



Radiology department

Exchange of a nephrostomy tube

Introduction

This leaflet will tell you about exchange of a nephrostomy tube. It explains what is involved and any risks that may be associated with the procedure.

What to tell the doctor

It is important to tell the doctor **before the procedure** if you are taking any medication to prevent blood clots such as warfarin, heparin, dalteparin (Fragmin), aspirin or clopidogrel.

We normally ask you not to take aspirin or clopidogrel for one week before your procedure as this prevents the blood from clotting normally. Please check with your Christie doctor first. You can contact the radiology department on 0161 446 3325.

What is an exchange of a nephrostomy tube?

You will already have had a tube inserted through the skin into one or both of your kidneys, which drains urine into a bag. This procedure is called a nephrostomy. The tube requires changing at 3-6 monthly intervals and this is referred to as 'exchange of nephrostomy' when your present tube is replaced with a new tube.

Why do I need an exchange of nephrostomy?

Nephrostomy tubes are routinely changed to prevent infections and blockages. Your doctor will decide how frequently this needs to be done.

Who has made the decision?

Your doctor and the interventional radiologist (specialist doctor), who will do the procedure, will have carefully considered your case and feel that this is in your best interests. However, if following discussion with your doctors you do not wish to have the procedure, you can decide against it.

Who will be doing the exchange of nephrostomy tube?

An interventional radiologist will carry out the procedure. They have special expertise in using x-ray and scanning equipment to do procedures, and also in interpreting the images produced. They need to look at these images while carrying out the procedure. Interventional radiologists are the best trained people to replace the tube correctly.

Where will the procedure take place?

In the procedure room, in the radiology department.(X-ray department). This room is adapted for specialised procedures.

How do I prepare for an exchange of a nephrostomy tube?

You **must** let your doctor know if you have:

- any allergies
- a previous reaction to intravenous contrast medium (the dye used for kidney x-rays and CT scanning).

You need to be an inpatient in the hospital. We will ask you to put on a hospital gown.

Agreeing to treatment

We will ask you to sign a consent form agreeing to accept the treatment that you are being offered. The basis of the agreement is that you have had The Christie's written description of the proposed treatment and that you have been given an opportunity to discuss any concerns.

You are entitled to request a second opinion from another doctor who specialises in this procedure. You can ask your own consultant or your GP to refer you. Your consent may be withdrawn at any time before or during this treatment. Should you decide to withdraw your consent then a member of your treating team will discuss the possible consequences with you.

What actually happens during the exchange of nephrostomy tube?

You will lie on the x-ray table. You will be asked to lie on your front, back or side depending on the easiest route of access to your tube.

We may rarely give you an injection of an antibiotic if there is concern that your urine is infected.

The radiologist needs to keep everything sterile and will wear a theatre gown and gloves. The skin around the site will be swabbed with antiseptic and then most of the rest of your body will be covered with theatre towels.

The radiologist will inject some dye down the tube and will look at the x-rays to check that the present tube is in the correct position.

A guide wire will then be placed through the existing tube into the kidney. The radiologist will then pull the tube out, leaving the guide wire in place. This allows a new tube to be inserted over the wire and into the correct place in your kidney. Once the tube is secured in place, the guide wire is removed. The outer tube is then covered with an adhesive bag to collect the urine.

Will it hurt?

An exchange of nephrostomy tube is usually a relatively pain free procedure. It is normally performed without local anaesthetic. However, if you experience discomfort, it may be possible for the interventional radiologist to give local anaesthetic and/or the nurse to give you a painkiller.

How long will it take?

Every patient's situation is different, and it is not always easy to predict how long it will take. As a guide, expect to be in the x-ray department for about 30 minutes.

What will happen afterwards?

You will go back to the ward that you were admitted to. The nurses will observe you for any signs of complications. You will usually be discharged home a couple of hours following the procedure.

What are the benefits of the procedure?

Nephrostomy tubes are routinely changed every six months, or in some cases earlier. This is to prevent infections and blockage of the tube.

