

NEPHROSTOMY PERCUTANEOUS

Home care



It's a technique in which a catheter is inserted through the skin from the lower back to the kidney, in order to evacuate the urine. It may be unilateral or bilateral.

The catheter can be fixed to the skin with a stitch and / or with clamping device, gauze and adhesive tape.

This will be connected to a urine collection bag.

ABOUT THE CATHETER

The absence or decrease of urine can mean an accidental leak of the catheter, an obstruction or dysfunction.



Keep looking for Characteristics of the urine: clearness, bloody, smell and detect signs of infection.



The urine comes out continuously, drop by drop so you will not have the sensation of wanting to urinate.



The first week: by the drain insertion site serosanguineous fluid can come out and it requires change of the gauze.

Insertion site

- ✓ Monitor the fixation points of the catheter to the skin.
- ✓ The catheter insertion area should be covered.
- ✓ Check the dressing daily.
- ✓ Check the mark on the catheter.
- ✓ There shouldn't be any accommodation that hinders the normal output of urine.
- ✓ the skin around must be intact.
- ✓ There shouldn't be pain or burning sensation in the area.



Insertion site cleaning



Hands hygiene before and after manipulating the catheter or any part of the collector system.



During the shower, avoid wetting the gauze and the catheter insertion covering it with a plastic bag and adhesive tape.



Remove the gauze from the insertion site without removing the security fixings.

Clean the insertion site with gauze and saline from the center to outwards and dry it with gauze.

FIXING AND COLLECTOR SYSTEM

Cover the insertion site with gauze and attach it to the skin with micropore.

Change the gauze when there is excess of humidity and micropore.

Make a second fixation with micropore to prevent its outcome in case of accidental pulls.

Fix the equipment to the skin for more security and avoid disconnections.

➔ Cystofoss bag: connection of the macro dropper to cystofle equipment.

➔ Leg bag: extension or adapter that connects to the catheter.

The bag should be next to the body where the catheter is fixed.

Hang and keep the bag underneath the waist to prevent the reflux of the urine, avoid bag rubbing to the floor.

Watch and avoid twisting, puncturing and disconnection of the collector system to improve the drainage.



Empty the collection bag when it's halfway filled.

Cystofle bag is changed every month. Change macro equipment dropper weekly.



IN CASE OF ANY PROBLEM

head over the medical center where the procedure was performed.

- Urine changes: cloudy, bloody and smelly. Keep in mind that some food or medication can change the color and smell of urine.
- Significant decrease in the amount of eliminated urine.
- New back pain and persistent fever.
- Skin alterations around the drain, pain or local inflammation, red, hot skin, pus discharge or laceration of the skin.
- Urine outcome or fresh red blood through the catheter insertion site or catheter.
- Partial or complete catheter outcome.



PRACTICAL TIPS

- ✓ Perform daily activities with caution.
- ✓ The insertion site must remain covered. You should avoid immersing the catheter in water: immersion shower, swimming, etc.
- ✓ Your diet will be the usual: large amount of fluid intake (2-3 L a day), fruit and juices vitamin C rich (orange, strawberry, etc).