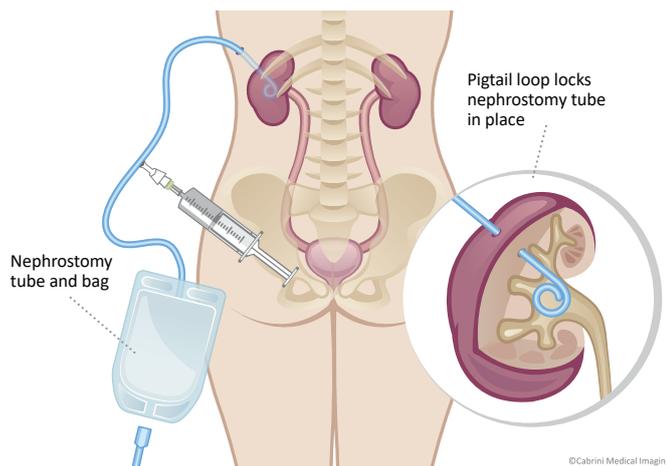


Nephrostomy tube

What is a nephrostomy tube?

A nephrostomy tube is a small drain tube inserted into the kidney, with the objective of draining urine, which the kidney is unable to get rid of through the normal anatomy. This is normally because of a blockage in the tube leading from the kidney to the bladder, called the ureter. A tube exchange would be required if your referring doctor is concerned about tube blockage or other complications.

The procedure is performed under a strict aseptic technique, with local anaesthetic and intravenous sedation. We use x-ray and ultrasound guidance, and it takes approximately 45 minutes. Most people who have a nephrostomy tube insertion are inpatients in the hospital, but occasionally this can be done on outpatients, who would require admitting for the day only.



Before you come in for the procedure

You will be contacted by the medical imaging department with a date and time for your procedure. If you are coming from home you will be asked to go to the admissions department one hour prior to your appointment time, as you will be admitted as a 'day case', this does not mean you will be in the hospital for the whole day.

You will have been given instructions by Cabrini Medical Imaging. Please take note of the following and contact the department on the number below if you have any concerns.

- If you are on any blood thinning medication, please make sure you let staff know as soon as possible, as this could affect the ability to do your procedure. Please check with your GP if unsure of your medication.

- On the day of your procedure please bring a list of your current medications (this includes over the counter medications, and herbal remedies)
- Please make sure you have someone to drive you home, you are not permitted to drive until the following day

How your nephrostomy tube insertion or exchange will proceed

From the admissions department, you will be taken to the medical imaging department, where you will be prepared for your procedure. This preparation involves observations and history being taken, and a small needle will be placed in your arm for any medication that needs to be given.

At this point you have an opportunity to ask one of the nursing staff further questions or to speak to the doctor performing the nephrostomy tube insertion or exchange. You will then be positioned on the table, usual on your stomach, where the procedure is to take place. Once you are lying on table it is very important that you remain still for the rest of your procedure. You will have blood pressure and oxygen monitoring equipment on and oxygen therapy throughout the procedure.

The nursing and medical staff will be dressed in surgical gowns and wearing masks and hats, to maintain a sterile environment. It is very important that the nephrostomy tube is inserted under the cleanest of conditions.

After washing your skin with an antiseptic, sterile drapes will be placed over the area. A small amount of local anaesthetic will usually be injected under the skin in the relevant area. This usually stings for a short time. You may also be given intravenous sedation and pain relief at this stage.

For the insertion of the tube, a needle will be passed through the skin to the affected kidney. Some iodinated contrast will then be injected to confirm the position of the needle. You may experience some discomfort at this stage. A fine wire is then passed through the needle over which the nephrostomy tube can be inserted. A dressing will be applied to secure the tube in place, and a bag attached to the tube.

For a tube exchange some iodinated contrast will be injected through the tube, a wire then passed through the existing tube, the old tube removed, and a new tube passed over the wire. A dressing will be applied to secure the tube and a bag attached.

As with all medical procedures there are associated risks and complications with having this procedure done, they can be broken down into common, rare and very rare.

Common risks and complications

- Discomfort to the area, following the injection. This may be due to the tissues being aggravated by the procedure.
- Bleeding or bruising to the localised area
- Initially there may be bloodstained urine in the bag. This should resolve without treatment.

Rare risks and complications

- Infection, which could require additional treatment, possibly antibiotics. The nephrostomy may need to be removed in some infections.
- The procedure may have to be abandoned due to technical or medical reasons
- Allergy to medications used during this procedure

Very rare risks and complications

- Damage to kidney, which the nephrostomy has been deployed in requiring medical/surgical intervention
- Extensive bleeding requiring surgical intervention

How do I get my results?

Digital images are immediately available to your doctor and your records will be kept permanently. This occurs through a system called PACS. **If a priority report is requested it will be issued within two hours and faxed or emailed to your doctor, however this can sometimes take up to 24 hours.**

If your referring doctor wants to see you on the day of your examination, please advise the reception staff when you arrive for your appointment, so the appropriate information can be made available for you to take to your doctor.

Important

It is important to let us know when you make your booking if you are or think you may be pregnant or are breastfeeding.

It is important to bring with you your referral, previous x-rays and any other tests (only if previous ones were **not** done at Cabrini or I-MED).

Questions

For more information or to make an appointment, please contact Cabrini Medical Imaging using the number below.