

Inserting a catheter into the kidney

You have been diagnosed with a blockage or stricture in the urinary tract, which prevents urine flow from the kidney to the bladder. To treat it, a thin plastic tube i.e. a catheter will be inserted into your renal pelvis through the skin. After this, the urine will flow into a urine bag via the tube.

The renal pelvises are located in the kidneys toward your back.

The procedure is carried out with the help of X-ray and ultrasound devices.

The procedure is sometimes called a nephrostomy or a pyelostomy.

For this, you have been invited to the ward, and from the ward you will be taken to the X-ray unit where the procedure is performed. You will return to the same ward after the procedure.

The procedure usually takes 1 to 2 hours. Patient who needs urgent examinations may be examined before you.

Please see the arrival instructions or appointment letter for contact information, if you have any questions about the procedure.

Before the procedure

- Have laboratory tests taken according to the instructions you've received. The outpatient clinic or ward responsible for your care has provided the instructions.
- **If you are or suspect you may be pregnant**, please contact the unit that referred you to the examination as soon as possible.
- If you have an allergy to an anesthetic or iodine contrast, contact the outpatient clinic or ward that referred you to the examination.
- Do not eat or drink at all in the morning before the procedure. You will need to fast without food or drink for at least 4 hours.

Please wear loose-fitting clothes when you come to the hospital. When you return home, the urine bag will be attached to your thigh.



Be prepared that as long as the catheter is in place:

- You are not allowed to swim or have a sauna. You may shower.
- You will need to avoid heavy physical strain and exercises where you twist your torso a lot. Playing tennis, for example, is not allowed. However, you may ride a bicycle, for example.

Medication

The physician responsible for your treatment will instruct you how to take your medication if you

- use medication affecting the blood's tendency to clot, or
- have diabetes treated with insulin.

If you have not received instructions, please contact the outpatient clinic or ward that referred you to the procedure.

- If you are on tablet medication for diabetes, take the tablets only after the procedure.
- Take your other prescription medicines in the morning with a small amount of water.

During the procedure

Prior to the procedure, you will be given an antibiotic at the ward or during the procedure.

A cannula will be placed in a vein on your arm. You will receive pain medicine as needed via the cannula.

You will lie on an examination table during the procedure.

First, the doctor will anesthetize your skin in the lower back. If the catheter is placed in a transplanted kidney, the lower abdomen will be anesthetized instead.

Then, the doctor will inject a needle into the kidney and insert the catheter into the renal pelvis.

The catheter will be put through the skin in the middle of your back, or through the lower abdomen if placed in a transplanted kidney. A radiographer will attach the catheter tube on your skin and connect it to a urine bag.



After the procedure

You will return to the ward after the procedure. You will be monitored there for 2 to 6 hours.

The referring doctor responsible for your care will tell you how long you will need to use the catheter. The length of the catheterization period varies between individual patients.

The catheter must be replaced at least every 3 months. The outpatient clinic or inpatient ward that referred you to the procedure will book an appointment for you.

At home, take care that the catheter or urine bag tube does not get caught on anything and detach.

If you have any questions about the catheter, please contact the outpatient clinic or ward responsible for your treatment.

Other things to note

Cancel the appointment if you cannot come. If you do not cancel, you will be charged a fine.



4 (4) Patient instruction