Percutaneous Nephrostomy

A kidney or a ureter (tube leading from the kidney to the bladder) can become blocked. This may be due to kidney stones, tumors, or other causes. The blockage can cause a backup of urine in the kidney. **Percutaneous nephrostomy** is a procedure that drains the urine from the kidney to prevent pain, infection, and kidney damage. The procedure is done by a specially trained doctor called an interventional radiologist.

During the Procedure

- You change into a hospital gown.
- An IV (intravenous) line is put into your hand or arm to give you fluids and medications. You will then lie on your stomach on an x-ray table. You may be given medication to help you relax and make you feel sleepy.
- The skin on your lower back is numbed with an injection of local anesthetic.
- Using ultrasound or x-ray images as a guide, the radiologist inserts a needle through your lower back into your kidney. **Contrast medium** (x-ray dye) may be injected through this needle into the kidney. This fluid makes the kidney easier to see on x-ray images. The x-ray images can show exactly where the kidney or ureter is blocked.
- The needle is then replaced with a **drainage catheter** (thin tube). The catheter is attached to a drainage bag, which collects the urine that drains from the kidney.
- The entire procedure takes about 1 to 2 hours.

**After the Procedure**

The catheter will stay in place until the problem that caused the buildup of urine is treated. This may be as little as a day or as long as weeks to months. The bag is taped to your leg so you can walk around. During the time the catheter is in place:

- Keep the skin around the catheter clean and dry.
- Be careful not to move or dislodge the catheter. Make sure that the drainage bag is taped securely to your leg.
- Empty the drainage bag often. This keeps the weight of the bag from pulling on the catheter. Call your doctor if the urine becomes cloudy or smells bad.