

WHAT WILL HAPPEN DURING THE PROCEDURE?

You will be taken to our procedure room where you will be placed on the x-ray table. You will be attached to a machine that will help us monitor your blood pressure, heart rate, and oxygen level. A blue tinted soap called Chlorhexadine will be used to wash your skin where the tube will be inserted. Lidocaine (a medication similar to what a dentist uses to numb your mouth) will be injected to numb your skin and deeper tissues. It will sting or burn for a few seconds then becomes numb.

A nurse will be with you during the whole procedure. He or she will give you medications to help you relax and to reduce your pain. You will feel relaxed but will need to be awake enough to talk and follow commands.

After your skin is numb, a needle will be inserted through your skin into the liver. An ultrasound machine may be used to help guide the needle. The interventional radiologist will use x-rays and x-ray contrast to locate your bile ducts. The biliary catheter (tube) will then be inserted into the bile duct. You may feel some pressure and discomfort when the tube is inserted.

The biliary catheter site (the area where the catheter exits the skin) will be covered with a dressing. The catheter will be connected to a drainage bag. Bile will flow through the catheter into the bag. The bile fluid may be a little bloody or may be dark green in color at first. The blood or discoloration usually clears after a few days.

WHAT WILL HAPPEN AFTER THE PROCEDURE?

You will be taken to our recovery room. Your vital signs will be monitored frequently for the first few hours. When you have recovered from the procedure, you will be taken upstairs to your assigned room. This room will be where you spend the night. The amount of time spent in the hospital varies from person to person.

Before you are discharged, a nurse from Interventional Radiology will give you and your family instructions on how to care for your tube. Your tube may be capped or it may be attached to a drainage bag. A prescription will be given to you for dressing supplies. You can purchase supplies at your local pharmacy or medical supply store.

HOW LONG WILL I NEED THE BILIARY CATHETER?

The answer to this depends upon the reason you needed the catheter.

- If you have a blockage of the bile duct from stones, infection, scar tissue or tumor, you will need the tube as long as the blockage is present.
- If you have a hole in the bile duct, you will need the tube as long as you have the hole.
- In preparation for bile duct surgery, you will need the tube for several days to months afterwards, depending upon what is found in the surgery.

Your doctors will discuss with you how long you are likely to need the tube. The doctor who sent you to get the tube will ultimately be the doctor to decide when it can be removed.

APPOINTMENTS

Your tube will need to be checked and changed every 4-8 weeks, depending on your doctor's orders. The tube is changed to prevent infection and to keep open the path from your liver. An Interventional Radiology nurse will call you the day before your scheduled appointment to review instructions for your appointment.

If you are unable to make your appointment or will be late, please call (434)924-9401 to let us know.

To prepare for your appointment:

- Please do not eat any foods 4 hours before you are scheduled to come in.
- You may drink clear liquids (water, juice, coffee with no cream) up to 2 hours before your scheduled procedure.
- Take your usual medications before your appointment unless you are diabetic.
- If you are diabetic, do not take any pills that control your sugar (Glucophage, Metformin). If you take insulin, take ½ of your regular dose. We will check your sugar before the procedure.
- If you use a machine (BI-Pap or C-Pap) at night to help you breath, bring your machine.

If you have questions or concerns about biliary tube, write them down and call the UVa Interventional Radiology Department. One of the doctors or nurses will answer them for you.

Please call the following numbers:

Daytime: (7:00 a.m. - 5:00 p.m.)
Monday - Friday:
434-924-9401

Other times or on weekends and holidays:
434-924-9400.

Ask for the Interventional
Radiology Fellow on call.

Toll Free Number: 1-800-251-3627

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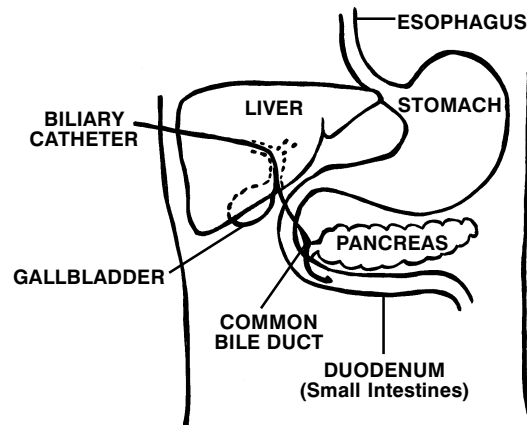
**Biliary
Drainage
Catheter
Information**



BILIARY DRAINAGE CATHETER

WHAT IS A BILIARY DRAINAGE CATHETER?

Bile is a thick fluid produced in the liver and stored in the gallbladder. It is usually golden yellow or green in color. The common bile duct is the path for bile to flow from the liver and gallbladder to the small intestine or bowel (also referred to as the duodenum).



A biliary catheter is a small flexible plastic tube placed through the skin into liver and bile ducts. If possible it is advanced to the duodenum.

The catheter (tube) can drain bile either down to your intestines or to a bag outside your body.

WHY DO I NEED A BILIARY DRAINAGE CATHETER?

- You may have a blockage of the bile ducts, causing the bile to back up into your liver.
- There may be a hole in the bile duct causing it to leak.
- You may need to prepare for surgery or for some other procedure on your bile ducts, such as removal of a stone or a tumor.

HOW DO I PREPARE FOR THE PROCEDURE?

If you are already a patient in the hospital, your doctors and nurses will provide you with instructions.

If you are coming to Interventional Radiology (IR) from home, plan to be admitted to the hospital after this procedure. A nurse from IR will call you the day before your procedure to give you instructions and answer questions. He or she will review your medical history and review the following instructions:

- Eat no food within 4 hours of your appointment time. You may have clear liquids (water, tea, coffee without cream, etc.) to drink up to 2 hours before your appointment time.
- Bring all medications with you on the day of the procedure.
- Please arrange to have someone bring you to the hospital and drive you home when you are discharged.

If you are diabetic: Please tell the nurse.

- Do not take any of the pills that control your sugar the morning of your procedure
- If you take the diabetic medication Metformin, (trade names: Glucophage, Glumetza, Riomet, ACTOplus met, Avandamet) stop taking it two days before your procedure. Please consult with your physician about control of your glucose levels during this time before your procedure.
- Please bring any of these pills with you to your appointment.
- Do not take any fast acting insulin the morning of your procedure (Regular, Humalog).
- If you use another type of insulin (NPH, Glargine, or Lantus) to control your sugar, take ½ of your normal morning dose.

If you have any Allergies: Please tell the nurse.

- If you are allergic to X-ray or Contrast Dye please let us know. We may need to call your pharmacy and arrange for you to have medication before arriving for your procedure.

If you have trouble breathing: Please tell the nurse.

- If you wear a machine at night (Bi-Pap or C-pap) to help you breathe please bring your machine.
- You will be asked to lie flat, on your back during the procedure. If you think this will be a problem please let us know.

WHAT WILL HAPPEN BEFORE THE PROCEDURE?

You will need to come to the Interventional Radiology (IR) Department. We are on the first floor of the Main Hospital. You can get directions at the Information Desk in the hospital lobby. We are in the back of the Main Radiology Department. Someone in the lobby can assist you with a wheelchair, if needed.

1. When you arrive you will be taken to a recovery room. You will be asked to remove all your clothing (including undergarments) and put on a hospital gown. You will be asked to remove all jewelry, including watches. If possible you should leave these items and any other valuables at home. You may be asked to remove your dentures and/or eyeglasses.
2. Two adult family members are allowed to wait in the room with you. Any other family will be asked to wait in the waiting area.
3. A nurse and a nurse practitioner or doctor will talk with you about the procedure. They will explain the procedure, review your medical information and answer any questions. The nurse practitioner or doctor will ask you to sign a piece of paper giving your permission to perform the procedure.
4. We will start an IV to give you fluids, antibiotics, and other medications. We will draw blood if any lab or blood tests are needed before the procedure.
5. We will place medication on your back. This medication will help protect your liver and skin from the radiation used during X-ray. The medication is cold and has an odor.