Problem:
Percutaneously placed nephrostomy catheters are utilized in the oncology setting as a temporary, permanent, or palliative procedure to decompress the kidney and alleviate hydrenephrosis related to renal compression or urine outflow obstruction. Wide variance in care and patient education was noted within the institution regarding the nephrostomy catheter care and patient education.

Evidence:
A search of online databases CINAHL, PubMed, and MEDLINE was conducted utilizing the terms: percutaneous tubes/catheters, dressings/bandages, nephrostomy tube/catheter, patient education, guidelines, and catheter care. The Oncology Nursing Society, Wound, Ostomy, and Continence Nurses Society, Centers for Disease Control and Prevention, National Cancer Institute, and the National Guideline Clearinghouse were contacted regarding published standards or guidelines for nephrostomy catheter care. Results of the database searches and contact with the afore mentioned entities revealed an absence of research and evidenced based practice, a wide variance in practice patterns, and reliance on anecdotal information. This multi-variant practice pattern results in non-standardize care and education within institutions and the community.

Strategy:
To assist in discerning care and education patterns on a medical oncology unit, a survey was distributed. Thirty nine nurses were survey, twenty responded for a 51% response rate. For dressing changes 85% used clean gloves; 80% clean technique. Wide variance was noted in the agent used to clean the insertion site. Dressings were changed from once a week to daily utilizing different dressings.

Practice Change:
Based on the survey and literature synthesis, care guidelines will be developed and assessed for patient safety and appropriateness for practice to be piloted on a 32 bed inpatient solid tumor, medical oncology unit.

Recommendation:
The ultimate goal is to develop standardized institutional guidelines for nephrostomy catheter care based on evidence.

Bibliography:

