

Nephrostomy care

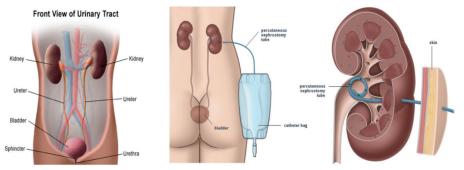
Urology Department

Who is this information for?

You have recently had a nephrostomy tube inserted. This leaflet has been written to help you to look after your nephrostomy tube and manage any problems that may occur. It should be used together with verbal information given to you by your nurse or doctor and support from your practice nurse or district nurse.

What is a nephrostomy tube and how is it inserted?

A nephrostomy tube is a soft thin hollow plastic tube that is inserted through the skin of your back and into your kidney. It drains urine directly from the kidney. It is inserted by a trained Radiologist in the Intervention Radiology department under X-ray guidance. It is usually inserted while you are awake using a local anaesthetic to numb the area. A small incision is made to the skin in your back. A guide wire is inserted into the renal pelvis (kidney region) and then the nephrostomy tube is placed over the guide wire into your kidney. The guide wire is removed and the nephrostomy tube is secured in place with a dressing and sometimes a stitch. The end of the nephrostomy tube is pigtailed and coils in the kidney which also helps to secure it inside the kidney. A drainable nephrostomy bag is attached to the nephrostomy tube. These bags can be worn on the hips or on the legs and are supported with straps. They are discreet enough to be worn under clothing. A larger drainage bag called a night bag can be used to provide more drainage capacity overnight if needed and this night bag should be placed on a stand.



The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.

Why are nephrostomy tubes inserted?

The kidneys filter out waste products and excess water from the blood to form urine. It is essential that urine is drained from the body to maintain a balance of fluids and important chemicals necessary for normal body functioning. Nephrostomy tubes are inserted to drain urine directly from your kidneys. This is usually because there is a blockage or damage between the kidneys, ureters and the bladder and urine cannot be drained effectively from the body in the normal way. You may need one nephrostomy tube, or two tubes one for each of your kidneys. Your Doctor will be able to tell you why you need a nephrostomy tube or tubes and the benefits of this.

How long will I need to have a nephrostomy tube?

A nephrostomy tube will need to be in for different lengths of time and this will depend on why you need a nephrostomy tube. Your doctor or nurse should be able to tell you how long you may need a nephrostomy tube.

What are the benefits of having a nephrostomy tube?

The main benefits of having a nephrostomy tube are to prevent kidney damage, to remove toxins from the body and relieve pain.

Are there any alternatives to having a nephrostomy tube and what would happen if I decided not to have a nephrostomy?

Nephrostomy tubes are usually inserted as there are no other immediate alternatives to drain the urine from the kidney. Occasionally it is possible for the Radiologist to insert a stent. A ureteric stent is a thin tube which is inserted into the ureter to prevent or treat the blockage. The purpose of the stent is to hold the ureter open and allow urine to drain from the kidney through the ureter and stent and into the bladder. Stents can sometimes be difficult to insert and therefore you would need to ask your doctor if stent insertion is a possible alternative.

What happens if I go home with a nephrostomy tube?

Before you are discharged from hospital you will be advised on how to empty your nephrostomy bag and how to attach a night bag. Your ward nurse will arrange for supplies of nephrostomy bags and night bags to be delivered to your home. The type of nephrostomy bags used once you go home are called NephSys bags. NephSys bags and belts are available on FP10 (community prescription). You should receive a delivery of bags and a night bag stand from Bullen delivery service approximately two days after you have been discharged home. When you need more bags you will need to contact the Bullen delivery service in advance to arrange further supplies so you do not run out. Bullen delivery service's number will be provided to you within the delivery and at the end of this leaflet. Bullen delivery service will obtain the prescription for your nephrostomy supplies on your behalf from your GP.

How often does my nephrostomy bag need changing?

Before you are discharged from the hospital your ward nurse will refer you to a Practice Nurse or District Nurse. Once at home the nurse will arrange to see you once a week to change your nephrostomy bags and also change the dressings to your back around the nephrostomy tube. You will be given contact numbers for you to call them with any problems you may have with your nephrostomy tube. Sometimes it is possible for a member of your family or carer to be taught how to change your nephrostomy bag and dressings. This is usually arranged if the nephrostomy tube is required on a long-term basis.



Will I urinate even though I have a nephrostomy tube?

If your other kidney works normally, you may still need to urinate because urine from this kidney will fill your bladder. If you have nephrostomy tubes in both kidneys small amounts of urine may drain into your bladder as well as your nephrostomy bags and therefore you still may need to urinate small amounts. If you have had your bladder removed then you may still produce urine through your urostomy.

Your doctor will explain how your bladder or urostomy will function when the nephrostomy tubes are in place.

What if I have problems?

Blood in urine: When the nephrostomy tube is first inserted or changed it is normal for your urine to be blood stained. If you notice blood in your nephrostomy bag a few weeks after it has been inserted and this continues after drinking extra fluids then you should contact your district nurse or practice nurse for advice.

Hygiene: Good personal hygiene is very important when you have a nephrostomy tube in place to prevent a urine infection. It is important you wash your hands with soap and water before and after handling and emptying the nephrostomy bag or attaching a night bag. Your nurse will apply a waterproof dressing over the insertion site of the nephrostomy tube and this will allow you to have a shower. Bathing with a nephrostomy tube in place is not recommended. Do not disconnect the nephrostomy bag before showering as this could lead to introduce an infection.

Fluid intake: Unless you are on restricted fluids or you have been advised otherwise by your doctor or nurse it is recommended that you drink plenty of water. Try to drink 2 litres of fluid a day, this will dilute your urine and possibly reduce the risk of infection and may also prevent a blockage of your nephrostomy tube.

Activity and exercise: Having a nephrostomy tube should not restrict your daily activities. However you should avoid swimming and contact sports. Any activity that may cause pulling of the nephrostomy tube should be avoided. You can go on holiday and travel abroad with a nephrostomy but it is important that you ask a nurse or doctor to ensure you are fit to travel.

Pain: The nephrostomy tube may feel uncomfortable at first. You may need to take pain relief to ease the discomfort in your kidney region. You could also try repositioning the nephrostomy bag to prevent the tube from pulling around the kidney site. Avoid wearing tight clothing over the tube. Be sure there is no tension (pulling) on the nephrostomy tube when you move around.

Cloudy, smelly, thick urine: Your urine should be light yellow in colour (although some medicines may discolour urine) and should flow freely. If your urine becomes cloudy, smelly or thick, check that you are drinking enough water. If you develop a high temperature with these symptoms, please contact your practice nurse or district nurse, as this could indicate that you have a urine infection.

Leaking nephrostomy site: Sometimes the nephrostomy tube can leak around the entry site where it is inserted into the back. If this happens, make sure the tubing is not blocked or kinked. If leaking continues around the insertion site you may need to contact your district nurse or practice to flush the nephrostomy tube as there may be a small blockage inside the tube.

Driving: Depending on your medical circumstances it may be advisable not to drive or you may need to inform the DVLA and your insurance company of changes in your health. If you need any further guidance with this speak to your doctor or nurse.

No urine draining into the nephrostomy bag: Before you contact your practice nurse or district nurses you should increase your fluid intake as you may be dehydrated. Drinking plenty will encourage urine production and may flush out a blockage that may be present. You should also check to see if the nephrostomy tube is kinked, twisted or bent. Be sure that you are not sitting or lying on the tube. If still no urine has drained after 2 hours with increasing fluids and checking for kinks then you must contact either your practice nurse or district nurse for advice. If you are unable to speak to your community nurse then call the urology Clinical Nurse Specialists (CNS) or Surgical Emergency Unit (SEU) you will find contact details for the Urology CNS' and SEU at the end of this leaflet.

The nephrostomy tube has come out: If your nephrostomy tube has fallen out or been pulled out you must inform the urology CNS' or SEU as soon as possible. It will be discussed with the doctors to find out if your nephrostomy tube needs replacing urgently. If necessary they will make the arrangements with radiology for you to come into hospital for the nephrostomy tube re-insertion.

How often does the nephrostomy bag and night bag need to be changed?

It is recommended your nephrostomy bag which is attached to your nephrostomy tube is changed every 5-7 days. The nephrostomy bag should be changed under sterile conditions by a trained nurse or carer. If you wish to wear a night bag overnight then a single use night bag should be used. This is attached to the bottom of the nephrostomy bag and provides more drainage capacity. Single use night bags should be disconnected from the nephrostomy bag each morning and emptied prior to disposal. All drainage bags should be disposed of into a plastic bag then into a dustbin.

How often should the nephrostomy tube need changing?

It is recommended that nephrostomy tubes should be changed approximately every 3 months, however this may vary depending on your individual circumstances.

You doctor will be able to tell you when you should have this done and will make arrangements for you to attend the X-ray department for this procedure.

When should I contact my practice nurse or district nurse?

It is important you contact a practice nurse or district nurse for advice if:

- No urine or very little urine is flowing into your nephrostomy bag
- Your urine has changed colour, it is very cloudy, it is bloody or has large blood clots in it and you have not been told to expect this
- Your urine smells of foul odour
- You feel feverish
- You have noticed redness, swelling and irritation around where the nephrostomy tube enters the body
- Urine continuously leaks from around the nephrostomy tube at the insertion site
- If your nephrostomy tube has fallen out or been pulled out you must inform the Urology CNS' or SEU as soon as possible.

A sample of urine from your nephrostomy bag should only be sent for testing if you are experiencing any symptoms of infection. Symptoms of infection include cloudy urine, urine smelling of foul odour and feeling feverish.

Further Information & Support

If you have any questions or concerns about your nephrostomy tube, please speak to your practice nurse or the district nurses.

Urgent nephrostomy advice:

Urology CNS': 01902 694048 or 01902 694467 (office hours 08.00hrs – 16.00hrs Monday to Friday)

SEU (outside office hours): 01902 694004

Other useful contacts:

Advice regarding nephrostomy insertion procedure: Interventional Radiology: 01902 307999 ext.86344

Advice regarding nephrostomy supplies and delivery: Bullen delivery service: 0800 888 501 https://www.bullens.com > home-delivery

Advice regarding NephSys products:

Manfred Sauer: 01604 595696 helpline@manfred-sauer.co.uk https://manfred-sauer.co.uk

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息,如易读或其他语种,请告诉我们。 如果您需要口译人员或帮助,请告诉我们。

> Designed & Produced by the Department of Clinical Illustration, New Cross Hospital, Wolverhampton, WV10 0QP Tel: 01902 695377.