You and your catheter

What is a catheter?
A catheter is a fine tube placed in your bladder to drain urine. Your doctor will have explained why you have a catheter in place, which may be for one of the following reasons:

- An inability to pass urine.
- To allow healing after urology surgery.
- To manage urinary incontinence.
- To allow bladder function tests.

The catheter has been put into your bladder through your urethra or outlet, or directly into your stomach or above the pubic area. It is held in place by a balloon filled with water, and it will not fall out in normal use.

Most catheters can be left in place for 12 weeks. Your doctor or nurse will tell you when your catheter is due to be changed.

During the day – the leg bag
The catheter is attached to a drainage bag or leg bag, and your urine drains directly into this bag. It's held in place with leg straps. The bag may come in two lengths so that you can wear it on your calf or your thigh.

You must wear the leg bag at all times and only remove it when a new bag is fitted. The leg bag is changed every two weeks.

Emptying the bag
- To empty the bag, use the drainage tap at the bottom of the bag.
- Empty the bag every three to four hours or before it becomes over-full.

Note: Always keep the drainage bag lower than your bladder.

Changing the leg bag
Follow these instructions to change the leg bag on your catheter every two weeks, or if the leg bag gets damaged.

Note: The catheter and leg bag should only ever be disconnected at the time of the bag change.
1) Wash and dry your hands.
2) Put a towel on your lap between your body and the catheter, and have your replacement leg bag next to you within easy reach.
3) Pinch off the end of the catheter (see right).
4) Pull out the fluted end of the leg bag tubing from the catheter outlet (see left).
5) Take off the protective cap from the new bag and firmly insert the fluted end into the catheter outlet (see right).
6) Use the straps provided to secure the leg bag to your leg.
7) Put the old leg bag in the rubbish.
8) Wash and dry your hands.

**Catheter valves**

You may have a catheter valve instead of a leg bag. This is attached directly to the catheter and the urine stays in your bladder until the valve or tip is released.

The valve is changed every seven days, and you need to open the valve every three to four hours or when your bladder feels full.

**At night – the night bag**

At night, you will wear a larger bag called a night bag. This is attached to the **bottom outlet of the leg bag or catheter valve**. You must still wear the leg bag or catheter valve at all times.

The night bag has more capacity and longer tubing, which will let you move around more in bed. If you are at home, you can reuse the night bag, and it will be replaced every week.

**Fitting the night bag:**

1) Take off the coloured cap from the end of the night bag tubing.
2) Connect the tip at the end of the night bag tubing into the bottom outlet of the leg bag.
3) Open the outlet tap on the leg bag, so that urine can run into the night bag.
4) Put the night bag into a container, to catch any leakage in case the night bag is faulty or the outlet is not closed properly. Make sure the night bag is kept lower than your bed, as this helps with drainage.

**In the morning:**

1) Close the leg bag outlet.
2) Remove the tip of the night bag tubing from the outlet of the leg bag or catheter valve.
3) Empty the night bag contents into the toilet or a suitable container, using the drainage tap at the bottom of the bag.
4) If you are at home, you can wash and dry the night bag with warm soapy water and then hang it up to dry. When the night bag is dry, store it in a clean sealed plastic bag.
How to keep your catheter working properly

*Never try to remove the catheter without getting medical or nursing advice, as you may hurt yourself.*

- **Always wash your hands** before and after touching your catheter or drainage bags.
- Drink at least eight glasses or cups of fluid every 24 hours. This is about one cup of fluid every hour that you are awake.
- Avoid getting constipated, as this can affect catheter drainage. Ask your nurse for help or advice if this is a problem.
- Where possible, take regular exercise.
- Avoid bending or kinking the catheter tubing.
- If you use an electric blanket, put a protective sheet between the electric blanket and your normal sheet, in case of leakage.
- **Always have spare catheters and related equipment** close by, ready for the next change.

**Personal hygiene**

- Wash the area around your bladder outlet and catheter every day.
  - **Women** should wash from the urethra and catheter towards the back passage.
  - **Uncircumcised men** should pull their foreskin back up over the tip of the penis after washing.
- It's better to have a shower than a bath.
  - While washing, **leave your bag in place**.
  - Use unscented soap and warm water, and rinse the soap off well to avoid irritation.
- Use a soft towel to dry all around the area, including the leg bag and straps.
- Don't use talcum powder or any creams around this area, unless prescribed by your doctor.

**When having sexual intercourse**

- Both partners should wash the genital area before and after intercourse.
- Women can tape the catheter forward onto the abdomen, out of the way.
- Men can fold the catheter tubing down over the erect penis, apply a condom, and tape it in place.
- Use plenty of water-soluble lubricant, for example, KY Jelly. Don't use vaseline as it is not water-soluble.
- Avoid very rough intercourse. You may find you need to try new positions to make it more comfortable for the person with the catheter.
- If your catheter is causing you problems during sexual intercourse, discuss this with your doctor or nurse.

**Problem solving**

For most people, managing a catheter at home is straightforward. However, there are some minor problems which might affect you.

Get treatment if you experience fever, loin pain, significant blood in your urine, or unexplained sudden onset of confusion.
## You and your catheter

<table>
<thead>
<tr>
<th>Problem</th>
<th>Cause</th>
<th>Signs</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urinary infection</td>
<td>Bacterial contamination.</td>
<td>Smelly, cloudy urine.</td>
<td>Drink more fluids. Try drinking a glass of cranberry juice every day as a preventative measure. The catheter must be changed 24 hours after starting antibiotics.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Urine bypassing the catheter and leaking around the catheter.</td>
<td>Contact your GP who may take a urine sample and prescribe antibiotics.</td>
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<tr>
<td></td>
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<td>Abdominal pain.</td>
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<tr>
<td></td>
<td></td>
<td>Bleeding.</td>
<td></td>
</tr>
<tr>
<td>No urine in the bag for several hours</td>
<td>The tubing could be kinked or bent.</td>
<td>Very little or no urine is passing into the bag.</td>
<td>Check that the tubing is not kinked or bent (and fix it). Try moving or walking around, which may dislodge a blockage. If after four hours or longer, no urine passes, contact your GP or nurse.</td>
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<tr>
<td></td>
<td>The bag is above your bladder level.</td>
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<td>You have not been drinking enough.</td>
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<td></td>
<td>Constipation.</td>
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<td></td>
<td>Debris is blocking the catheter.</td>
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<tr>
<td>Bleeding</td>
<td>Bladder or urethra irritation by the catheter, or an infection.</td>
<td>Blood in your urine or around the catheter.</td>
<td>Drink more fluids. If the bleeding continues, or is still heavy after two days, contact your GP. They may take a urine sample and prescribe a course of antibiotics.</td>
</tr>
<tr>
<td>Bladders spasm or leakage around the catheter</td>
<td>The bladder may be irritated by the catheter and may attempt to get rid of it. This forces urine around the catheter causing pain and leakage.</td>
<td>Lower abdominal pain. Leakage of urine. Less urine in the catheter bag.</td>
<td>Take regular four-hourly paracetamol (for example, Panadol) while you are feeling pain. Take regular Oxybutynin (anti-spasmodic) tablets to relax the bladder (as prescribed by your doctor). If the pain persists, contact your GP or nurse.</td>
</tr>
<tr>
<td>Catheter falling out or leaking</td>
<td>Faulty balloon or damaged catheter.</td>
<td></td>
<td>If you can still pass urine, call your nurse during office hours. If you cannot pass urine, and your bladder is painful, get immediate help from your GP.</td>
</tr>
<tr>
<td></td>
<td>Bladder spasm.</td>
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</tbody>
</table>
Follow-up care

- If your catheter is to remain in permanently, it will need to be replaced regularly, as determined by medical or nursing advice. Your district nurse or GP will be responsible for making this decision.
- If your catheter is to remain in place until surgery, you will receive a notification of your admission date by mail.
- If you need to have the catheter removed, you can arrange this with your GP or specialist.
- If you are having an appointment for a Trial of Void (TOV), the length of time you will need to stay and the success or failure of your trial of voiding cannot be predicted. Be prepared to drink plenty of fluid during the day.
- Contact your GP if you need advice or further care.

On discharge from hospital

The nurse will give you:

- A letter for your GP with details of your hospital admission and follow-up care including date for change of catheter if required.
- One leg bag and night bag.
- An appointment card, if returning for catheter removal and a trial of passing urine or a trial of voiding (TOV).

Supplies

If you need to use a catheter for a long time, your district nurse will arrange for you to get supplies. If you need to collect catheter supplies, you can pick them up from:

- Nurse Maude Supply Department
  - Phone: (03) 375–4200
  - 95 Fitzgerald Ave, Christchurch.
  - Monday to Friday 8.30 a.m. to 4.30 p.m.
  - Closed weekends and public holidays.

If you go away on holiday, remember to tell the District Nursing Service, and arrange to take the supplies you need with you.
Information for your district nurse and general practitioner

Date Inserted:

Type of Foley catheter:  
☐ Latex  ☐ Hydrogel  ☐ Silicone

Size of Foley catheter:  
☐ Male  ☐ Female

Balloon size:  
No. of ml in balloon:  

Date for removal or change of catheter:  

Other information (relevant medications, etc.):

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