

Nephrostomy Home Care

A nephrostomy tube is a catheter (a thin, flexible, plastic tube) that is placed through your skin and into your kidney to allow urine to drain from your kidney into a collection bag outside of your body. The tube comes out through a small hole in your back and is held in place by sutures/stat lock. You will need to be careful not to tug or pull on the tube or the drainage bag.

Because of where the tube comes out of your body (side/back), you will need help from others to care for your nephrostomy tube. You and at least two other people should learn how to clean the area around the tube, change your bandages, and care for the drainage bag.



Cleaning and Changing the Dressing

The skin around the tube must be kept clean to prevent infection.

Gather Your Supplies

- Disposable waterproof pad
- Two (2) pairs of clean gloves
- Sterile gauze or swabs for cleansing
- Soap and water
- Sterile gauze pads (new) 4" x 4" and paper tape or hypoallergenic adhesive tape OR a transparent dressing barrier
- Small plastic trash bag

Optional supplies (if ordered by your doctor or nurse)

- Protective skin prep/film
- Saline solution and/or hydrogen peroxide
- Tube attachment device (to prevent pulling on the tube)

Change the Dressing

- 1. Place a disposable pad underneath you to catch any drainage as you are working. (You will need to lie on your side, with the nephrostomy site facing up.)**
- 2. Wash your hands thoroughly with soap and water.**
- 3. Put on clean gloves**
- 4. Remove the old dressing**
 - a. Use one hand to apply pressure to the skin beside the tube and, with the other hand, slowly and gently loosen the tape and/or skin barrier. Try not to pull in the same direction in which the hair is growing.
 - b. Remove tape as you are holding down the tube to avoid pulling on the tube.
 - c. Remove the old dressing, and then your gloves, and throw them away in the trash bag.
 - d. Wash your hands with soap and water.
 - e. **Check the skin around the tube for signs of infection.** Call your doctor if you have a **fever of 100.4°F (38°C)** or if you have:
 - f. redness, warmth, or swelling around the tube insertion site
 - g. white, yellow, or green drainage
 - h. skin separation around the tube insertion site
 - i. tube gets dislodged (drainage will smell like urine)
- 5. Clean the area**
 - a. Put on a pair of clean gloves.
 - b. Wet a gauze or swab with soap and water (or, if your doctor orders, normal saline or hydrogen peroxide)
 - c. Begin cleaning the skin immediately around the tube. Start at the insertion site and clean in a circular direction. Make the circles larger as you move away from the insertion site.
 - d. Do not go over the same area a second time with the same gauze or swab. Clean away any blood or other debris.
 - e. Repeat the procedure until the area is clean, using a fresh gauze or swab each time. Discard all the used gauze and swabs.
 - f. Use dry gauze or swab to gently pat the area dry.
 - g. If ordered by your doctor, apply the skin prep/film, and let dry.
- 6. Apply a new dressing**
 - a. Place sterile gauze around the site and tape the gauze in place. (An attachment device may be placed over the bandages to help keep the nephrostomy tube in place.)
 - b. To help prevent infection, do not touch the side of the dressing that is over or around your tube.
 - c. If using a transparent dressing, apply it around the tubing instead of the gauze. (The transparent dressing has its own adhesive.)
 - d. Bring the tubing around to the front and tape it about 2 ½ inches below the exit site, to prevent the tube from moving or being pulled out.

- e. Keep the tube facing down to use gravity to drain
- f. Do not stretch the tube tight and do not kink the tube!

7. Clean up

- a. Secure the drainage bag to your leg.
- b. Remove your gloves.
- c. Discard the trash.
- d. Wash your hands thoroughly with soap and water.
- e. **For the first two weeks**, your dressing should be changed every day and anytime it gets wet or soiled.
- f. **After the first two weeks**, change your dressing at least twice a week, and any time it gets wet or soiled.

Drain and Clean Your Collection Bag

1. Drain your bag.

- a. Drain the bag when it is about 2/3 full – do not wait until it is full.
- b. Open the spout at the bottom of the bag and drain the urine into the toilet.
- c. If you need to measure your urine, don't empty the urine directly into the toilet, your caregivers will provide you with the equipment you need.

2. Clean your reusable drainage bag.

- a. Put on clean gloves.
- b. Swab the end of the drainage tubing with an alcohol pad and disconnect it from the bag. Put the used bag aside.
- c. Swab the end of the tube with a clean alcohol pad and connect a new bag. Secure to your calf or thigh with tape or straps.
- d. Wash your drainage bag daily with a solution made of 1 part vinegar to 3 parts water. Swish it around inside the bag before you drain it out.
- e. Clean the spout with an alcohol pad.
- f. Hang up the rinsed, empty bag and allow it to dry before using it again.
- g. Reusable bags should not be used for more than one week.
- h. Remove your gloves and put them in the trash. Wash your hands with soap and water.
- i. To help prevent infection, always wipe the connecting ends of the drainage bag with an alcohol pad before reconnecting it to the tube. Don't touch the side of the dressing that is over or around your tube.

Common Sense Tips

- Always keep the drainage bag below kidney level.
- You can wear a small drainage bag strapped to your leg when you are active but it is recommended you use the larger one when you will be sleeping.
- Don't wear tight or restrictive clothes over the tube.

- Always check that the catheter is in place after changing your clothes or participating in activities.
- Put the tube over, not under, your thigh when you are sitting down.
- Do not kink the nephrostomy tube.
- Avoid putting any tension on the tube.
- If you do not see any urine in your drainage bag, try changing your position.
- Do not use pins near the tube or attach pins to clothing covering the tube.
- As long as your doctor has not told you to restrict your fluids, drink lots of liquids – 2-3 liters every day. This will help to prevent sludge and stones from forming. Drink three 8-ounce glasses of cranberry juice per day.
- You can shower 48 hours after the tube has been inserted, but the tube site must stay dry. Protect the dressing with plastic wrap taped to your skin so the dressing is completely covered. After 14 days, you may shower without the dressing and plastic wrap. Clean the tube site with mild liquid soap and water and rinse it well. Avoid taking tub baths and swimming as long as the tube is in place.

Replacing Your Nephrostomy Tube

- Because there is mucus and other materials in urine, all nephrostomy tubes will eventually clog and need to be changed, approximately every 2 – 3 months.
- The procedure for changing a nephrostomy tube is usually shorter than the first time they put in the tube. Many tube changes are done on an outpatient basis and you can go home the same day.

When to Call Your Doctor

It is important to know which signs and symptoms you should report right away. Call your doctor if you have any of the following:

- **a fever of 100.4°F or higher, chills, shaking or shivering**
- warmth, redness, blood, pus, or a bad smell at the tube insertion site
- a large amount of drainage or discharge from the skin around the tube
- persistent bloody urine (small amounts of blood are typically seen in the urine)
- decreased or no urine drainage from the tube
- pain during irrigation or if you cannot irrigate the tube
- cloudy or dark, foul-smelling urine
- discomfort or pain in your back or side (near the kidney area)

NOTE: If the tube pulls out, apply pressure to the skin around the tube and call your doctor immediately.

Questions

The **Genitourinary Center** is open 8:00 a.m. and 5:00 p.m., Monday through Friday. If you have any questions or concerns, please call the center at **716-845-3159**. Your call will be answered even if the center is closed.