

Notes:

Nephrostomy Tube

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Call 811 or visit: <https://811.novascotia.ca>

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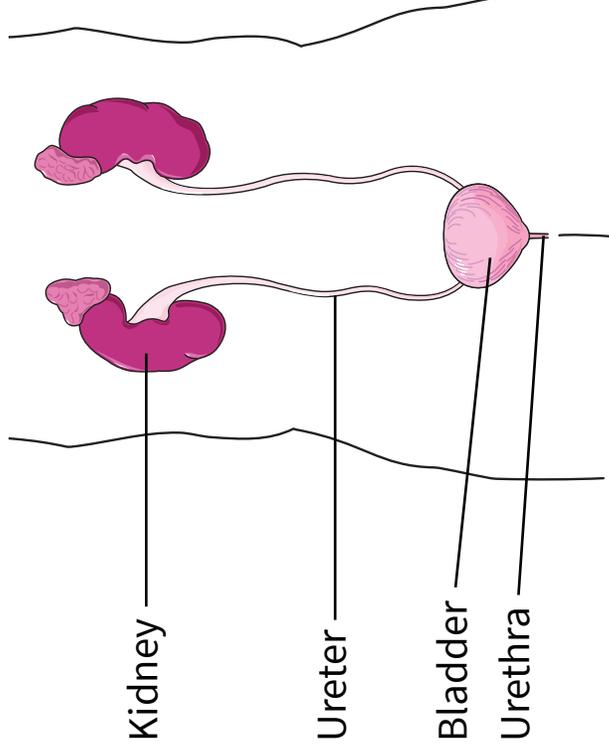
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Urologist: _____
Clinic phone: _____

Nephrostomy Tube

What is a nephrostomy tube?

- Urine (pee) is made in the kidneys. It travels through tubes (called **ureters**) to your bladder.
- Urine leaves the bladder through another tube called the **urethra**.



- A **nephrostomy tube** (often called an NT) is a soft, flexible tube that is placed through the skin in your lower abdomen (stomach area) into your kidney. It drains urine from your kidney into a bag outside your body.
 - › Your NT will be put in by a health care provider called an **interventional radiologist** using sedation (medication to help you relax).

Follow-up care and tube changes

- The NT needs to be changed about every 3 months. This helps to:
 - › Keep the tube clean
 - › Prevent infection or blockage
- Your NT will be changed by an interventional radiologist. It is a short procedure.
 - › You will likely have local anesthetic (freezing)
 - › The new NT will be put in through the same opening in your skin
- Your health care team will tell you when to book your NT changes and who to call if you have any problems.
- Always keep your follow-up appointments so your health care team can check your kidney and NT regularly.

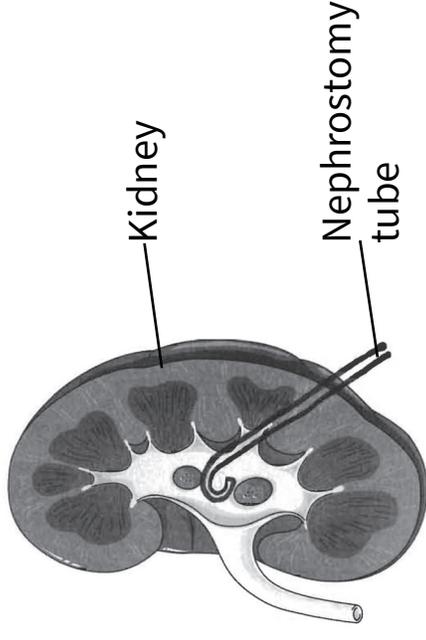
For 7 days (1 week) after your procedure:

- › Avoid strenuous (hard) activity (like shovelling, vacuuming, or sports)
- › **Do not** lift anything heavier than 10 pounds
- › **Do not** stretch your abdominal area

Call your primary health care provider (family doctor or nurse practitioner) or urologist if:

- › The NT comes out or moves
- › Urine stops draining or backs up into the tubing
- › No urine is collecting in the drainage bag for more than a few hours
- › You have a fever (temperature above 38 °C or 100.4 °F) or chills
- › You have pain, redness, or swelling around the insertion site
- › There is blood or urine leaking from the insertion site
- › Your urine is cloudy, smells bad, or is very bloody
- › You have pain in your back, side, or abdomen that suddenly gets worse
- › The drainage bag fills quickly with bright red blood

If you cannot reach your primary health care provider or urologist, go to the nearest Emergency Department right away.



- Even with an NT, you may still pee as usual if:
 - › Urine is able to flow from your other kidney
 - › Some urine from the kidney with the NT is able to flow

Why do I need an NT?

- You may need an NT if urine cannot flow normally from your kidney(s) to your bladder.
- This can happen if:
 - › Your ureter is blocked (because of a kidney stone, scar tissue, or a tumour)
 - › Something is compressing (pressing on) your ureter
- The NT drains your urine safely. This helps:
 - › Relieve pain
 - › Prevent infection
 - › Protect your kidney from damage until the blockage or compression can be treated

- You may also need an NT for some procedures, like a **percutaneous nephrolithotomy (PCNL)**. This is surgery to remove kidney stones. During this surgery, the surgeon uses the NT to access your kidney.

Caring for your NT

- A nurse will show you how to care for your NT before you leave the hospital. They will teach you how to:
 - › Keep the area around the NT clean
 - › Secure the NT so it does not move around
 - › Manage the drainage bag
- Your health care team can arrange home care services to help you with regular dressing changes, monitoring, and NT care.

To care for your NT:

- › Keep the insertion site (where the tube enters your body) clean and dry.
- › **Wash your hands before and after touching the NT or the drainage bag.**
- › Each day, gently clean around the NT with mild soap and water. Pat the area dry with a clean towel. **Do not** rub.
- › **Do not** put lotions or powders on the area.
- › Secure the NT. Use tape or a dressing to keep the NT in place and prevent pulling or twisting.

Drainage bag tips:

- Always keep the drainage bag below your kidney. This helps urine flow freely and prevents backflow that could cause infection.
- Empty the drainage bag when it is about half ($\frac{1}{2}$) full.
- Record the amount and colour of the urine (if your health care team has asked you to).
- Clean the drainage bag each day with a mix of vinegar and water or a bag-cleaning solution.
- Keep an extra drainage bag and supplies on hand.
- **Do not** let the NT kink or bend. These can block urine flow.

Do not try to remove or move the NT yourself. If it comes out or stops draining, cover the site with a clean dressing and call your urologist or your health care provider right away.

Activity

- You may take a shower 24 hours (1 day) after your procedure, unless you are told otherwise.
- **Do not** take a bath, swim, or go underwater with the NT in place.
- Wear loose, comfortable clothes to help avoid bothering your insertion site.