



Patient & Family Guide  
2016

# Urostomy



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# Urostomy

## What is a urostomy?

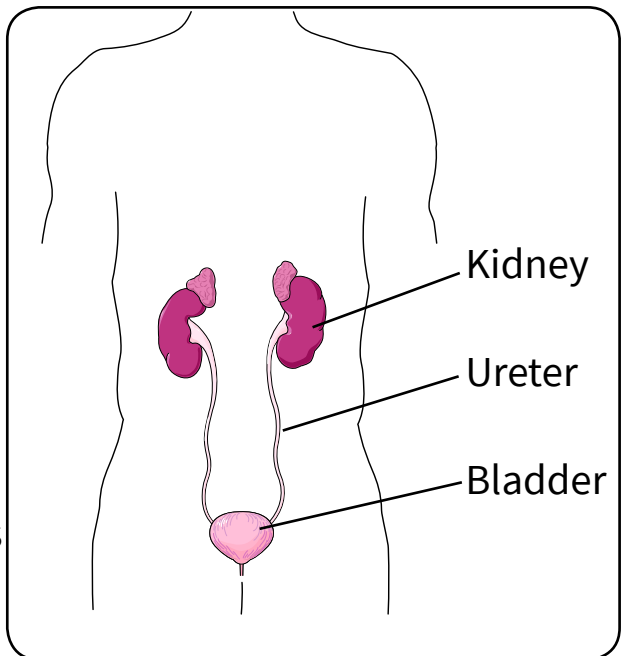
A urostomy is a urinary diversion also known as an ileal conduit. This is when an opening is made in the wall of the belly for urine (pee) to pass through.

## Why do I need a urostomy?

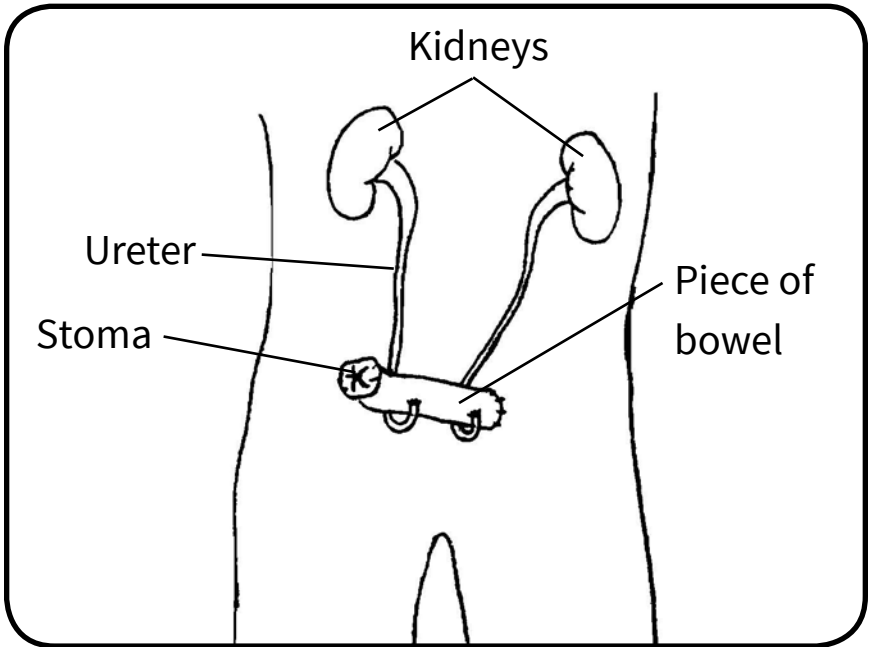
This surgery may be needed when the bladder is not working or has to be taken out. You and your urologist have already talked about why this surgery is needed.

## How does my urinary system work right now?

You have 2 kidneys, 2 ureters (hollow tubes), and a bladder. Urine is made in your kidneys, travels down your ureters, and is stored in your bladder until you pass it (pee).



## How will my urinary system work after the surgery?



Urine will still be made in the kidneys and travel down the ureters. The ureters will no longer be connected to the bladder. Instead, they will be connected to a piece of bowel, which opens in the belly as a stoma (opening). Urine will continually drain through the stoma and empty into a pouch on your lower belly. Your bladder may or may not have to be taken out. This depends on your diagnosis and condition.

Please read the pamphlet *Planning for Your Hospital Stay After Surgery* for general information about your care before and after surgery.

## **Just before surgery**

Some tests will be done 1-2 days before your surgery. This is to make sure it is safe for you to have surgery. You may have blood and urine tests, a chest X-ray, and an electrocardiogram. An Enterostomal Therapist (ET nurse) will visit with you in the pre-admission clinic.

## **Special diet**

- The day before surgery you should only have clear liquids such as water, apple juice, clear broth, tea, coffee, or Jell-O®.
- Tea or coffee are OK, but do not add milk.
- You may be instructed by your doctor to do a bowel prep before your surgery. If this is ordered, you will get several bottles of a special liquid to drink. It is important that you drink all of it as you are told. This will make your bowels move so much that you will only pass clear liquids. The risk of infection after surgery is cut down if your bowel is cleaned out well before surgery.
- Do not eat or drink anything after midnight the night before your surgery.

## **Enterostomal Therapist (ET)**

This nurse specializes in ostomy care. She or he will mark the position of your new stoma with a marker (on the right side of your belly) and answer any questions you have about your surgery and the care of your urostomy.

## **Ostomy visitor**

An ostomy visitor is a person who has had urostomy surgery. If you would like, he or she can visit you and answer your questions about day-to-day life with an ostomy.

## **After surgery**

You will be taken to a special recovery area where your breathing, pulse, and blood pressure will be checked often. Once you are stable, you will be moved to your hospital room. Some patients may have to go to the Intensive Care Unit (ICU) for a few days to be watched closely by the nurses and doctors.

## **Intravenous (IV)**

You will have an IV for several days. It is taken out after you are back to eating and drinking normally.

## **Dressing**

- You will have a dressing over the incision (cut) on your belly. On the 2nd or 3rd day after your surgery the dressing will be taken off and replaced with a smaller one. The dressing will be changed daily.
- The sutures or staples in your incision are taken out before you go home and Steri-Strips® (strips of tape) are put on. If not, your family doctor will remove the sutures/staples for you.

## **Drain**

You may have a drain (soft, flexible tube) in the area next to your incision. This helps drain any fluid that forms after surgery. The tube may be connected to a suction machine. Sometimes, there will be a clear bag over the area to collect the drainage. Your nurse will empty the bag as needed during every shift.

## **Stoma**

You will have an appliance on the side of your belly covering your stoma. It will be connected to a drainage bag at the side of your bed. You will notice 2 thin hollow tubes (stents) sticking out of your stoma. These tubes help keep the ureters open until the swelling goes away. The stents may be taken out before you go home. When you start to feel better, the ET will teach you and your family how to care for your urostomy.

## **The ET will:**

- Give you the supplies you will need at home.
- Tell you how and where to get these supplies.
- Give you discharge instructions and when to make a follow-up appointment.
- Give you contact information for ETs in your area.

## **Nasogastric tube**

You may have a small, hollow plastic tube (nasogastric or NG tube) that goes in your nose, down the back of your throat, and into your stomach. This tube keeps your stomach empty of fluid, helps to prevent you from feeling sick to your stomach, and allows your bowels to heal. It may be connected to a machine that helps it drain. Your nurse and doctor will check you often to see when your stomach is ready for fluids, at which time the NG tube can be taken out. The NG tube is usually taken out after 2-3 days.

## **At home**

### **Activity**

- Plan to get plenty of rest during the first 2-3 weeks after you leave the hospital.
- Slowly go back to your usual activities.
- Walking is the best exercise.

## Healthy eating

- Drink plenty of fluids (8-10 glasses each day). This may cut down on urinary tract infections and keep crystals from forming in your urine.
- Use the colour of your urine as a guide to see if you are drinking enough. If it is dark yellow, it may mean you need to drink more fluids. Avoid (stay away from) large amounts of caffeine and alcohol as they can dehydrate you.
- Be aware of some foods that may cause urine odour (smell), such as asparagus, onion, and garlic. You do not need to cut out these foods all together. Just be aware they may cause an odour. You will find out which foods affect you over time. Cranberry juice may lessen urine odour (limit to 1-2 cups a day).
- You will be on a fibre-restricted diet for 4 weeks after surgery for your comfort. The dietitian will talk with you about what foods to avoid, foods you can eat, and foods that can help you heal after surgery.

## Sexual activity

When to have sex again will depend on the reasons why you had the urostomy. Please talk to your doctor or ET about any of your concerns.



## **Exercise and sports**

You should eventually be able to play most sports. Make sure your appliance is secure (held in place) and has a watertight seal for swimming.

### **For the next 6 weeks avoid:**

- Lifting anything heavier than 10 pounds (e.g., children, laundry, groceries)
- Strenuous (hard) exercise (such as moving furniture, mowing the lawn, and shoveling snow)
- Straining for a bowel movement
- Driving

## **Returning to work**

Please talk with your doctor about when it would be best for you to return to work.

## Follow-up care

Before you leave the hospital, you will get:

- A follow-up appointment to see your Urologist. It is very important to keep this appointment so your urologist can make sure everything is healing properly.
- A letter to give to your family doctor.
- A prescription for pain pills and/or an antibiotic. Your nurse will teach you about your medicines and when to take them.
- A prescription for ostomy supplies.
- An appointment with the ET nurse. To contact an ET nurse, call 902-473-7503.
- Home care (VON) will be available to help support you during appliance changes for a short period of time after you leave the hospital.

If you need to see a doctor, please contact your family doctor or go to the nearest Emergency Department unless otherwise told by your Urologist.

**Call your doctor if you have:**

- Fever and chills.
- Severe (too much to handle) pain at your incision area.
- You have more drainage from your incision.
- Blood in your urine (more than a few drops in 6-8 hours).
- Broken or red skin around the stoma which does not heal.
- Diarrhea, vomiting (throwing up), or belly cramps that lasts for more than 12 hours.
- You are passing less urine even though you are drinking plenty of fluids.

**If you have any questions, please ask.**

**We are here to help you.**

