

NAME OF THE HOSPITAL: \_\_\_\_\_

11). Nephrostomy Tube And Nephroureteral Stent Placement: M15W1.16

1. Name of the Procedure: Nephrostomy Tube And Nephroureteral Stent Placement

2. Indications: Select indication which is applicable

Urinary tract obstruction caused by intrinsic or extrinsic ureteral obstruction related to stones, malignancies or iatrogenic causes/ Pyonephrosis or infected hydronephrosis/ Urinary Leakage or fistulas/ Removal of selected renal or ureteral calculi/ Ureteral stent placement when the retrograde approach is unsuccessful or not feasible/ To deliver medications or chemotherapy into the collecting system, as for treatment of fungus balls, bacillus Calmette Guerin vaccine instillation for upper tract transitional cell carcinomas, or chemolysis for dissolution of renal or ureteral calculi/ Foreign body retrieval; eg, fractured or proximally migrated ureteral stents/ Urinary diversion for hemorrhagic cystitis

3. Does the patient presented with oliguria or anuria, fever: Yes/No

4. If the answer to question 3 is Yes then are the following tests being done- Coagulation profile (PT INR, platelet count), Serum creatinine, USG/CT: Yes/No (Upload reports)

5. If the answer to question 4 is Yes, then is the patient having evidence of Uncorrectable Coagulopathy: Yes/No

For Eligibility for Nephrostomy Tube And Nephroureteral Stent Placement the answer to question 5 must be No

I hereby declare that the above furnished information is true to the best of my knowledge.

Treating Doctor Signature with Stamp

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