

Intermittent Self-Catheterisation



urogynaecology patient
information

This guide is to offer new techniques and promote confidence whilst you are performing CISC.

Sometimes it is necessary after an operation or if you have bladder dysfunction to CISC to empty the bladder.

It lowers the risk of urinary tract infection, helps you gain more control, independence and freedom from embarrassing leakage and from wearing a permanent catheter. CISC is usually only performed twice a day. In the morning after you have emptied your bladder and before you go to bed at night. It is important you measure your residual (how much you drain from CISC) to monitor your progress.

GENERAL THINGS TO REMEMBER WHILST PERFORMING CISC

Wash hands.

Continue to CISC during your periods.

Care of Catheters:

Wash catheter after every use with warm soapy water, rinse well with clean water – check catheter for rough edges and ensure “eyes” are not blocked.

Dry catheter with a hair dryer.

Store catheter flat in a container. eg toothbrush holder.

Discard catheter if hard to clean, any rough edges or at the end of one month.

Equipment:

Clean catheter.

Wet-Ones or wet washer.

Lubafax.

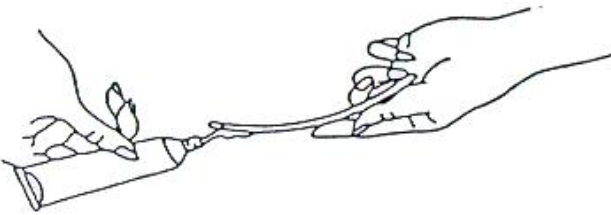
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Do not soak catheters in Milton or any other antiseptic. Clean soapy water is adequate.

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1. Gather the necessary equipment: towelettes (or a soapy washcloth for rinsing), a towel. A container for collecting the urine (if toilet isn't available), water-soluble lubricant (optional) and a catheter (#10 or #12 French, 5 inches long).
2. Wash your hands, and then assume a comfortable position in bed or on the toilet. If you do this in bed, place a towel under your hips to protect the bedding.
3. Wash the urethral opening area with a towelette or soapy wash cloth using a front-to-back motion. Then rinse with a wet wash cloth.
4. Place catheter under running tap water for 30 seconds. If not available use water-soluble lubricant.
5. Use your non-dominant hand to separate the labia.
6. Hold the catheter in your dominant hand and insert it into the urethral opening, directing it upward and forward toward the belly button until the urine flows through.
7. Hold the catheter in place until the bladder has been drained. When the urine flow begins to taper off, slowly withdraw the catheter. (As you do so, you may note an increase in urine flow as urine pockets are drained).
8. Remove the catheter. Rinse in water and place in "dirty" container. At end of day wash all catheters in warm soapy water, rinse thoroughly. Dry with hair dryer and store flat in clean toothbrush holder lined with paper towel.
9. Look at the urine for changes. If you see any change in colour or odour or if the urine appears cloudy, contact your nurse or doctor. Also call if you have:
 - Bleeding
 - Sediment in the urine
 - Back or abdominal discomfort accompanied by a fever
 - Trouble passing the catheter
 - Increased discomfort when passing the catheter.
10. Take cranberry capsules to promote acidic urine and reduce the risk of urinary tract infections.