What should I do if.....?

I see blood in the urine or on the catheter?
If there are a few specks, don’t worry, if the bleeding persists or becomes heavy, contact your GP or the clinic.

The urine becomes smelly, cloudy, or if burning or fever develops?
Bring urine specimen to your GP or to the clinic. You probably have a mild infection.

I cannot get the catheter in?
Don’t keep trying, you will get sore. Abandon the attempt and try again later.
If the difficulty persists and you are unable to pass urine yourself, seek help within six hours.

I miss and put the catheter in the vagina?
You will know because it will feel different and no urine will come out. Take the catheter out, and start again with a clean catheter.

If you have any queries, please contact:
Urogynaecology Clinical Nurse
Phone: 9340 2222 pager 3136

Urogynaecology Clinic
Phone: (08) 9340 1355

Monday to Friday 8.00am - 4.00pm

Emergency Department
Phone: (08) 9340 1431 or (08) 9340 1433
The reason you have been asked to learn self-catheterisation is to assist your bladder to regain normal function. Self-catheterisation has several benefits. It lowers the risks of urinary tract infection and allows you to gain control and independence.

To continually have such a large amount of urine in the bladder means it will gradually stretch and decrease the tone of your bladder. Another risk is that the urine left behind in your bladder becomes stale and increases your chance of having a urine infection.

Learning to catheterise yourself will enable you to be in control of your bladder. By emptying your bladder regularly, your bladder will soon regain its tone, sometimes even before you are discharged home.

If you have not regained your bladder tone, you will be able to go home and self-catheterise until your bladder is back to normal.

Your nurse will make sure you are quite confident about the procedure. If you have any worries please ask. Don’t be discouraged if you find it a little difficult at first.

On the next page is a diagram of your bladder and urethra, and the catheter you will use. The urethra is the name of the opening leading to your bladder. It is important to keep your catheter clean and dry and always wash your hands before self-catheterising.

Eventually you will be able to perform the procedure by using sensation alone and not sight.

Though you may use a mirror in hospital or at home, you may find it awkward to do so in public rest rooms. By relying on touch, you will be able to self-catheterise while on the toilet.

Your nurse will be able to teach you the touch technique.

**How to catheterise yourself using clean technique**

1. Perform the catheterisation as often as your doctor or nurse has suggested. To start with this should be every ....... hours.
2. Get your catheter, a mirror, lubricating gel, soap, flannel and water.
3. Wash your hands and genital area thoroughly with soap and water and rinse the catheter under the tap.
4. Position yourself in the most comfortable and convenient position. If you do not sit on the toilet, you will need a jug or bowl for the urine.
5. Part the labia with one hand and holding the catheter 2 - 3 inches from the tip, gently insert it into the bladder outlet until urine flows (see diagram).
6. When urine stops flowing, slowly withdraw the catheter. If the flow restarts, stop withdrawing until the bladder is empty. It is most important that the bladder is completely emptied at each catheterisation.
7. When the catheter is out, wash it under a running tap and shake it dry. Dry the outside with a clean paper towel or tissue and store it in a clean dry place (such as a resealable plastic bag or toothbrush container). If you are keeping a chart, record the volume obtained.
8. Soaking the catheters in strong antiseptic solution is usually discouraged as unnecessary. It may also possibly be an irritant to this sensitive area and has the potential to kill off normal bacteria.
9. At KEMH we use glass catheters. Supplies of catheters are available from the pharmacy with a doctor’s prescription.
10. You should drink two litres of fluid every 24 hours.