INTERMITTENT SELF CATHETERIZATION

PATIENT GUIDE
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Basics to know about Urological Anatomy (K-U-B-U-M)

Kidneys – Filters

Ureters – Path from kidneys to bladder

Bladder – Fluid container

Urethra – Pathway from the bladder out

Meatus – Opening of urethra
Kidneys
The kidneys are the most important part of the urinary system. This is where the urine is actually produced by the body. The kidneys are located just inside the two lowest ribs on either side of the spinal column.

The kidneys have two major functions: to eliminate useless waste produced during the body’s metabolism and to maintain a balance in the concentrations of body fluids.

Complex structures within the kidneys filter blood, pulling out waste and pushing past the fluid the body needs to keep.

Ureters
The ureters are the drainage tubes from the kidneys to the bladder. Each one is about 8-1/2 inches long. As the kidneys produce urine, it will move through the ureters into the bladder. This movement is similar to the muscle activity that moves food through the stomach and intestines.

The ureters attach to the bladder in a way that prevents the backflow of urine. An over-distended bladder, however, can result in the kidneys’ decreased blood flow and diminished urine output, which can develop into serious kidney problems.

Bladder
The bladder is a muscular balloon that is very small when empty, but when expanded it holds on average 400 to 600 ml of fluid. (Note: Bladder capacity varies among individuals, and some people may have lower or higher capacities). Pressure increases as the bladder fills. In a healthy individual without any urologic problems, the urge to void begins anywhere from 150 to 400 ml. As the pressure in the bladder increases, so does the urge to void. Usually at 600 ml a person is feeling strong urgency to empty bladder.

Urethra
The urethra is the natural tube or duct that connects to the bladder to carry urine out of the body. Inside the urethra is an external sphincter muscle that keeps urine inside the bladder and releases it during voiding.

Meatus
The urinary meatus is the opening of the urethra, where urine exits the body.
### INTermITTent CATHEterization FAQs

<table>
<thead>
<tr>
<th>What is intermittent catheterization?</th>
<th>Intermittent catheterization refers to the periodic insertion of a thin, flexible, hollow tube through the urethra and into the bladder to empty urine from the bladder.</th>
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<tbody>
<tr>
<td>Why do I need to self-catheterize?</td>
<td>Some people are unable to empty their bladder completely, or not at all. If urine collects and remains in the bladder, it can result in infection, discomfort, damage to the bladder due to distention, or damage to the kidneys. It is important to drain urine from the bladder.</td>
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<td>How do I know what size catheter I need?</td>
<td>Your healthcare provider will work with you to determine the best size catheter for your needs. The outer diameter of a catheter is sized in Frenches (abbreviated Fr).</td>
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<tr>
<td>How often do I need to catheterize? And how much urine volume should I expect?</td>
<td>It depends on how much you drink and how often you catheterize. In order to avoid over-distention of the bladder, you should try to catheterize before your bladder contains more than 400ml (about 13 oz). Work with your nurse or clinical advisor to establish a suitable routine. You may, however, need to adjust the amount of fluid you drink and the times you catheterize to avoid over-distention of the bladder.</td>
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| What are signs of an over-distended bladder? | • The lower part of the abdomen looks bloated or the bladder feels very full  
• Restlessness  
• Sweating  
• Chills  
• Headache  
• Nausea  
If you suspect you have an over-distended bladder, you should catheterize as soon as possible. |

**Equipment You’ll Need**

- Catheter – the size and type recommended by your healthcare provider
- Soap and water
- Washcloth or disposable wet wipes
- Lubrication jelly – use a water-soluble lubricant, NOT petroleum jelly
- Collection container or toilet
MALE INTERMITTENT SELF-CATHETERIZATION

STEP 1. If you are not over a toilet, have a container ready to drain urine into.

STEP 2. Wash hands with soap and water.

STEP 3. Wash or use a disposable wet wipe to cleanse the genitals, pulling the foreskin back and cleansing if uncircumcised.

STEP 4. For a hydrophilic coated catheter, soak the catheter according to the manufacturer’s instructions. For an uncoated catheter, apply lubrication jelly to the first 6 inches (15cm) of the catheter.

STEP 5. Choose a comfortable position (standing or sitting).

STEP 6. Lift the penis gently upward and outward, and hold at about a 60 to 75-degree angle.

STEP 7. Slowly guide the lubricated catheter into the urethra without touching the part of the catheter that is entering the body.

STEP 8. Continue to slide the catheter slowly and smoothly until urine begins to flow; this will happen when about 6 to 8 inches of the catheter have been inserted.
• Sometimes the catheter is hard to push just as it reaches the bladder. This is normal. Do not force the catheter. Use gentle, firm pressure on the catheter until it passes this point.

• It can be helpful to “bear down” (as though passing a bowel movement) or cough to pass the catheter past this resistance point.

• Relax and let the urine flow from your bladder into the toilet or container.

STEP 9. When urine stops flowing, slowly and gently remove the catheter. Note that additional urine may drain as you are taking out the catheter.

STEP 10. Wipe any remaining lubricant off your penis, and if you are uncircumcised, gently pull your foreskin back into position.

STEP 11. Dispose of the catheter and any packaging.

STEP 12. Wash hands with soap and water.

NOTE: Some males will benefit from using a coude tip catheter (one with a bent tip) to help maneuver the catheter past the prostate gland. Your healthcare provider can advise if this is the best option for you.
FEMALE INTERMITTENT SELF-CATHETERIZATION

STEP 1. If you are not over a toilet, have a container ready to drain urine into.

STEP 2. Wash hands with soap and water.

STEP 3. Wash or use a disposable wet wipe to cleanse the genitals (from front to back).

STEP 4. For a hydrophilic coated catheter, soak the catheter according to the manufacturer’s instructions. For an uncoated catheter, apply lubrication jelly to the first 3 inches (8cm) of the catheter.

STEP 5. Choose a comfortable position (squatting, sitting on a toilet, standing with one foot on toilet seat, or lying down with knees bent.)

STEP 6. With one hand, spread the labia and find the urethral opening. Initially, a mirror can be helpful. With practice, you should be able to find the urethral opening by touch.

STEP 7. Slowly guide the lubricated catheter into the urethra without touching the part of the catheter that is entering the body.
STEP 8. Continue to slide the catheter slowly and smoothly until urine begins to flow; this will happen when about 3 inches of the catheter have been inserted.

- If you feel resistance, hold firm, gentle, steady pressure; you can also cough or take a few slow, deep breaths. The muscles should relax allowing the catheter to pass.

- Relax and let the urine flow from your bladder into the toilet or container.

STEP 9. When urine stops flowing, slowly and gently remove the catheter. Note that additional urine may drain as you are taking out the catheter.

STEP 10. With toilet paper or a fresh cleansing cloth, wipe front to back.

STEP 11. Dispose of the catheter and any packaging.

STEP 12. Wash hands with soap and water.
<table>
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<tr>
<th>What you see or feel</th>
<th>Why this might be happening</th>
<th>What you do</th>
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<td>You are trying to push the catheter into your urethra, but it is meeting resistance.</td>
<td>Sometimes the catheter is more difficult to advance just as it approaches the bladder. This is normal and can be caused by bladder spasm or tension.</td>
<td>Try to relax. Apply gentle, firm pressure until the catheter continues advancing and urine begins to flow. Do not force the catheter. Men can try to change the angle of the penis to help the catheter pass smoothly.</td>
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<td>The catheter is difficult to remove.</td>
<td>This can be caused by a bladder spasm.</td>
<td>Try to relax. Wait 5 to 10 minutes while relaxing. Try to remove the catheter after you have relaxed. Sometimes coughing helps. <strong>Do not use force.</strong> If you are having great difficulty and cannot remove the catheter, contact your healthcare provider.</td>
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<td>You see blood on the catheter.</td>
<td>Occasionally, there is a small amount of bleeding if the catheter has irritated your urethra. Usually there is no cause for alarm.</td>
<td>Contact your healthcare provider if the bleeding is heavy, continuous or in the urine.</td>
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| Fever, chills, or body aches, especially when accompanied by symptoms of a urinary tract infection:  
  • Severe pain in your lower abdomen  
  • Bright red blood or blood clots in your urine  
  • Cloudy, dark or strong-smelling urine  
  • Gritty material or mucous in your urine  
  • Burning sensation | These can be signs of a urinary tract infection. | Contact your healthcare provider if you notice any of these symptoms. Prompt diagnosis of any infection is important. |

**NOTE:** If intermittent catheterization results in frequent urinary tract infections (UTI), your healthcare provider may adjust their catheter recommendation to a sterile catheterization supply kit, which may have slightly different steps from those identified here.

The information above is for educational purposes only. It is not intended to be a substitute for professional medical advice or to be relied on instead of such advice. Please consult your healthcare provider to determine the appropriate course of treatment in any situation involving catheters and catheterizations.
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<tr>
<th>Date</th>
<th>Time</th>
<th>Amount/Type of Fluids I Drank</th>
<th>Amount of Urine Catheterized</th>
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GLOSSARY OF TERMS

BLADDER
A collapsible balloon-like muscular organ that lies in the pelvis and functions to store and expel urine.

BLADDER CATHETERIZATION
A procedure in which a catheter is passed through the urethra into the bladder for the purpose of draining urine.

CATHETER (URINARY)
A flexible, hollow tube inserted through the urethra to the bladder to withdraw urine or instill medication.

CATHETERIZATION
The process of inserting a tube into the bladder to drain urine.

INTERMITTENT CATHETERIZATION
Insertion of a catheter into the bladder at regular intervals.

CLOSED SYSTEM
Refers to a touchless catheter located within a urine collection bag. The catheter is guided through a lubrication jelly reservoir and then inserted into the urethra.

COUDÉ TIP
A slight bend manufactured in the tip of the catheter that makes insertion past the prostate easier for some men. A notch at the funnel end, or guide stripe on the catheter, is a guide for alignment during insertion.

EXTERNAL SPHINCTER MUSCLE
A round voluntary muscle surrounding the urethra that contracts (closes) or relaxes (opens) to hold urine in or let it drain out of the bladder.

FRENCH SIZE
Abbreviated Fr, the measuring gauge for the outer diameter of an intermittent or indwelling urinary catheter. 1 French = 1/3 mm

HYDROPHILIC CATHETER
A catheter designed to be lubricated when moistened with water, which eases friction on the urethra upon insertion and removal.

INFECTION
A condition resulting from the presence of bacteria.

INTERMITTENT CATHETER
A flexible tube that is used to empty the bladder on a regular schedule; used for clinical catheterization or self-catheterization.
INTERNAL SPHINCTER MUSCLE
An involuntary muscle located at the bladder opening to the urethra.

INTRODUCER TIP
A specially designed system on some closed system intermittent catheter systems that helps reduce the introduction of bacteria into the urinary system by bypassing the meatus and part of the urethra. Bacteria pushed into the urethra may lead to urinary tract infections (UTIs). An introducer tip is inserted into the urethra.

KIDNEYS
Two bean-shaped organs that lie internally on either side of the spinal cord. Their purpose is to filter waste from the blood and to maintain a balance of body fluids. These two functions are achieved through the production of urine.

KIDNEY INFECTION
A urinary tract infection that also involves the kidneys. Also called pyelonephritis.

LATEX
A material made from natural rubber, which may cause allergic reactions in a small percentage of patients.

LUBRICANT
A water-soluble jelly applied to a catheter prior to insertion that allows for easier insertion and helps minimize urethral irritation. Note: Because petroleum-based products do not dissolve, they should not be used to lubricate the catheter surface.

MEATUS
The opening of the urethra in both men and women.

NON-LATEX
A material not made from rubber; usually vinyl or silicone for catheters. Minimizes risk of allergic reaction.

PELVIC FLOOR MUSCLES
Several small muscle groups that surround the urethra and rectum. They support the organs of the pelvis and help maintain continence.

PERINEUM
The part of the body between the scrotum and the rectum in a man, and between the pubic bone and rectum in a woman.

PRE-LUBRICATED CATHETER
Refers to a catheter that is lubricated by passing through a gel reservoir, or through activation of a hydrophilic coating (e.g., adding water).