
Uroformation

Clean Intermittent Catheterisation Female

*The Uroformation series is a co-operative venture in
patient centered urological information.*

urology
associates



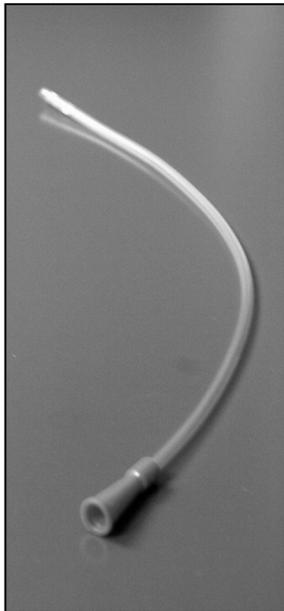
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Clean Intermittent Catheterisation

Clean intermittent catheterisation (C.I.C.) is a simple procedure to empty the bladder. It involves passing a small tube called a catheter up the urethra (from where urine normally drains) into the bladder to allow the urine to empty.

The type of catheter used is called a Nelaton catheter. C.I.C. may be undertaken on a short or long term basis.

This booklet is designed to give you an overview of the technique, things to watch for and other useful information.



Nelaton catheter for C.I.C.

Why might C.I.C. be necessary?

When going to the toilet it is usual to pass most of the urine that is in the bladder. There are some situations however, where the bladder may not fully empty.

Most commonly this may be due to –

- Bladder muscles that can not contract effectively
- The effect of bladder surgery
- Injury to the spinal nerves
- Blockage of the urethra

How often should the bladder be emptied?

You should catheterise whenever you feel full. If you cannot feel if your bladder is full, you should catheterise when you wake in the morning, 2-3 times during the day and just before you go to bed at night.

Check the amounts you drain off now and then to see that your bladder is not holding more than 300 – 400mls. If the amount is more than this, you need to catheterise more often.

The doctor, continence advisor or specialist nurse who is supervising your care will work with you to determine the frequency of catheters.

Does C.I.C. lead to infection?

There is always a risk of infection when using a catheter, but this is less of a risk than not regularly emptying your bladder.

C.I.C. is not a sterile procedure, and it is important to wash your hands thoroughly before and after catheterisation.

Getting started

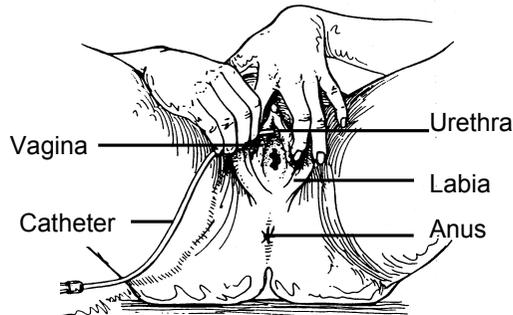
1. Collect the necessary equipment
 - Nelaton catheter
 - Tissues
 - Water soluble lubricant
 - Wash cloth or wet wipes

Additional equipment if required

- Container for urine
 - Torch or lamp
 - Mirror
2. Wash your hands, using soap and water or antibacterial hand sanitiser.
 3. Setup your equipment on a clean, easily accessible surface
 - Ensure the catheter is within reach
 - Open the lubricant and discard a small amount
 - Apply lubricant onto a tissue
 4. Get into a comfortable position. This may be lying on your bed, sitting on the toilet or wheelchair or standing over the toilet.
 5. If needed, setup a mirror to see your vulval area.
 6. Wipe your urethral area with a wash cloth or wet wipe.
 7. Remove the catheter from the packet or clean container. Try not to touch the catheter tip.
 8. Dip the catheter tip into the lubricant.



9. Part the labia with one hand, and then holding the catheter in the other hand (about 5cms from the tip) gently insert the catheter into the urethra. Direct the catheter upward until urine flows.



10. Let the urine pass into the toilet or container, leaving the catheter in place until all urine has drained.
11. When urine stops flowing, slowly withdraw the catheter.
 - If more urine starts to drain, stop removing the catheter, allowing the bladder to empty.
 - When there is no urine draining, remove the catheter.
10. Clean the catheter by rinsing it under clean running water, tip end upward.
11. Shake dry and store in a clean, dry, sealed container ready for the next use.
12. Wash your hands.

Tips

- You should drink 6-8 cups of liquid every 24 hours.
- The catheter can be used for one week, then discarded.
- Change or clean your catheter container once a week.

Troubleshooting

Blood in the catheter or urine

Occasionally, you may see blood in the urine or catheter. This is not uncommon, particularly when you are learning this technique.

- Try using more lubricant.
- Check for signs of infection.

Only be concerned if the bleeding persists or becomes heavy. Seek medical advice if this occurs.

Difficulty introducing or removing the catheter

This may occur because of an awkward technique or spasm of the sphincter muscles.

- Check that you are in a comfortable position.
- Take some deep breaths, relax as you slowly exhale, gently but firmly introduce or remove the catheter.
- Try using more lubricant.
- Take a break and walk away for several minutes before attempting to insert the catheter again.

No urine is draining

- Ensure that the catheter has been inserted far enough to reach the bladder.
- Gently try pulling the catheter back a short distance.
- Check that the catheter is not in the vagina. If this occurs, clean the catheter before re-inserting it into the bladder.

Urinary tract infection

If your urine becomes cloudy or has an odour, or you have increased pain or burning when inserting the catheter you may have an infection.

If you suspect that you have a urinary infection it is important to seek advice from your GP promptly. Do not wait until you get sick.

Useful information

Type of Nelaton catheter: Female

Size of catheter (Fg/Ch): _____

GP _____

District Nurse _____

Continence Advisor _____

If required on a long term basis, catheters may be obtained from:

Nurse Maude Association Phone 03 375 4240
The Supply Department
24 McDougall Avenue
Christchurch 8014

Culpan Distributors Phone (09) 570 5754

EBOS Phone 0800 18 17 16

Jackson Allison Phone 0800 333 103

USL Phone 0800 658 814



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