# Caring for your child after a nephrostomy tube procedure

Your child had a procedure to drain urine from one or both kidneys. This procedure is called a percutaneous nephrostomy. Draining the urine from your child's kidney will help prevent pain, infection or kidney damage.

#### Why did my child have this procedure?

A kidney stone, an obstruction that your child was born with, or other condition was blocking the tube that carries urine from your child's kidney to their bladder. Urine that can't drain from the kidney can cause pain or infection and may even cause permanent kidney damage.

#### What happens during the procedure?

The doctor will insert a thin, flexible tube (catheter) into your child's kidney. The tube will stay in place until the problem that caused the buildup of urine has been treated. This could be for a few days, to weeks, to several months. The tube is connected to a catheter bag at the end of the procedure.

The catheter bag that the urine drains into must stay below the level of your child's kidneys for drainage to occur. This means that it needs to stay taped to your child's lower abdomen or leg.

#### What activities can my child do with the catheter in place?

- · Go to school with the tube in place
- Non-strenuous, low-contact play activities
- Walking is an ideal activity for your child with the tube in place

## What can my child NOT do with the catheter in place?

- Lift anything over 10 pounds
- Run, jump or play sports
- Any activity that causes the tube to be pulled or moved

### How do I care for my child at home?

#### Daily living

- Feed your child their normal diet.
- Keep your child hydrated unless you need to limit liquids due to another condition.
- Understand your child's medication schedule including when they can start taking the medications they took before the procedure.

#### Care of the tube and catheter bag

- Wear loose, comfortable clothes that won't pull or crimp the catheter tube.
- Check the dressing often to make sure the tubing is secure.
- Keep the catheter bag taped or tied to your child. Do not let the drainage bag hang freely.
  It will pull on the catheter.
- Empty the drainage bag often to keep the weight of the bag from pulling on the catheter.



- Empty the bag when it is ½ full.
- Always empty the bag before bedtime.
- Wash your hands before and after emptying the bag.
- Measure and record the amount and color of the urine in the bag if you were told to do so.

#### **Bathing**

- Give your child sponge baths while the tube is in place.
- Gently clean the skin around your child's catheter with mild soap and warm water. Check the skin for any signs of infection. Pat dry with a clean towel.
- Showering is allowed if the tubing is covered with plastic wrap.
- Do not let your child take a bath or go swimming.
- Change the dressing if it becomes loose, wet or dirty. Your healthcare team will show you how to clean your child's skin and which skin barriers and attachment devices to use.

#### Troubleshooting - When to call your doctor.

- The tube isn't draining. You may need to flush the tube with the sterile saline flushes and alcohol pads that were given to you after the procedure.
- The catheter comes out. Don't try to put it back in.
- The catheter partially comes out. There may be a black mark on the tube to mark the place where the tube enters the skin. Check to see that the black mark is next to the skin. If the black mark isn't next to the skin, the tube has moved. A healthcare provider needs to put it back in. Don't try to put it back in.
- Pain, redness, or discharge around the catheter.
- Fever of IOO.4°F (38°C) or higher, or as directed by your healthcare provider.
- A noticeable increase or decrease in the amount of urine that drains.
- Cloudy, smelly or pus-filled urine.
- Urine that is bright red. Pink to light red urine is normal after the procedure.
- Pain in your child's lower back or side.
- Nausea and vomiting.
- New or worsening symptoms.

#### Follow-up visits

Make sure to attend all of your child's follow-up visits with your provider. Nephrostomy tubes should be changed every 2 to 3 months. Your child will need an in-office appointment to change the tube or remove it when your child's condition has improved.