the skin dry with swabs or kitchen roll. Please check that the skin is completely dry with your hand before reapplying a new bag.
- Carefully insert the new bag over the nephrostomy and remove the backing paper the adhesive plate. Using your fingertips seal the adhesive plate onto the skin.
- Place the remaining swabs in the plastic bag and place them in your household waste.

### **How do I use the night drainage system?**

At night you can connect the drainage bag to a night bag, this empties the drainage bag on your back making it less likely to burst when you lie on it.

It is up to you whether you use the night drainage system. If you do, there are some points you should remember:

- Always make sure that the bag is lower than the level of the bed.
- When connecting at night, do not empty the bag first – run some urine into the system to remove air pockets and help drainage.
- Change the night drainage bag and adaptor every week.

### **Showering, Bathing and Swimming**

You may shower and bathe after the tube has been inserted. It is better to have a shower than a bath because this reduces the risk of infection. Please remember to make the bag is secure at all times.

Please do not go swimming with a nephrostomy as it could dislodge and damage your kidney.

You should keep the skin around the nephrostomy tube insertion site clean to prevent infection.

### **Preventing Infection**

- Always wash your hands with soap and water before and after changing the bag, dressing, and after draining
- Keep the skin around the tube clean and dry
- Empty the nephrostomy bag when half or two thirds full
- Drink plenty of fluids (unless your doctor has advised restricting your fluid).

### **How do I get my appliances and equipment?**

Nephrostomy products are all available on prescription. The hospital team will write to your GP detailing the products you require. The Nursing staff will set up your first order and explain to you how to re-order using the Dispensing Appliance Contractor (DAC) service. (Fittleworth)

## Flushing the Tube (For District Nurses)

If no urine is draining from the tube, and you're not passing any extra urine in the normal way, the tube may be blocked and need flushed.

A District Nurse should do this for you, although not all nurses are trained to carry it out.

Equipment – Sterile Dressing pack

Sterile gloves

10ml luer lock syringe

10mls sterile normal saline

Alcohol wipe

Clean nephrostomy bag

- Check the tube and bag to make sure there are no twists or kinks stopping the urine from draining.
- Wash your hands
  - » Open the dressing pack and get everything ready. Draw the saline into the syringe
  - » Remove the nephrostomy bag so you can access the end of the tube
- Put on sterile gloves
- Clean the connection point (port) with an alcohol wipe
- Attach the syringe and gently inject 5-10ml saline
  - » Gently pull back on the syringe (aspirate) if needed to help clear the blockage — do not use too much force, as this can cause bleeding.
- Allow the saline and urine to flow back out of the tube
- Apply a clean nephrostomy bag

If the tube does not flush easily or still does not drain, the tube may have moved. The District Nurse should contact the **urology on call doctor**.

You may need to attend hospital for review or admission.

## Troubleshooting

If your nephrostomy tube blocks often, it may help to flush it twice a week to stop this from happening.

### Please contact your GP:

- If there is persistently blood in your urine.
- If you have a fever or feel unwell, have pain in your flank (the side of the body between your ribs and hip) or it hurts when you pass urine the normal way, this may be a sign of an infection, and you might need antibiotics.
- If the area around the tube becomes red, warm, swollen or sore. These may be signs of infection.

### Please contact your district nurse:

- If you think the tube is blocked or there is no drainage from the nephrostomy tube in the time period, you expect to see drainage.

If the tube comes out or can't be unblocked, (this is unusual). This may require discussion with the on-call urology doctor and attendance at the hospital to resolve the issue.

If you feel very unwell, contact **NHS 24** on 📞 **111**.

## What is a nephrostomy exchange?

A nephrostomy exchange is when we remove your tube and insert a new one.

## Why do I need a nephrostomy exchange?

Urine often contains gritty sediment (dregs) which can block the tube. This can lead to infection or to you becoming very unwell. If your nephrostomy is to remain in place long term, we will need to change it every 3–4 months. The radiology department will advise you at each exchange how often your nephrostomy needs changed. If you have any queries regarding your nephrostomy exchange appointment, please call 📞 **0141 211 0057**.

## What happens during a nephrostomy exchange?

Exchanging your nephrostomy is much simpler and quicker than having it inserted the first time.

- You will usually lie on your front on a special X-ray table
- The staff will insert contrast (X-ray dye) to make sure the tube is still in the right location. They will then pass a wire through the existing tube, remove the old tube and insert a new tube.

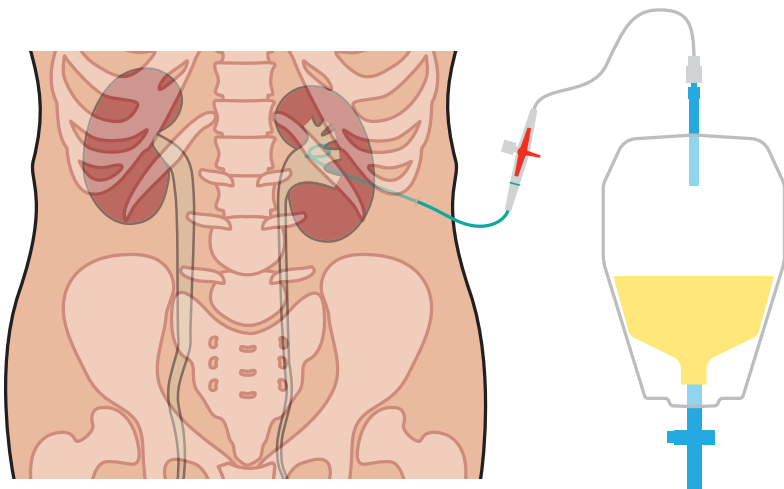
## Will it hurt?

The procedure is not normally painful, but you might feel some pulling and pushing as we change the catheter.

## What are the risks of nephrostomy exchange?

Changing of a nephrostomy is a very safe procedure. However, like all medical procedures, there is a degree of risk.

- Infection
- Blood in urine. This usually settles in the first 24-48 hours after the exchange.
- Loss of access into the kidney if the tube and wire is removed completely. This may require reinsertion at this time or at a later time.



## Are there any side effects?

Most procedures can have some side effects, but these are well known. Please be reassured that most people do not experience any problems after a urological procedure.

## Contact Numbers

District Nurses Single point of contact	☎ 0141 355 2180
Interventional Radiology	☎ 0141 211 0057
Fittleworth (Nephrostomy bags)	☎ 0800 783 7148
NHS 24 on	☎ 111
Your own GP	

## Discharge Checklist for Nursing staff (for staff only)

- Explain nephrostomy bag and connecting drainage tubes
- Give short supply of nephrostomy and drainage bags
- Refer to district nurses for bag changes
- Make referral to Fittleworth for further bags
- Ensure medical staff have organised nephrostomy tube exchange or follow-up management as appropriate.

