Bedside methylene blue 'nephrostogram'**S Pridgeon**

University College London Hospitals NHS Foundation Trust, UK

CORRESPONDENCE TO**Simon Pridgeon**, E: pridge40@hotmail.com**BACKGROUND**

Nephrostomy tubes are used routinely to drain an obstructed kidney or to ensure drainage after renal surgery. Radiological nephrostograms are the gold standard for investigating ureteric obstruction or demonstrating antegrade flow prior to nephrostomy removal. A simple bedside test can be used as a crude indicator of ongoing obstruction or to confirm ureteric patency.

TECHNIQUE

5ml of methylene blue is diluted in 40ml of normal saline and instilled slowly into the nephrostomy tube (Fig 1). If antegrade ureteric flow is unobstructed, methylene blue will be seen in a catheter bag within a minute of instillation (Fig 2). Leak of methylene blue will be observed if obstruction is present (Fig 3).

DISCUSSION

This technique is a useful and quick method to demonstrate unobstructed antegrade urine flow. It can be used after an uncomplicated percutaneous nephrolithotomy prior to nephrostomy removal or to investigate a nephrostomy that has stopped draining. However, if anatomical information is required, then a formal radiological nephrostogram remains the preferred investigation.

Figure 2 Methylene blue in catheter bag showing antegrade ureteric flow is unobstructed

Figure 1 Methylene blue instilled into the nephrostomy tube

Figure 3 Leak of methylene blue showing obstruction is present