

Suprapubic Cystostomy and Nephrostomy Care

This brochure will help you learn how to care for your catheter. The following are general guidelines. If you have any questions or concerns, please ask your physician or nurse.

Wash your hands carefully before and after changing the bandage or drainage bag.

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 (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 (Figure 2).

General guidelines

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

Wash your hands carefully before and after changing the bandage 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 washcloth. Do not use alcohol on the area where the catheter enters the body. This may dry your skin and can cause irritation.

Figure 1. Suprapubic cystostomy

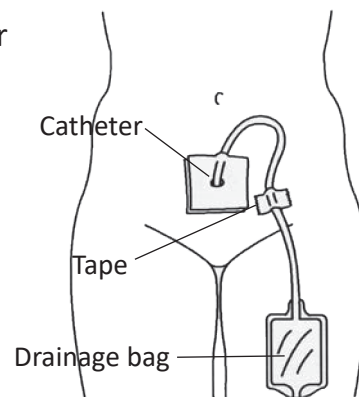
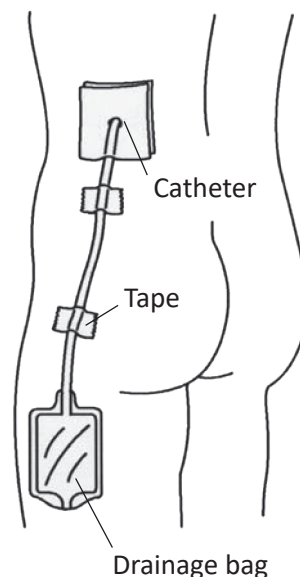


Figure 2. Nephrostomy



To change your bandage

1. Wash your hands with soap and water.
2. Remove the old bandage.
3. Clean your skin around the catheter with a mixture of 1 part hydrogen peroxide and 1 part water or with Hibiclens® soap.
4. Apply 2 sterile 4x4-inch gauze pads over the insertion site and secure with adhesive bandage tape or a transparent film dressing.
5. For a suprapubic catheter: Gently curve the catheter and tape it to your skin to prevent the catheter from moving back and forth (Figure 1).
6. For a nephrostomy tube: Make sure the catheter is secured properly to your flank and hip (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 with soap and water.
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.
4. Clean the tip of the leg bag or extension tubing and the catheter junction with a cotton ball soaked in 70% rubbing alcohol, an alcohol swab or chlorhexidine gluconate (ChlorPrep®) for 15 seconds.
5. 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.
6. Pinch the catheter closed and pull the drainage bag tubing out. Insert the leg bag tubing into the catheter or tube.
7. Ensure the catheter or tube has enough slack so the catheter will not pull when you move your leg.
8. 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 with soap and water.
2. Clean the connection between the catheter or tube and the leg bag and the tip of the drainage bag with a cotton ball soaked in 70% rubbing alcohol, an alcohol swab or ChlorPrep 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 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 when lying down at night. Never go to bed with the leg bag on. Urine could backflow into your bladder if the bag fills up.
- If you take 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.
- Do not lie on the tubing and make sure it is not kinked.
- Empty the bag at least every 8 hours, or more often as needed, to prevent urine from backing up.
- Keep everything clean. Once a week, rinse the inside of the drainage bags with vinegar, including tubing, to reduce odor. Use 2 parts vinegar to 3 parts water. After cleaning the drainage bags, hang the bags in the shower or bathtub to dry out between use.
- Discard drainage bags when they are 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% rubbing alcohol, an alcohol swab or 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 (see General guidelines section).

When to call your physician

Notify your physician if you note any of these symptoms:

- Severe or increasing flank pain, especially if you also have nausea or vomiting
- Burning upon urination (only if you have a nephrostomy)
- Large amount of blood in your urine
- Large amount of drainage around the catheter

- Foul-smelling drainage around the catheter
- No urine draining from the catheter
- Catheter coming out of the insertion site
- Temperature more than 101 degrees F
- Chills
- Redness, swelling or tenderness where the catheter enters your skin

Questions you may want to ask your physician

- 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 it?