Suprapubic Cystostomy and Nephrostomy Care

The following provides helpful information that will assist you in caring for your catheter. These are designed to be general guidelines. If you have any questions or concerns, please feel free to ask your doctor or nurse.

A suprapubic cystostomy is a surgical opening made into the bladder directly above the pubic bone. A tube (catheter) is inserted into the bladder. The catheter is held in place by a balloon or sutures. Urine flows through the catheter into a drainage bag (see Figure 1).

A nephrostomy tube works much the same way, except:
- The surgical opening is made into the kidney.
- The catheter is held in place by sutures and/or a wax wafer with a catheter holder (see Figure 2).

General Guidelines

It is important to keep the area around the catheter site clean. Change the dressing daily or any time it comes off. Change the catheter tape when it becomes soiled or loose. When taping the catheter to the skin, make sure the catheter is not kinked. If your skin is sensitive to adhesive tape, use a non-allergic tape.

Wash your hands carefully before and after changing the dressing or drainage bags. Avoid pulling on the catheter or tube. Do not clamp your catheter or tube.

You may notice dried crusts around the outside of the catheter. These can be removed by gently wiping with a wet wash cloth. Do not use alcohol on the area where the catheter enters the body. This may dry your skin and can cause irritation.
Dressing Changes

1. Wash your hands carefully.
2. Remove the old dressing.
3. Clean the skin around the catheter with a mixture of 1 part hydrogen peroxide and 1 part water or with Hibiclens® soap.
4. Apply two 4” x 4” dressings over the insertion site and secure with adhesive tape or a transparent dressing.
5. For a suprapubic catheter, gently curve the catheter and tape it to the skin to prevent the catheter from moving back and forth (see Figure 1).
6. For a nephrostomy tube, make sure the catheter is secured properly to the flank and hip (see Figure 2).
7. Make sure the catheter or tube is well secured and not kinked.

Collection Devices

There are 2 types of collection devices: a drainage bag and a leg bag. The leg bag may be used when you are up during the day, walking or sitting. The large drainage bag is used when you sleep or lie down for longer than 1 hour.

How to Change from a Drainage Bag to a Leg Bag

1. Wash your hands.
2. Attach the straps of the leg bag to your leg.
3. Gently tap the connection to drain any urine left in the tube down into the bag. Clean both the tip of the leg bag or extension tubing and clean the catheter junction with alcohol for 15 seconds.
4. Hold the catheter or tube with one hand. Grasp the tubing with the opposite hand. Work the connection loose by using your thumb to push up on the end of the catheter.
5. Pinch the catheter closed and pull the drainage bag tubing out. Insert the leg bag tubing into the catheter or tube.
6. Ensure the catheter or tube has slack so that the catheter will not pull when you move your leg.
7. Empty the drainage bag. Rinse the inside of the bag with cold water.

How to Change from a Leg Bag to a Drainage Bag

1. Wash your hands.
2. Clean both the connection between the catheter or tube and the leg bag and the tip of the drainage bag with an alcohol swab for 15 seconds.
3. Gently tap the connection to drain any urine left in the tube down into the leg bag.
4. Hold the catheter or tube with one hand. Grasp the tubing with your opposite hand. Work the connection loose by using your thumb to push up on the end of the catheter.
5. Pinch the catheter or tube closed and pull the leg bag tubing out. Insert the drainage bag tubing into the catheter.

6. Allow enough slack so that the catheter will not pull when you move your leg.

7. Empty the leg bag. Rinse the inside of the bag with cold water.

**Special Instructions**

- Wear the larger drainage bag at night. Never go to bed with the leg bag on. Urine could backflow into the bladder if the bag fills up.
- Before taking a nap, empty the leg bag. It is suggested that you wear the night drainage bag when lying down for longer than 1 hour. This allows urine to drain freely.
- Urine must always drain downhill. Always keep the leg bag, drainage tube and bedside bag below the level of your bladder.
- Avoid kinks in the drainage system.
- Empty your bags at least every 8 hours or more often as needed to prevent urine back-up.
- While in bed, don’t lie on the tubing.
- Keep everything clean. Once a week, rinse the inside of the drainage bags, including tubing, with vinegar to reduce odor. Use 2 parts vinegar to 3 parts water. After cleaning the drainage bags, hang the bag in the shower or bathtub to dry out between use.
- Discard drainage bags when damaged or when you can no longer remove odors with cleaning.
- Each time you separate or reconnect the catheter from the drainage system, wash your hands. Then clean the connection between the drainage tube and the collection bag with a cotton ball soaked in 70 percent rubbing alcohol, an alcohol swab or chlorhexidine (Chloroprep®).

To prevent infection:

- Wash your hands before and after handling the catheter or tube.
- Tape the catheter or tube in place to prevent it from moving in and out as much as possible, as discussed in “General Guidelines.”

**When to Call the Doctor**

Notify your doctor if you note any of the following:

- Severe or increasing flank pain, especially if nausea or vomiting are noted
- Burning upon urination (nephrostomy patients only)
- Large amount of blood in urine
- Excessive drainage around the catheter
- Foul-smelling drainage around the catheter
- No urine draining from the catheter
- Catheter coming out of the insertion site
- Temperature higher than 101° F
- Chills
- Redness, swelling or tenderness where the catheter enters your skin

Questions You May Want to Ask Your Doctor

- Can I take a bath or a shower?
- Where can I get more equipment?
- Will my catheter need to be changed and who will change my catheter?

Northwestern Medicine – Health Information Resources
For more information, contact Northwestern Memorial Hospital’s Alberto Culver Health Learning Center (HLC) at hlc@nm.org, or by calling 312.926.5465. You may also visit the HLC on the 3rd floor, Galter Pavilion at 251 E. Huron St., Chicago, IL. Health information professionals can help you find the information you need and provide you with personal support at no charge.

For more information about Northwestern Medicine, please visit our website at nm.org.