

Percutaneous Nephrostomy

Patient Information







Percutaneous Nephrostomy

What is a Percutaneous Nephrostomy (PCN)?

Percutaneous Nephrostomy is a procedure that involves the placement of a catheter (small, flexible rubber tube) through the skin, into the kidney. This is done to drain urine from the urinary tract in cases when the kidneys are obstructed because of a tumour, a stricture (narrowing of the tract) or stones. This is a temporary bypass procedure performed till definitive treatment for the obstruction can be carried out.

Why is a Percutaneous Nephrostomy (PCN) performed?

Percutaneous Nephrostomy (PCN) is done when the ureters (thin tubes that pass urine from the kidneys to the bladder) become obstructed, blocking the passage of urine. Obstruction in the ureters can damage the kidney and eventually make it non-functional. A PCN can relieve this obstruction and prevent further damage to the kidney.

Who makes the decision to conduct a Percutaneous Nephrostomy (PCN)?

Your treating physician and the interventional radiologist performing the procedure discuss the case and decide if a percutaneous nephrostomy is necessary.

How do I prepare for the procedure?

- Stop eating or drinking six hours before the procedure. You may continue taking your medicines with water. Please consult your doctor if you are on diabetes medication.
- Inform your doctor if you have any allergies or have had a bad reaction to any procedure in the past.
- Let your doctor know if you are taking any blood thinning medications, as these may need to be stopped.
- You may be asked to get some new laboratory tests. These include PT, aPTT, INR and platelet count.
- It is advisable to bring an attendant with you.

What happens during the procedure?

- You will be asked to lie down on the X-ray table.
- A cannula (thin tube to administer medication) will be inserted in your arm so that your doctor can give a sedative (relaxing agent) or painkiller when required.
- Sensors will be attached to your body to monitor your vitals.
- The skin where the doctor will enter the abdomen will be cleaned, and then a local anaesthetic (numbing agent) will be injected there.
- A small incision (cut) will be made in the skin through which a needle will be inserted into your kidney.
- Once the needle is correctly positioned, contrast will be injected to view the status of the kidney. This is called an Antegrade Pyelogram.





• A catheter will be introduced into the kidney and the external part will be connected to a bag. This drainage catheter will be attached to the skin using sutures (stitches).

Will it hurt?

- You may feel slight pain when a local anaesthetic is injected, after which the area will become numb.
- You may also feel some discomfort when the catheter is inserted. Your doctor will give you a painkiller to help with this pain.

How long will it take?

This procedure usually takes about half an hour to complete but may take longer in some cases.

What happens afterwards and what precautions are necessary?

- If you are an inpatient (admitted at the hospital), you will be shifted back to your ward. Nurses will carry out regular observations.
- If you are an outpatient, you will be kept in the recovery room of the Radiology department. The Radiology staff will carry out regular observations. You will then be discharged from the hospital when stable.
- You may resume your usual diet after 6 hours.
- The use and time duration of the drainage bag will be determined by your doctor. Take care of the bag and the stitches. They should not be pulled out.

Are there any risks or complications associated with the procedure?

PCN is a relatively safe procedure, but carries the following risks:

- You may have pain at the site of the incision or in the abdomen. This pain can be relieved by painkillers.
- There is a small risk of getting an infection. To reduce the risk, antibiotics are given before the procedure and continued after it.
- There is also a small risk of bleeding. For this reason, your ability to clot is checked before the
 procedure. While blood-stained urine in the drainage bag is normal, it should clear up in 24 to 48
 hours.
- Inform your doctor immediately if you experience severe shivering and lethargy or if there is continuous fresh bleeding through the tube.
- Inform your doctor if the tube stops draining.

Please discuss any concerns you may have about the procedure with your doctor.

Please contact your doctor if you have any signs of an allergic reaction which include itching, redness, difficulty breathing, swelling or dizziness.





How do I schedule an appointment?

Contact the Radiology department reception between Monday and Saturday from 8:30 am to 5:15 pm, except on public holidays.

How can I get my radiology films and reports?

Reports and films can be collected 24 hours after the procedure from the Radiology delivery counter from 8:30 am to 8:30 pm.

Please note the following:

- Bring your doctor's prescription and previous medical/radiology record on the day of procedure.
- Arrive 15 minutes before the scheduled time for registration and other formalities. Late arrival may lead to delay/rescheduling of your examination.
- Patients requiring urgent care may be given priority. This may result in a delay in starting your procedure. Your cooperation in this regard would be highly appreciated.
- If you are pregnant or if there is a chance you might be pregnant, inform your doctor before the procedure. Your doctor may reschedule or cancel the examination.
- It is advisable to bring an attendant with you.
- If you have any queries please contact us at 021-111-911-911.

