Intermittent Catheterization
Disclaimer
This is general information developed by The Ottawa Hospital. It is not intended to replace the advice of a qualified health-care provider. Please consult your health-care provider who will be able to determine the appropriateness of the information for your specific situation.
DEFINITION

Intermittent catheterization is a procedure that allows a person to empty their bladder on a regular basis. This procedure can be performed either by oneself, even as young as 5 years of age. It can also be done by a trained person.

Why Do I Need Intermittent Catheterization?
Short-Term intermittent catheterization may be required if you have had surgery that will affect bladder control.
Long-Term intermittent catheterization may be required if you have a bladder that no longer responds to commands from the brain. You may have one of the following:

- Spina bifida;
- Tumours of the spinal cord;
- Multiple sclerosis;
- Severe diabetes;
- Trauma of the spinal cord;
- Chronic cystitis;
- Stroke.

All of the above have one thing in common, they are all unable to control voiding or “passing water”.

If a bladder is not emptied regularly, it expands resulting in reduced blood circulation in the bladder, increasing the chances of infections, stones and even blood in the urine.

Urine may back up into the kidneys affecting the whole renal system as the result of a bladder that is not emptied.

Objectives
The main objective of the program is to provide you with a more enjoyable life, with comfort and greater independence. Specifically, we want you:

- to remain dry;
- to eliminate the use of diapers, pads or permanent catheters;
- to reduce or eliminate infection;
- to prevent the creation of stones.
Normal Voiding

Combination of Failure to Store

Failure to Empty: Type I

Failure to Store

Failure to Empty: Type II
WHEN SHOULD YOU CATHETERIZE?

Generally you should catheterize every 3 to 6 hours. However, if you drink a lot of fluids the frequency would be increased.

Apart from drinking at least 5 to 8 cups of water a day, there are no restrictions on the amount you may drink, though moderation is desirable. Some drinks should be avoided such as coffee, tea or colas and do not drink within 2 hours of going to bed.

The average amount of urine you drain from your bladder with each catheterization is 300 ml to 500 ml.

The following symptoms may indicate a distended bladder and the frequency of catheterization should be increased:

- perspiration;
- chills;
- headaches;
- distended abdomen;
- cold extremities;
- flush/pale;
- lack of ability to concentrate.

EQUIPMENT REQUIRED

The following is the list of equipment required for catheterization:

- Catheter (disposable or metal);
- Water soluble lubricant;
- Washcloth or disposable wipes (alcohol free);
- Catheter container with antiseptic solution;
- Soap and water;
- Urine measuring container.
INSTRUCTION SHEET FOR CLEAN SELF-CATHETERIZATION

PROCEDURE FOR WOMEN

The suggested positions for self-catheterization are: sitting on the toilet, sitting on the bed, or standing up facing the toilet (see diagrams p. 9 – 12).

- Assemble all the equipment you will need: catheter, soap, lubricant and urine measuring container.
- Wash your hands with soap and water.
- Wash your female perineum well with soap and water, wiping well from the front to the back. Rinse well wiping in the same direction.
- Wash your hands thoroughly with soap and water or with disposable wipes.
- Remove the catheter from the container and rinse in warm water.
- Lubricate the tip of the catheter. Spread your labia apart with one hand and hold the catheter with the other, two inches from the end of the catheter. Do not touch the end of the catheter on anything.
- Insert the catheter into the opening of the urethra (see diagram). If the catheter slips into the vagina by mistake, do not use this catheter again until you have washed it.
- Advance the catheter until the urine starts to flow. Then, advance it one more inch.
- Allow the urine to flow until it stops. Bearing down with your abdominal muscles or pushing down with your hands below the navel may help you to produce more urine.
- Remove the catheter slowly to ensure all urine is drained. Avoid pinching the catheter.
- Wash the catheter thoroughly with soap and water, rinse well. Change your antiseptic solution in your container every week. Clean the container at this time.
INSTRUCTION SHEET FOR CLEAN SELF-CATHETERIZATION

PROCEDURE FOR MEN
Choose the appropriate position (see pages 9 – 12).

- Assemble material.
- Wash your hands with soap and water.
- Pull back the foreskin and clean the tip of the penis with a washcloth and soap or with a disposable wipe.
- Wash your hands with soap and water.
- Remove the catheter from the container and rinse in hot water.
- Lubricate the tip of the catheter. Remember to discard the first drop of lubricant.
- Hold the penis in an upright position with one hand. With the free hand insert the catheter into the urethra (25 cm or 8 – 10 inches) until urine appears, then insert another 2.5 cm (1 inch).
- Ensure that the bladder is completely emptied by bearing down on the abdominal muscles or by placing the hands on the lower abdomen (below the navel) and pressing down.
- SLOWLY remove the catheter allowing the last drops to drain from the bladder.
- Wash the catheter in soap and water and rinse with hot water. Return the catheter to the container of antiseptic solution.
SUGGESTED POSITIONS

SITTING ON A BED

The back is supported by pillows, feet together, knees bent and separated. A mirror may be placed at the feet if required.

Advantages:
• Works well if mobility is restricted or if another person is performing the catheterization.
• No balance problems.

Disadvantages:
• Difficult to discard urine collected.
• Difficult to perform away from the home.
SITTING ON A TOILET (Women)
WITH A MIRROR: Women may use a mirror to locate the urethra and insert the catheter.

Advantages:
- The anatomy can be seen, making insertion easier.
- Can be performed almost anywhere.

BY TOUCH: This method can be performed easily with a little practice.

Advantages:
- Can be performed anywhere.
- Quick to carry out and less equipment problems.
SITTING ON A TOILET (Men)

Advantages:
- Easy and trouble free.
- Well adapted to an active life.

STANDING UP FACING THE TOILET

The procedure must be performed by touch for women.

Advantages:
- Well adapted to an active life.
- Can be performed anywhere.
Easy access to handicap toilet is necessary.
POSSIBLE PROBLEMS AND SUGGESTED SOLUTIONS

1. You meet unexpected resistance when inserting the catheter.
   • Take a deep breath and gently push on the catheter.
If you have the following, contact your Home Care Nurse/Physician.

2. You have blood in your urine.
   • Do not worry since it may just be an irritation and should go away on its own in a couple of days. However, if the condition persists contact as above.

3. You suspect a bladder infection.
   • You may have the following:
     • Fever (without other symptoms like a cold or sore throat);
     • Intense burning sensation when you urinate or when you insert the catheter;
     • Blood in your urine for several days;
     • You urinate every hour or more frequently for several days;
     • You have an intense need to urinate and cannot wait;
     • Your urine has a foul odour and contains particles (like dust);
     • You become incontinent.

Your physician will probably ask for a urine culture and may prescribe an antibiotic.

DAILY ROUTINE

BASIC HYGIENE
   Cleanliness of the genitals is crucial in preventing bladder infections. Washing daily in the morning and in the evening is recommended.

CATHETER CARE
   Catheters must be stored in the clean container of antiseptic solution when not in use.
Disposable Catheter

May be used up to 3 days, or as instructed by your Nurse, before discarding. Change your catheter if it becomes too brittle/stiff.

Metal Catheter (Re-usable)

Once a week, a metal catheter should be washed in hot soapy water making sure that the plunger is inserted 3 – 4 times. Then, the catheter should be boiled for at least 5 minutes.

Care of Container

The container should be washed weekly in hot soapy water using a baby bottle brush and then boiled for at least 5 minutes. The antiseptic solution should be changed at the same time.
IMPORTANT POINTS

1. **Hand washing:** Thoroughly wash your hands with lots of soap and water before catheterization is essential to prevent infections. Carry packaged alcohol free disposable wipes at all times in case a sink is not available.

2. **Fluid intake:** No limit on amount of fluid intake. Take fluids early in the day to prevent thirst later on, and limit fluids after 7:00 p.m. Try to drink enough fluid to equal 8 glasses.

3. **Frequency of catheterization:** There is no specific number of times to perform catheterization. You will learn what is best for you. Limit yourself to every 4 hours. You must avoid prolonged bladder distention. The average amount of urine you drain from your bladder, with each catheterization is 300 ml to 500 ml.

4. **Signs and symptoms of infection (to report to your Physician/Home Care Nurse):**
   - Fever;
   - Cloudiness or foul smell of your urine;
   - Blood in urine;
   - Pain upon performing catheterization;
   - Resistance when removing the catheter;
   - Frequency and urgency to void;
   - Loss of bladder control.
RESOURCES
If you have any concerns or questions, please contact the following:
Physician: ________________________________
VON/CLSC: ________________________________
Ottawa General Hospital – Diane Gaudreau 737-8409
Any supplies you need can be found at a hospital supply store. You can find a list of stores in the Yellow Pages under "Hospital Equipment and Supplies".

FOLLOW-UP VISITS
   You will be asked to make a follow-up appointment with your physician upon discharge.

LIST OF QUESTIONS TO ASK MY PHYSICIAN
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MY PERSONALIZED ROUTINE
Frequency of catheterization: ________________________________
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Amount voided: ________________________________
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Amount catheterized: ________________________________
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## MY PERSONAL HOME RECORD

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