

D-180 Care of Urinary Diversion Device

Urinary diversions are surgical procedures performed to provide an alternate pathway for the flow of urine to correct obstructions of the renal system caused by tumors, trauma or congenital malformations. There are several types of urinary diversion procedures including suprapubic, cutaneous ureterostomy, ileal conduit and continent ileal bladder conduit

Cutaneous ureterostomy is created by excising the ureters from the bladder and forming a stoma by bringing one or both of the ureters to the abdominal surface. Because of continuous urinary drainage, the client must wear an appliance

Ileal Conduit: surgically created by taking a small section of the small intestine and forming a pouch with a stomal opening on the abdominal surface. Ureters are disconnected from the bladder and redirected to drain into the stoma. Carries a high potential of reflux and an appliance must be worn

Continent Ileal Conduit is surgically created by forming a pouch with intussuscepting tissue that forms nipple valves to prevent reflux and leakage. While an appliance is not needed, the client must perform intermittent self catheterization every 24 hours.

Purpose

Maintain adequate flow of urine.

Identify presence of infection or irritation at site.

Applies To

Registered Nurses

Licensed Practical/Vocational Nurses

Other (*Identify*): _____

Equipment/Supplies

- Appropriate appliance and sealant/paste.
- Scissors.
- Towel and washcloth.
- Gloves.
- Clamp.
- Drainage container.
- Tape.
- Gauze dressings.

For continent diversion:

- Sterile gloves.
- Antiseptic ointment if ordered.
- Catheter and drainage container.

Procedure

1. Wash hands. Refer to Hand Washing procedure.
2. Gather equipment.
3. Explain the procedure to client.
- 4. Continent urinary diversion.**
 - a. Put on gloves and remove old dressing.
 - b. Cleanse stoma site using gauze soaked in normal saline or antiseptic solution.
 - c. Insert catheter into stoma 2-2.5 inches and allow urine to drain into container.
 - d. Cleanse around stoma with soap and water.
 - e. Apply dressing.
- 5. Incontinent urinary diversion.**
 - a. Cut pouch opening to size.
 - b. Remove adhesive backing put on gloves.
 - c. Remove old pouch.
 - d. Cleanse stoma site with soap and water.
 - e. Apply skin barriers or adhesives, then pouch over the stoma.
 - f. Empty contents of old pouch and measure drainage.
 - g. Rinse pouch with tap water.
 - h. Wash hands.

Documentation Guidelines

1. Document in the clinical record:
 - a. Condition of stoma site.
 - b. Characteristics of urinary drainage.
 - c. Client tolerance of procedure.
 - d. Teaching done and return demonstrations.
 - e. Any problems and interventions to correct.

Related Procedures

None

Policy History

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Approved By	Herman Pippin, Sandra Hill
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