

# **Catheter Passport**

Care of your indwelling urinary catheter in partnership with your nurses

## **Catheterisation details**

	Name	
	Address	
Patient		
Pat		
	Postcode	
	Tel No.	
	NHS No.	
nity	Community Nurse Team	
Community Nurse	In Working Hours Tel No.	
Cod	Out of Hours Tel No.	
GР	GP Practice	
G	GP Tel No.	
	Name	
<u>.</u> .	Service	
Other Contact Numbers	Tel No.	
er Cc umb	Comments	
Oth.		

## For use by Health Care professionals only

Date catheterised:						
Reason for cathete	on (plea	se circle	9):			
Retention Surgi	cal	Trauma	Pallia	ative	Incontin	ence Other
Details:						
Residual urine volu	me:					
Any difficulties during the catheterisation procedure?						
Insert catheter stic	ker o	r compl	ete the l	oelow	:	
Type of Catheter (Long 1		Term or	Short Te	erm)		
Expiry Date:		Size:		Bato	h No.	
Urine Drainage system in use: Leg bag/Bed bag/Valve						
Type of stabilisation device used:						
Date of next planned catheter change:						
Signature:						
Print Name:						
Job Title:						
Contact Telephone No.						

## For use by Health Care professionals only

How often should your catheter be changed?	
Can it be changed in the community? (if not give contact details on P1 of who/where to contact)	Yes No
Comments:	
Ongoing plan/notes for catheterisation:	

## Why do I need a urinary catheter?

Many people need to be catheterised at some stage in their lives, perhaps following an operation or because of a medical condition. Urinary Catheterisation is the technique which drains urine from the bladder.

#### What is a catheter?

A Foley catheter is a hollow flexible tube, which drains urine from your bladder. The catheter reaches the bladder either by passing through the urethra, or through a channel made in the abdominal wall, just above the pubic bone (suprapubic catheterisation).

Once the catheter is in place a small balloon at the catheter tip is inflated inside the bladder to prevent the catheter falling out. As urine fills the bladder it drains down the catheter into a drainage bag or catheter valve. You should not need to pass urine in the usual way when you have a catheter in place.

# What are the risks of having an indwelling urinary catheter?

An infection can occur within a few days of catheterisation often without any symptoms and bacterial levels increase as long as the catheter remains in place.

Up to 50% of patients who are catheterised for longer than 7-10 days develop bacteriuria and of these, 2 - 6% will develop symptoms of a urinary tract infection.

## How can I reduce the risk of getting an infection?

- Wash your hands before and after you touch your catheter.
- Do not remove the catheter bag/valves unnecessarily i.e. when you have a bath or shower
- Avoid the use of talcum powder, perfumed soaps and lotions around the catheter site
- Wash the skin area where the catheter enters the body with mild soap and water at least once a day.
- Unless there is a medical reason you should not do so, drink 11/2 - 2 litres of fluid a day. Avoid caffeine (reduce gradually if drinking large amounts of caffeine) as this can irritate the bladder.

# Hand washing techniques before and after touching your catheter



## What types of catheter drainage systems are there?

Use towel to turn of faucet

...and your hands are safe

Dry thoroughly with

a single use towel

There are many different types of drainage systems to use with an indwelling catheter, including catheter valves and drainage bags.

#### Catheter valves

Rinse hands with water

The catheter valve is a tap-like device, which fits on to the end of the catheter tube (urethral or supra-pubic). The valve can be used whether the catheter is a temporary or permanent arrangement. The bladder is now able to store urine and can be emptied intermittently by releasing the tap on the valve, thus helping to maintain the normal function of the bladder.



The catheter valve is more comfortable and discreet compared to a leg bag. It may also reduce the risk of infections and blockages as it allows intermittent flushing of the catheter with urine when you drain the bladder.

If the catheter is to be used for a short period of time, a catheter valve will help maintain bladder's capacity and function.

## How do you use a catheter valve?

The catheter valve should be opened to drain urine when the bladder feels comfortably full or approximately every 3-4 hours during the day as well as before opening your bowels. The aim is to empty a volume around 350mls to 500mls, an average bladder capacity. If the volume of urine drained is below 200mls, reduce the number of times the valve is opened to encourage a larger bladder volume to be emptied. If the volume that is drained is over 500mls then increase the amount of times in the day the bladder is emptied. Urine drainage via the valve can be emptied directly into the toilet or suitable container.

Should you experience discomfort or any leakage down the sides of the catheter, try draining the urine more often.

#### How do I wear the catheter valve?

The catheter valve will tuck nicely into your underwear; alternatively the valve can be supported on to the upper thigh with a catheter fixation strap which can be supplied by the nurse managing your catheter care.

The catheter valve can also be used with a bed bag at night or with a leg bag during the day if toilet access is likely to be a problem.

## How often should the catheter valve be changed

The catheter valve drainage bags should be changed every five to seven days or earlier if it is damaged. You should seek advice, support and training by a health care professional, such as your community nurse, before you attempt to change the catheter valve. If this procedure is not performed correctly, then it could increase the risk of an infection. Always wash your hands before handling the catheter valve. Drain the bladder first, then remove the old catheter valve and replace it immediately with a new one. Avoid handling the section of the valve which is inserted into the catheter to prevent introduction of an infection. Place the old catheter valve into a plastic bag before disposing of it into the household rubbish. Wash your hands again after changing the valve. Valves should be emptied every 3 hours during the day as well as before opening your bowels.

#### How do drainage bags work?

There are two types:

- A leg bag
- A bed bag or overnight bag This is used at night. The bed bag is larger than the leg bag and is connected to the bottom of the leg bag or valve to collect the urine, which drains from the bladder overnight. This is known as the link system.
   Remember, you must open the leg bag valve or catheter valve to allow drainage and when the bed bag needs to be removed, close the valves to prevent any accidental leakages.

## How do I wear a leg bag?

A leg bag can be attached to the thigh or calf with a pair of leg bag straps, or worn inside a special leg bag holder against the leg. Leg bags come in different sizes with different tube lengths. The health care professional/community nurse will help you to choose the one that suits you best. As the leg bag fills, it becomes heavy. Do not allow the bag to become too full.





#### How often should the leg bag be changed?

The leg bag should be changed every five to seven days or earlier if it is damaged.

#### How do I empty the drainage bag?

- Empty the leg bag when it is two-thirds full of urine
- Wash your hands thoroughly
- Open the tap at the bottom of the bag and drain the bag into a toilet or suitable container
- Close the tap after you have drained the bag
- Wash your hands again.

#### What happens at night?

At night, connect the bed bag to the bottom of the leg bag and open the tap of the leg bag to allow urine to drain freely into the bed bag. Support the bed bag on a stand, which should be supplied with your catheter supplies, or hanger and always keep the bed bag down lower than your bladder, because urine cannot drain up hill. Do not allow the bed bag to lie directly on the floor. Remember to check that the bed bag tap is closed.

The following morning, close the tap on the leg bag and remove the bed bag. The bed bag should then be emptied, rinsed through with water and left to dry ready for the following night.

If you are a patient in a hospital or a communal living environment, the bed bag should be only used once and thrown away in a clinical waste bin.

## How should the drainage bags be disposed of?

Both the leg and bed bags should be emptied and placed into a plastic bag before disposing of it into the household rubbish.

## Other tips on how to make living with a catheter easier

When you have an indwelling catheter, you might have the feeling that you need to pass urine, or may experience a bladder spasm or abdominal cramp. This usually stops and is nothing to worry about. If this problem persists, contact your healthcare professional who may be able to offer further advice/medication.

You may experience a slight urine leak around the outside of the catheter as a result of a bladder spasm or cramp, known as bypassing. It is not an emergency, provided the catheter is draining. However, you should notify your nurse when you next see them.

#### Personal hygiene

Wash the area where the catheter enters your body with mild soap and warm water at least once a day. Dry thoroughly and never use talcum powder or ointments around the catheter, as some ointments can actually damage the catheter.

## How can I prevent the catheter from pulling?

Ensure you use a catheter fixation device. These devices are used to fix the catheter to your thigh to hold the catheter securely. The devices should be used to reduce the risk of catheter/urine infections and prevent the catheter from being pulled, which could cause you urethral trauma. Common forms of fixation devices are adhesive clips or Velcro straps. All indwelling catheters should have a fixation method. If you do not have a fixation device attached to your catheter, please speak to the nurse managing your care.

## Can I have sex with an indwelling urethral catheter?

Intercourse is usually possible with a urethral catheter for both men and women.

Men can tape the catheter along the shaft of the penis and secure it in place with a condom. Women can tape the catheter up onto the abdomen. The drainage bag should always be emptied before sexual activity and both partners should wash their genital area thoroughly. It helps to use plenty of water-based lubrication, such as K-Y® jelly (but not Vaseline®).

A supra-pubic catheter may make sexual intercourse easier.

## **Problem Solving - Infection Risk**

#### How can I reduce the risk of getting an infection?

- Wash your hands before and after you touch your catheter.
- Do not remove the catheter bag/valves unnecessarily i.e. when you

#### have a bath or shower

- Avoid the use of talcum powder, perfumed soaps and lotions around the catheter site
- Wash the skin area where the catheter enters the body with mild soap and water at least once a day.

#### What are the symptoms of a catheter urine infection? (CAUTI)

- A high temperature above 38.3C
- Pains in the loin (kidney area)
- A general sense of feeling unwell.

If you are experiencing any of these symptoms, contact your health care practitioner/community nurse.

## **Problem Solving - Bypassing**

Urine leaking from around the catheter:

- Constipation- increase fluid and dietry intake
- If you are drinking caffeinated and citrus drnks they could irritate
  the bladdera nd cause spasm. Change slowly to decaffeinated
  and non-citrus drinks.
- Make sure the catheter tubing is secured and not kinked
- May indicate presence of UTI
- Discuss problems with nurse or GP. If, after following all the advice the problem continues.

#### **Problem Solving - Blockage**

Urine not draining causing discomfort in your abdomen:

- Check your catheter tubing is not kincked
- Check clothing and support system is not restricting the flow of urine
- Check not contipated as this can obstruct the catheter from draining. - increase fluid and dietry intake
- Check the colour of urine for signs of dehydtartion (should be a pale yellow colour.

## **Problem Solving - Pain**

- Check that your catheter and drainage system are adequately secured
- Check that the catheter and tubing is not kinked or that you are not sitting on the tubing
- For men, check that the foreskin is in the correct position and not swollen
- Observe for any redness / inflammation or pus / discharge at entry site
- Inform your doctor/nurse of any pain experienced with your catheter.

## Problem solving - Common catheter related problems

If no urine is draining into your bag or urine is leaking around the catheter:

- Check the catheter tubing is not kinked or blocked
- Check the drainage bag is below bladder level

- Check the drainage bag is connected correctly and does not need emptying
- Make sure you are drinking enough fluids
- Make sure you are not constipated.

#### When to call for help

Help should be sought if any of the following occurs:

- The catheter is not draining, despite trying the problem solving advice
- There is no urine in the bag after four to five hours, or you start experiencing bladder discomfort
- The catheter has fallen out
- Urine keeps leaking around the catheter, despite trying the problem solving advice
- The urine is cloudy, smelly or feels as if it is burning, and does not improve after drinking more fluids
- Any sudden or persistent lower abdominal pain is experienced
- If heavy, thick or clotted blood appears in the drainage bag. Light blood stained urine is very common and is not considered to be a medical problem.

#### **Contact information**

If you require further information on catheter care during office hours you can contact your health care practitioner/ community nurse. Contact your GP if out of office hours or NHS111.

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BATCH NUMBER	Sticker Here
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