

Caring for your child's Nephrostomy Tube at home

Your child is going home with a nephrostomy tube. A nephrostomy tube is a catheter which drains urine directly from your child's kidney to the outside of his/her body. You will be shown how to care for the tube before your child leaves the hospital, and home care nursing will be arranged to support you. It is important that you demonstrate caring for the tube before you leave the hospital. These instructions will help you care for the tube at home.

Date of Insertion:

Reason for tube:

Expected duration:

Follow up:

How do I care for the tube?

- ✓ Always wash your hands well with soap and water before and after touching the tube. You may use hand sanitizer if your hands are not visibly soiled.
- ✓ Keep the drainage bag lower than the exit site as the urine drains by gravity.
- ✓ Check for kinks and leaks in the tube at least every 4 hours during the day.
- ✓ Empty the drainage bag regularly, at least every 4 to 6 hours during the day and 8 hours overnight.



How do I empty the drainage bag?

1. Wash your hands.
2. Use a fresh alcohol swab or alcohol-soaked gauze to clean the drainage port.
3. Open the drainage port and allow the urine to drain into the measuring container.
4. Clean the drainage port with a fresh alcohol swab, and then close it.
5. Empty the urine into the toilet and rinse out the container.
6. Wash your hands.

How do I change the dressing?

The spot where the tube comes out of the body is called the exit site. The exit site is covered with a dressing. This dressing needs to be changed every 3 days (2 times a week) or sooner if it falls off or becomes wet.

To change the dressing:

1. Wash your hands.
 2. Gather your supplies.
 - A liquid cleanser. Use an antiseptic solution such as Betadine. If you don't have antiseptic, use a mild, unscented (hypo allergenic) soap and water. If your skin is sensitive, you may need to rinse off the antiseptic solution with saline or water.
 - Sterile gauze pads
 - Clean water or saline
 - A new dressing.
 3. Remove the old dressing and put in the garbage.
 4. Wash your hands with hand sanitizer.
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5. Place some liquid cleanser on clean gauze. Starting near the tube, move the gauze in a circle around the tube. Make bigger circles with the gauze, moving outward to clean the skin around the tube. Also, make sure to clean both sides of the tube, starting at the exit site and moving at least 3 inches towards the drainage bag. Clean the skin, then the tube, then the skin again.
6. Rinse with fresh gauze soaked with clean water or saline.
7. Apply a new dressing.

When should I be concerned?

- ✓ Check the site each time you change the dressing. Watch for any redness, swelling or discharge. These are signs of infection.
- ✓ If you are concerned speak to your home nurse or call the clinic nurse.

What if the tube stops draining?

Occasionally the tube may stop draining. First check the tubing for kinks. Sometimes the tube may become blocked with small bits of waste (sediment) in the urine. If you notice this happens you may need to **flush the tube**.

Flushing the tube	<ul style="list-style-type: none">• Putting saline in the tube and reconnecting the drainage bag. You can do this at home.
Irrigating the tube 	<ul style="list-style-type: none">• Putting saline in and pulling back on the syringe. This is only done by a doctor or nurse. Do not do this at home.• Never pull back on the plunger of the syringe!

To flush the tube:

1. Wash your hands.
2. Gather your supplies.
 - 1 or 2 alcohol swabs
 - A syringe filled with **sterile** normal saline
 - Sterile gauze.
3. Wash your hands with hand sanitizer.
4. Use an alcohol swab to clean the connection between the nephrostomy tube and the drainage tubing.
5. Hold the nephrostomy tube with one hand. Use your other hand to unscrew the tubing and place it on the sterile gauze. **Do not let the end of tubing touch anything.**
6. Remove the cap from the end of the saline filled syringe. **Do not let the tip of the syringe or the end of the nephrostomy tube touch anything.** Carefully connect the tip of the syringe with the end of the nephrostomy tube.
7. Gently push on the plunger of the syringe to fill the nephrostomy tube with about 5 to 10 ml of normal saline.
8. Remove the syringe and reattach the drainage bag. The saline should flow into the drainage bag.
9. Wash your hands.

If the nephrostomy tube does not drain after flushing:

1. If the saline doesn't flow, check the nephrostomy tube for any kinks and try to flush again.
 2. If it still doesn't flow, **do not pull back on the plunger.** Reattach the drainage bag and check to see if it begins to drain.
 3. If it still doesn't flow, contact the urology clinic nurse.
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How often do I need to change the drainage bag?

The drainage bag should be changed every 3 days. Follow the same steps for flushing the tubing, except add the new tubing/bag instead of the syringe.

If the end of the nephrostomy tube or the end of the tubing accidentally touches an unclean surface, use a fresh alcohol swab to clean them very well before reconnecting them.

Can my child bathe or shower with a nephrostomy tube?

Your child may have a short bath or shower 1 week after the nephrostomy tube was inserted. The site should never be submerged in water. After the bath or shower, follow the instructions to change the dressing.

What should I do if... **If any of the following problems occur, be prepared to come to the hospital.**

The tube comes out?	<ul style="list-style-type: none"> • Do not try to put it back in. • Cover the site with a clean dressing and call or page the urology clinic nurse.
The urine colour changes?	<ul style="list-style-type: none"> • It is normal for the urine to look a little pink at times. • If the urine stays a bright red colour, call or page the urology clinic nurse.
My child develops a fever?	<ul style="list-style-type: none"> • If your child has a fever or chills call or page the urology clinic nurse. These can be signs of infection. • Be prepared to come to the hospital.

What should I do if... If any of the following problems occur, be prepared to come to the hospital.

<p>There is little or no urine in the drainage bag?</p>	<p>Normally you should see a slow, but constant flow of urine from the tubing into the drainage bag.</p> <p>If you do not see this flow:</p> <ol style="list-style-type: none"> 1. Check for any kinks or leaks in the tubing. 2. Make sure the tubing is connected to the bag. 3. Make sure your child is drinking well. 4. Try flushing the nephrostomy tube. <p>If you have tried all these things and there is still little or no drainage, call or page the urology clinic nurse.</p>
<p>There is a hole in the nephrostomy tube, the drainage tube or the bag?</p>	<p>If there is a hole in the Nephrostomy tube (very rare):</p> <ul style="list-style-type: none"> • Call or page the urology clinic nurse. • With a sterile piece of gauze, wrap the tube where the hole is, and secure with tape. • Be prepared to come to the hospital. <p>If there is a hole in the drainage bag or tubing (also uncommon):</p> <ul style="list-style-type: none"> • Change the bag. • Watch your child closely for fever or chills for the next 24 hours. • Call or page the urology clinic nurse if this happens.

Notes and questions



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How do I contact Pediatric Urology?

During business hours (Monday to Friday), call McMaster Children's Hospital at 905-521-2100:

- 2G Pediatric Urology Clinic – ext 78517 (for appointment information only)
- Natasha Brownrigg, Pediatric Urology Nurse Practitioner – ext. 73070
- Pediatric Urology Office – ext. 73777

For urgent issues after hours and on weekends, call Paging at 905-521-5030:

- Ask them to page the Pediatric Urologist on call.

If your child is unwell and needs immediate attention:

- Bring your child to the Emergency Department at McMaster Children's Hospital.
- If you live outside Hamilton, take your child to the nearest hospital emergency department.