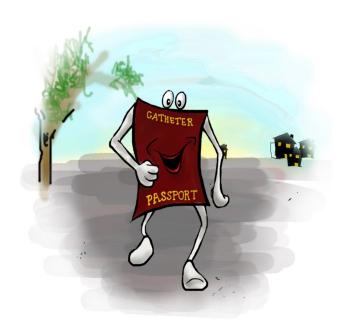


# **Catheter Passport**



Guide for male and female patients and their carers

Please keep it safe.

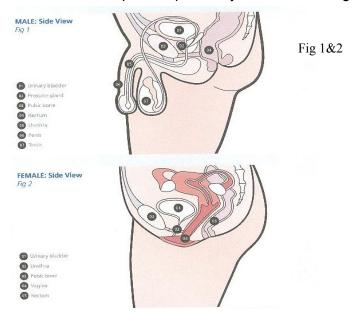
### Introduction

The purpose of this booklet is to give you advice on looking after your urinary catheter.

If you have a hospital appointment or a GP surgery appointment you should take this booklet with you. You should also take this booklet with you when you travel away from home. The second half of this booklet will be completed by the nursing staff to ensure your continuity of care.

# What is a urinary catheter

- A catheter is a soft flexible hollow tube inserted to drain urine from the bladder.
- The catheter is inserted into the urethra the opening of which is situated at the tip of the penis or just above the vagina.

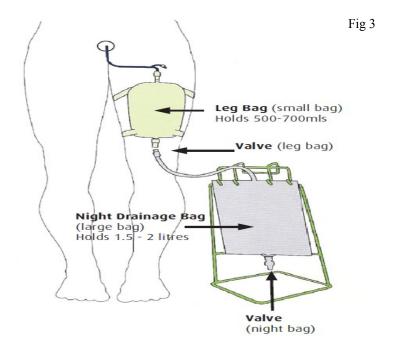


- (See fig 1 and 2).
- In some cases a catheter is inserted through a hole in the abdomen called a suprapubic catheter which functions in the same manner draining urine from the bladder.
- The urine is drained via the tube into a drainage bag whigh will be attached to your leg.
- For night time drainage a larger disposable drainage bag is connected.

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Date of catheter intervention. Signature and print of healthcare worker	
Reason for catheter intervention e.g. initial insertion/routine change/non-routine change/change of bag/ change of fixation/ maintenance solution.	
Is the urinary catheter still required? Y/N	
Any changes to type/ size of catheter or re- lated equipment and reason for change.	
Insert catheter/ maintenance solution labels here:	
Appearance of urine.	
Appearance of catheter (if removed as part of a routine or nonroutine change).	
Specify any problems identified, interventions and outcomes, including CSU if taken and results.	
Date of next catheter review.	18

Together the catheter leg bag and night bags form a closed link drainage system which prevents bacteria getting into the system thereby reducing the risk of Infection (see fig 3).



# When will my catheter need changing

- Your nurse will advise you how often your catheter needs changing.
- If you have experienced problems in the past when being re-catheterised such as excess bleeding or frequent urinary tract infections it may be necessary for you to have antibiotics prior to being re—catheterised. Your nurse will advise you before re-catheterising you.
- In some circumstances you may be required to go to the hospital to be catheterised if your nurse feels it is necessary. This will be explained to you and arrangements made should this be necessary.

# How do I look after my catheter on a daily basis? Basic hygiene advice

- Wash your hands before and after touching your catheter.
- Wash the area where your catheter enters the body with unscented mild soap at least twice a day.
- Women should always wash the area where the catheter enters the body from front to back
- Men should carefully wash under the foreskin. Dry the area thoroughly and ensure the foreskin is replaced over the end of the penis.
- Avoid the use of talc, antiseptic, bubble bath, shower gel and creams as they can cause irritation.
- Do not remove your leg bag when you have a bath or shower.
- Wash your hands thoroughly again

# **Dietary advice**

- Drink at least six mugs or glasses of fluid each day unless your doctor has advised that you are to follow a special fluid restriction regime. This is about 2 litres for an average sized adult per 24 hours.
- Try to make sure that you do not drink too much tea, coffee or fizzy drinks.
- If you drink a lot less than this then build up how much you drink gradually
- Do not cut down how much you drink this will make your urine concentrated and can make bladder problems worse.
- Eat a balanced diet eat food that contains fibre every day; fruit, vegetables, wholemeal bread and brown rice are some foods rich in fibre. This helps to avoid constipation that can make urine incontinence worse.
- Empty the leg bag when it is two thirds full of urine. Urine will not drain if the bag is full.

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Date of catheter intervention. Signature and print of healthcare worker		
Reason for catheter intervention e.g. initial insertion/routine change/ non-routine change/ change of bag/change of fixation/maintenance solution.		
Is the urinary catheter still required? Y/N		
Any changes to type/ size of catheter or relat- ed equipment and rea- son for change.		
Insert catheter/ maintenance solution labels here:		
Appearance of urine.		
Appearance of catheter (if removed as part of a routine or non-routine change).		
Specify any problems identified, interventions and outcomes, including CSU if taken and results.		
Date of next catheter review.	_	16

# How do I attach a Drainage bag/Night bag

- Wash your hands thoroughly.
- Remove protective cap from the end of the tube of the drainage bag without touching the end to prevent contamination entering the bladder via the tube.
- Insert the end of the tube firmly into the catheter.
- Ensure your catheter tubing is not kinked or trapped or restricted by tight clothing.
- Wash your hands thoroughly again

# Night drainage systems

### Connection

- Wash your hands thoroughly
- When attaching a night drainage bag remember to open the leg bag tap/valve to allow urine to flow into the night bag.
- Ensure your night drainage system is kept below the level of your bladder to aid free drainage and prevent backflow of urine particularly when sitting in a chair or in bed.
- Remember to change your drainage bags weekly.
- Wash your hands thoroughly again

### Disconnection

- Wash hands thoroughly.
- Close the tap on the leg bag.
- Disconnect the night bag from the leg bag or catheter valve.
- Empty the urine from the bag into the toilet or jug..
- Secure the bag onto the leg using the fixation straps.
- Wash your hands thoroughly again

# What should I do if my catheter is not draining or it is leaking.

- Check the drainage bag is below the level of the bladder particularly when sitting in a low chair or in bed.
- Make sure the tubing is not restricted by tight clothing.
- Make sure the tubing is not tight or stretched as this may restrict urine flow.
- Check that the drainage bag is connected correctly making sure the straps that secure the leg bag to your leg are positioned behind the leg bag tube.
- Ensure the valve from the day bag is open if your night bag is not draining.
- Urine will not drain if the bag is full. Empty the bag when it is two thirds full.
- Constipation can prevent your catheter from draining.
- Ask a health care professional for advice about eating a healthy diet to avoid constipation.
- Change your position and walk around if possible.
- Make sure you are drinking enough fluid, approximately 2 litres of fluid or 6 cups or glasses of fluid a day.
- If you are still experiencing problems and any urine leakage please contact your community nurse for further advice. Remember to have this passport available at all times..

intervention. Signature and print of healthcare worker Reason for catheter intervention e.g. initial insertion/routine change/ non-routine change/ change of bag/change of fixation/maintenance solution. Is the urinary catheter still required? Y/N Any changes to type/ size of catheter or related equipment and reason for change. Insert catheter/ maintenance solution labels here: Appearance of urine. **Appearance of catheter** (if removed as part of a routine or non-routine change). Specify any problems identified, interventions and outcomes, including CSU if taken and results. 15 Date of next catheter review.

Date of catheter

6

or;
Patient
NHS Number

This form is to be completed by healthcare workers providing catheter interventions.

NB Indications for catheter specimen of urine (CSU): Fever, altered mental state or malaise/lethargy with no other cause. Flank pain, loin tenderness, acute haematuria (refer also to troubleshooting guidance), pelvic discomfort. Cloudy malodorous urine/positive dipstick are NOT indications for CSU. If a CSU is obtained please document. If a urinary tract infection is diagnosed, change catheter after 24-48 hours of effective treatment with antibiotics.

Follow the manufacturer's specific guidance for any piece of equipment but generally; valves, catheter bags and leg bags are changed every 5—7 days.

# When should I ask for help?

- Your catheter should remain comfortable and pain free however you should ask for help when:
- You experience acute lower abdominal or tummy pain.
- Urine is not draining and you have followed the simple self help measures within this booklet.
- The catheter falls out and you are unable to pass urine.
- The catheter falls out and you can pass urine.
- There is blood in your urine.
- Urine is cloudy smelly or you have a burning sensation which does not improve after drinking extra fluid.
- Urine is leaking around the catheter enough to make your clothing wet.
- New pain in the pelvis region, back or legs.
- You feel you may have a high temperature, develop nausea, vomiting or feel generally unwell.
- You experience irritation, tenderness swelling or redness at the catheter insertion site.

# How do I dispose of used catheter bags?

- Empty the urine into the toilet, commode or jug.
- Wash your hands after emptying the drainage bag.
- Double wrap the bag either with newspaper or place in a plastic bag. Place either into your household waste bin or outside bin.
   Ensure the plastic bag is tied securely to minimise the risk of leakage into either your household or outside waste bin.
- Remember to wash your hands after discarding the bag/newspaper into the waste.

#### **Catheter valves**

- Catheter valves attached directly to the catheter are an alternative to urine collection bags for suitable individuals.
- These devices can be used with either urethral or suprapubic catheters and allows urine to be stored in the bladder rather than drained into a bag.
- Catheter valves should be changed weekly.
- Wash your hands before touching your catheter valve.
- Turning the valve into the open position means the bladder can be emptied when normal sensation is felt or at regular intervals.

### The valve should be opened to empty your bladder:

- When you feel your bladder is full
- Before going to bed.
- First thing in the morning.
- During the night if necessary i.e. if not using a drainage bag
- At least every 3-4 hrs during the day.
- Before opening your bowels.
- Attach a night bag to the valve every night to drain urine from your bladder overnight. Remember to open the valve.
- To help prevent infection only remove the valve when it is replaced with a new one weekly.
- Always remember to wash your hands before and after touching your catheter valve.
- The catheter and valve should be secured to the leg with a catheter fixation strap. (see fig 4)



#### **Daily Catheter Care**

Bully Gutilotol Gulo				
Patient / Carer taught: (please date when achieved)				
Managing the Valve				
Emptying Bag				
Positioning of leg bag				
Fixating the catheter and bag				
Changing bag				
Removal and emptying night bag				
Attaching and positioning night bag				
Disposal of used equipment				
Daily Hygiene				
Reducing risk of infection				
Discussion with patient/carer rega	arding: ( please date when achieved)			
Obtaining help and advice				
Effects of catheterisation on patient's lifestyle				
Fluid Intake				
Bowel Health				
Sexual Intercourse				
Date patient/carer given urinary catheter passport:				
Additional Comments:				
Catheter Removal (final removal N	IOT routine changes)			

Date of removal:	
Reason for removal:	13
Removed by:	

Stop! Think! Avoid if possible.	ssessment and Monitoring Form Urinary Incontinence is NOT an Ition but refer to guidelines
Patients Name:	DOB: NHS No:
Address:	Known Allergies:
Catheter Information	
Date of initial insertion:	
Reason for catheter in situ:	
Daily care to be done by Patient: Carer:	Hand washing leaflet given?  □ Tick for Yes
Catheterisation Plan (please tio	ck)
Long term	
Short term	
Date of urology review	
TWOC planned?	
Date of planned TWOC:	
TWOC in hospital or at home?	
Type of Catheter (please tick of	r write in)
Urethral	Supra Pubic
Valve	Free-drainage
100% silicone	Hydrogel-coated silicone
Hydrogel –coated latex	PTFE 12
Balloon size	Charriere

Previous Antimicrobial History

Reason for antibiot- ics				
Date Discon- tinued				
Date Com- menced				
Frequency				
Name and dose of Anti- microbial				

# Hand washing Technique



1. Rub palm to palm



**2.** Right palm over back of left hand and left palm over back of right hand.



3. Palm to palm with bent and spread out fingers



**4.** Back of fingers to opposing palms with fingers interlocked



**5.** Circular rubbing of left thumb in closed right hand and vice versa



**6.** Circular rubbing backwards and forwards with closed right hand fingertips in left palm and vice versa

### What about sex?

If you are sexually active this needn't be a problem for both men and women.

- You should firstly empty the urine collection bag before sexual activity.
- Wash genitals before and after sexual intercourse.
- Men should place their catheter along the penis and apply a condom
- Women can position the catheter along their abdomen