PATIENT INSTRUCTIONS FOR
DISCHARGE AND CATHETER CARE

You have had a tube placed in the □ bile duct/ liver.
□ kidney.
□ other _______________

You will need to flush the tube □ once □ twice daily.
□ Do not flush this tube.

TUBE CARE

Wash your hands before you begin.

TO FLUSH:
1. Disconnect the tube from the drainage bag or cap. Do not discard this. Some fluid may leak from the tube, so you may want to place a gauze pad under the tube.
2. Insert the syringe into the catheter hub. Inject the saline. DO NOT DRAW BACK ON THE SYRINGE.
3. Remove and discard the syringe. DO NOT REUSE. Replace the cap or drainage bag.

TO CHANGE THE DRESSING:
1. The dressing should only be changed if it is completely soaked or soiled. If it is clean and dry, it can be left in place.
2. Carefully peel back the old dressing while holding the catheter in place with the other hand.
3. Take a Qtip or 4 x 4 gauze moistened with hydrogen peroxide, and clean around the tube insertion site and the sutures (which help to hold the catheter in place).
4. Place a clean dry gauze over the insertion site, and cover the area with Tegaderm or other medical dressing adhesive.

CONTACT
There is continued leaking around the tube.
There is pus or bloody drainage from the tube.
There is increased skin redness.
The tube becomes damaged, cracked, or blocked so that it cannot drain or be flushed.
You have unrelieved or increased pain in the area of the tube.
You have a fever with temperature > 101.

RADIOLOGY IF

FOR DISCHARGE
Activity: No heavy lifting or excessive stair use for ___________, then as tolerated.
Diet: □ Resume your regular diet.
□ Other _________________.
Medications: _____________________________
Follow Up Instructions: See Dr. ____________ in ____________.

CONTACT NUMBERS
□ Evenings 5p- 9a and Weekends: 202.
□ 202:
[Ask the Page Operator to contact/page the Radiology Resident On Call.]

MD SIGNATURE ______________________ DATE ____________

POST-INTERVENTIONAL
RADIology PROCEDURE
PATIENT DISCHARGE
INSTRUCTIONS