

### **Protocol: Suprapubic tube placement**

Suprapubic tube placement will be performed under combined US and fluoroscopic guidance. Iodinated contrast is also utilized to confirm proper positioning both before and after placement.

#### **Room Set Up**

Nurses to set up room as per standard practice. Masks and sterile technique will be used during tray preparation.

Tray set up will include:

- Sterile prep drape and chloro-prep
- Iodinated contrast (1 container)
- Normal Saline
- Lidocaine 1% (buffered if available)
- Accustick (or Aprima set) or 18 g trocar needle – physician preference
- 6 and 8 F dilators
- Amplatz Super stiff wire (80cm)
- Nephrostomy tube(s) (usually 8 or 10 F)
- 2-0 Silk or Prolene suture

#### **Pre-procedure**

Prior to the onset of the procedure, the appropriate consent form will be signed and witnessed.

The patient's identity and correct procedure as well as any pertinent history including allergies, anticoagulants and labs will be reviewed immediately prior to the procedure.

Preprocedure IV antibiotics will be administered as per department guidelines. Patient will be offered either oral dose of Valium 10 mg or IV sedation, if they have no contraindications.

## **Procedure**

The procedure will be performed using US and fluoroscopic guidance. Radiologist performs puncture of the urinary bladder. Contrast is injected to confirm. A wire is advanced into the bladder and following dilation a drainage catheter is placed.

Contrast is injected to confirm new tube positioning. The tube is sutured in place and connected to gravity drainage.

## **Post procedure**

The appropriate dressing will be applied by the nurses according to standard practice.

The patient will be observed following the biopsy and will be monitored by the nursing staff. The recovery period will be **30 minutes**, during which vital signs will be obtained 15 minutes x 2, anything longer should be pre-determined by the performing physician.