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 A).

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 B).

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.

Wash your hands carefully before and after changing the dressing or drainage bag.
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.
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 A).
6. For a nephrostomy tube, make sure the catheter is secured properly to the flank and hip (see Figure B).
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 is used when you are walking or sitting. The large drainage bag is used when you sleep or lie down.

*How to Change from a Drainage Bag to a Leg Bag*

1. Wash your hands.
2. Attach only the lower strap 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. 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. Attach the second strap of the leg bag to your leg.
7. Ensure the catheter or tube has slack so that the catheter will not pull when you move your leg.
8. Empty the drainage bag. Rinse the inside of the bag with cool water.
How to Change from a Leg Bag to a Drainage Bag

1. Wash your hands.
2. Remove the top strap from your leg.
3. Clean the connection between the catheter or tube and the leg bag with an alcohol swab.
4. Gently tap the connection to drain any urine left in the tube down into the leg bag.
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 or tube closed and pull the leg bag tubing out. Insert the drainage bag tubing into the catheter.
7. Allow enough slack so that the catheter will not pull when you move your leg.
8. Empty the leg bag. Rinse the inside of the bag with cool 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. 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 (most leg bags can be used for 3 months).
- 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 or an alcohol swab.
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?

**Health Information Resources**

For more information, visit one of Northwestern Memorial Hospital’s Health Learning Centers. These state-of-the-art health libraries are located on the 3rd floor of the Galter Pavilion and on the 1st floor of the Prentice Women’s Hospital. Health information professionals are available to help you find the information you need and provide you with personalized support at no charge. You may contact the Health Learning Centers by calling 312-926-LINK (5465) or by sending an e-mail to hlc@nmh.org.

Para asistencia en español, por favor llamar al Departamento de Representantes para Pacientes al 312-926-3112.

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