



Imaging



**Brighton and Sussex
University Hospitals**
NHS Trust

Change of Nephrostomy

Information for patients

What is a change of Nephrostomy?

This is when the tube that you have in your kidney to drain urine externally into a bag needs to be changed.

Why do I need a change of Nephrostomy?

Your nephrostomy tube requires changing on a regular basis for a number of reasons:

- The urine can become gritty and block the tube
- The tube can become a source of infection if left in too long
- The tube may have become dislodged.

Who has made the decision?

The Consultant in charge of your case, and the Interventional Radiologist (the doctor who specialises in Imaging Procedures) who will be carrying out the Nephrostomy exchange will have discussed the situation, and feel that this is the best treatment option. However, you will also have the opportunity for your opinion to be taken into account and if, after discussion with your doctors, you do not want the procedure carried out, you can then decide against it.

Who will be performing the Nephrostomy change?

A specialist doctor called an Interventional Radiologist. Interventional Radiologists are experts in using X-ray equipment and in microsurgical techniques.

Where will the procedure take place?

In the Imaging Department, in a special Interventional Radiology (IR) Procedure Room which is designed for these specialised procedures. You will be checked into the department by a nurse, who will ask some medical questions and fill out some paperwork. The Interventional Radiologist will then come and talk to you about the procedure. You will have the opportunity to ask any questions or raise any concerns, and only if you are happy to continue with the procedure will you be asked to sign the consent form.

What happens during the Nephrostomy change?

It is performed in the IR procedure room.

- You will lie on a special x-ray table usually on your front or side. The area around your Nephrostomy will be cleaned and you will be covered in sterile drapes.
- The radiologist will inject local anaesthetic to numb the area. This may sting at first before numbing the area.
- The radiologist will inject x-ray dye into the tube to make sure it is still in the right place, a small wire will then be inserted down the tube.
- Your Nephrostomy will be removed and the new one placed over the wire that is in place. The wire will then be removed and then a dressing applied to hold it in place and a bag will be attached.

How do I prepare for a Nephrostomy exchange?

To prepare for the procedure you will need to make sure you do the following:

You will need to have a blood test before your procedure.

Please let us know if you are taking any **antiplatelet medicines** (for example, Aspirin, Clopidogrel) or any **medicines that thin the blood** (for example, Warfarin), as these may need to be withheld temporarily before the procedure. Call the IR department for advice as soon as you get your appointment letter on **01273 696955 Ext. 4240/4278** and ask to speak to one of the IR nursing team.

If you are taking **medicines for diabetes** (for example metformin) or using insulin, then these may need to be altered around the time of the procedure. Call the IR department on the numbers above for advice as soon as you get your appointment letter.

You will need someone to take you home after the procedure is finished.

Will it hurt?

Changing the Nephrostomy tube is not normally painful, although you may feel some pulling and pushing as the old tube is taken out and the new tube inserted. Once everything is in place, it should not hurt at all.

How long will it take?

Whilst every patient is different, we allow 30 minutes for the procedure.

What happens after the procedure?

You will be required to recover in our recovery area on a trolley and will stay in the department for around 2 hours after the procedure. The nurses will carry out routine observations, blood pressure, pulse and monitoring. Please arrange for someone to pick you up and take you home and remain with you for 24 hours following the procedure, as you **must not drive or use public transport or be at home alone.**

What are the risks of the procedure?

A change of nephrostomy tube is a very safe procedure, and much quicker and easier than when it is first inserted. But as with every medical procedure there can be some risks:

- Bleeding - it can be common for the urine to be bloody for 24-48 hours after the procedure.
- Infection - this can usually be treated with a course of antibiotics
- Sometimes the tube is blocked, which means the change can take longer than usual
- Sometimes the tube has come out of the system completely, so a new nephrostomy will need to be inserted either at that point or at a later date.

What are the benefits?

- It is a quick procedure
- It is safe with a short recovery

What are the risks?

This will be the decision of the doctors looking after you, depending on the reason why it was inserted in the first place.

What to look out for?

If you have any of the following issues then please contact the IR department Monday- Friday 9am- 5pm, your GP, or go to your nearest A&E department.

- If you have a temperature
- If you develop back or side pain
- If your urine output stops, becomes dark or foul-smelling
- If the tube falls out or becomes dislodged.

Finally

Some of your questions should have been answered by this leaflet but remember that this is only a starting point for discussion about your treatment with the team looking after you.

Make sure you are satisfied that you have received enough information about the procedure before you sign the consent form.

Interventional Radiology:

01273 696955 Ext. 4240/4278

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Disclaimer

The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

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