Your Nephrostomy Tube: A Patient's Guide

NHS Lothian

Nephrostomy Tube

- A nephrostomy tube is a drainage tube placed directly into your kidney through the skin surface on your back. It is usually put in because you have a blockage in your urinary system which prevents that kidney from draining properly into your bladder.
- As the tube is placed directly into your kidney, it is important that it be kept clean and that you drink extra fluids to flush out any infection or debris.
- Your other kidney will continue to function as before therefore you will continue to pass urine in the normal way. If you have a tube in both sides, then you are not likely to pass urine in the normal way.
- If you have any problems with your nephrostomy tube, contact your District Nurse or your hospital ward/department. Should your tube become displaced (not draining any urine into the bag) or accidentally pulled out, contact your GP immediately. They will arrange for you to be seen urgently by a urologist and a radiologist will have it replaced.

Care

- Hygiene – thoroughly soap and water hand wash before emptying the bag via the valve. Note the colour and amount of urine drained. Report to your GP if your urine is smelly, bloody, or stained.
- Ensure that the tube is securely fixed by a dressing over it, taping the tube to your side and using a safety pin to fix the bag to your clothing. The tubing and drainage bag should be supported and not 'kinked' and kept below the level of the kidney (hip–joint). Do not allow the bag's weight to drag on the tube.
- Check the dressing daily and change it as required, more frequently if necessary due to discharge or dampness. If 'Niko-fix' dressings are used, once a week is sufficient, Your District Nurse will advise regarding times.
- A bath or shower may be taken with care.
- Change the drainage bag every 7 days.
- Your District Nurse will be contacted by the hospital on your discharge and will help with dressings and bags.
- Further supplies of bags may be obtained by phoning your ward. Please phone before you use your last one to allow time to get them in the post.
- If your tube is necessary as a long or short term measure, it needs to be changed in approximately 3 months. Before you leave the ward, ensure that you have your next hospital appointment or review date.

Removal

- When your tube is no longer needed, it must be removed in hospital (possibly as a day case).
- The tube must be clamped for several hours before removal. You are advised to report any new pain or leakage which may indicate that you still need the tube.
- The tube is released by cutting the retaining stitch, and gently removing the tube. A dressing is applied to the area and checked for leakage.
When should I call my GP?

If you experience any of the following, you should call your doctor.

1. You feel unwell with a fever.
2. You experience severe pain that is not controlled by painkillers.
3. The tube becomes blocked.
4. The tube falls out.
5. If you are unable to contact the hospital ward or department.