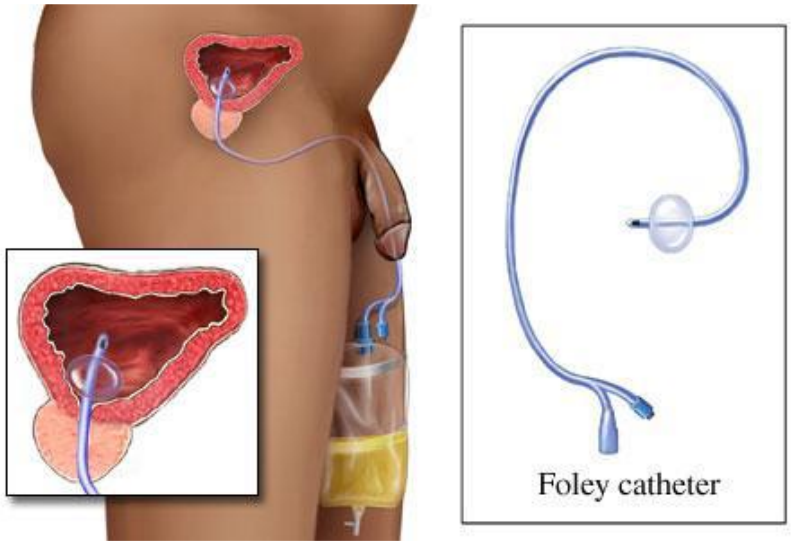
Management of a Urethral Catheter

What is a catheter?
Your doctor has advised that you require a catheter inserted into your bladder to drain urine from it. A catheter is a small, flexible tube that is inserted through the water pipe (urethra) into the bladder to drain urine into a bag which is usually strapped to your leg. When the bag becomes full of urine, it will need to be emptied by opening the tap at the bottom of the bag either over the lavatory or into a suitable receptacle.

The common type of catheter contains latex. If you have any history of latex allergy, please ensure that the urology staff are informed of this before a catheter is inserted.

The catheterisation will be performed by either a doctor or a nurse who will explain the reason for the catheter and whether it needs to be a permanent part of your lifestyle or, perhaps, only a temporary measure. The catheter will feel strange at first and you will certainly feel conscious of it, constantly feeling that you want to pass urine. This sensation, however, is quite normal and will soon pass.



How do I look after the catheter?
The catheter must be treated as a part of your own body and will need to be kept clean in the same way. It can be washed each day with warm, soapy water, either in the bath or in the shower, at the same time as you wash yourself. You are advised to wash the catheter away from the urethra so as not to encourage germs to enter the body and cause infection.

Whilst you are using the catheter, you will need to drink plenty of fluids in order to prevent urinary infections and constipation. You should also take care not to kink the catheter or to raise the drainage bag above the level of your bladder.

Once your catheter has been inserted, the nurse looking after you will give you any additional information that you require, together with any spare equipment you may need. Once your GP has been notified of the catheter, your additional equipment can be bought on prescription which you should be able to obtain from your local chemist in the usual way.

While at home, you will need to care for the catheter and drainage system. The different component parts of this are:

The catheter
You need do nothing to the catheter apart from keeping it clean on the outside by carefully washing yourself and the catheter tube itself. Ensure that you dry yourself gently and thoroughly to prevent soreness.

The leg-bag for daytime use
This is attached directly to the catheter tube and will collect all the urine produced during the day. It will, of course, become heavier as it fills so do not allow it to become too full as this carries the risk of pulling out the catheter. Always wash your hands before and after using the tap on the end of the bag to empty urine into the toilet.

What if I experience problems?

Some problems may occur when you have a catheter but your District Nurse, GP or Nurse Practitioner can advise you on what action to take. You may experience some of the following problems:

Bladder spasms
Bladder spasms feel like abdominal cramp and are quite common when you have a catheter in your bladder. The pain is caused by the bladder trying to squeeze out the balloon. If you are unable to tolerate this sensation, your GP can prescribe a drug called Tolterodine which stops the cramps.

Leakage around the catheter
This is called by-passing. It is sometimes the result of bladder spasms or can take place when you open your bowels. If it does happen, please check that your urine is still draining. If it is not, you need to contact your District Nurse as soon as possible.

Blood or debris in the urine
This is common with a catheter. It is only of concern if you see large clots or solid pieces of debris passing down the catheter. If this happens, please contact your Nurse Practitioner for advice as this may cause a blockage.

Blockage
This will become an emergency situation if not dealt with in a timely fashion. Check that the drainage bag is below the level of your bladder, that the catheter has no kinks or twists in it, that there are no clots or debris in the catheter and that you are drinking enough. If the catheter will not unblock, contact your District Nurse immediately or get in touch with your Nurse Practitioner.

Catheter falling out
If your catheter falls out, contact your District Nurse or Nurse Practitioner immediately. If there is doubt about whether your catheter should be replaced, this will be discussed with the on-call urologist.

Urine infection
Infection is invariably found in the urine after catheterisation so a positive urine culture for bacteria is very common once a catheter has been in for more than 10-14 days; it does not necessarily mean that you need to take antibiotics. However, if you have cloudy urine, cystitis (a burning sensation), unpleasant smelling urine or a high temperature, contact your GP immediately to determine whether you should have antibiotic treatment.

What type of catheter do I have?

Type of catheter: .....

Balloon size (ml): .....
.....

Date of insertion: .....
.....

Date for catheter change: .....
.....

Clinic follow-up arranged: Yes / No

Type of leg-bags: .....
.....

Night bags given: Yes / No

GP/District Nurse informed? Yes / No

Name & signature of nurse: .....
.....
.....
.....

Adapted from advice by the British Association of Urologists

Adapted from advice by The British Association of Urological Surgeons

Patient Experience
We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback
Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)
If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.
Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.
If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:
The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.
If you are unable to understand this leaflet, please communicate with a member of staff.

For additional medical advice, if your symptoms or condition worsens:

Contact your GP

NHS 111:	Telephone 111
Get help with your symptoms, NHS111:	https://111.nhs.uk/
Information to help you manage your health:	www.nhs.uk

In an emergency telephone 999

Emergency Department (A&E)
Alexandra Hospital
Woodrow Drive
Redditch B98 7UB

Tel: 01527 512030

Minor Injury Unit
Kidderminster Hospital
Bewdley Road
Kidderminster DY11 6RJ

Tel: 01562 513039

Emergency Department (A&E)
Worcestershire Royal Hospital
Charles Hastings Way
Worcester WR5 1DD

Tel: 01905 760743