

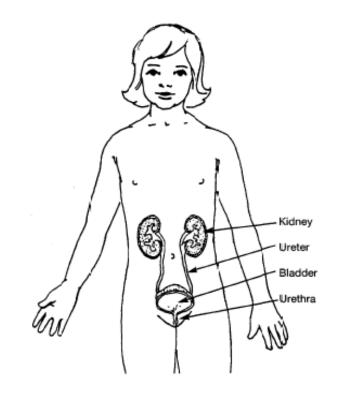
700 Children's Drive Columbus, Ohio 43205-2696 nationwidechildrens.org

CATHETERIZATION: SELF-CLEAN INTERMITTENT – FEMALE

Clean intermittent catheterization (in ter MITT ent kath eh ter I ZA shun) is done by passing a tube through the urethra into the bladder. Catheterization empties urine from the bladder (Picture 1). When the bladder is not emptied completely, bacteria (germs) can grow and cause a urinary tract infection that can hurt the kidneys. Because the kidneys are the main way for liquid waste products to get out of the body, they must be protected from infections. Proper emptying of the bladder and good medical treatment will help do this.

CATHETERIZATION SCHEDULE

- Catheterization must be done at regularly scheduled times to empty the bladder properly.
- Do the first catheterization when you get up in the morning. Do the last catheterization at your bedtime, unless your doctor tells you otherwise.
- It's important to follow the catheterization instructions carefully to help prevent urinary tract infections.



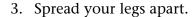
Picture 1 The urinary system inside the body.

DOCTOR'S ORDER				
☐ Catheterize every hours during the day at these times:				
Catheterize time(s) during the night.				
YOU WILL NEED Catheter (size)				
Plastic bag or toothbrush holder to carry the catheter				
Toilet tissue				
☐ Soap and washcloth or a disposable wipe				

GETTING READY

These directions are for a right-handed person. If you are left-handed, switch hands when you catheterize.

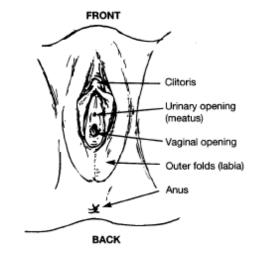
- 1. Wash your hands with soap and water or a disposable wipe, then rinse and dry.
- 2. Position yourself in **one** of these ways:
 - Sit on the toilet with your hips forward and lean back a little (Picture 3). You may want to put a plastic covered pillow behind your back to give you more support and balance.
 - Sit in your wheelchair with your hips forward and lean back slightly.
 - Lie down with your legs apart.
 - Sit on the floor on a waterproof pad. You may want to lean against a wall for more support and balance.
 - Stand in front of the toilet with one foot on the seat if you are able.



- 4. Wash your perineum (between your legs) with soap and water or a Disposable wipe (Picture 2). Start in the front and wipe towards the back.
- 5. Get ready to insert the catheter in **one** of these ways:
 - Separate the labia (folds). Place your left index (pointer) finger over your clitoris (it feels like a small bump). Place your left middle finger over your vagina. It feels like a small hole).
 - OR, hold the labia (folds) apart by placing your left index and middle fingers on the labia and spread your fingers open.

HOW TO INSERT THE CATHETER

- 1. With your right hand, pick up the catheter and hold it about one inch from the tip.
- 2. Gently insert the catheter into the urinary opening (meatus) between your left fingers until urine begins to flow.
- 3. Hold the catheter in place until the urine stops flowing. Use your other hand to aim the end of the catheter into the toilet.
- 4. Gently insert the catheter about another 1/2 inch. Change your position a little, and strain, grunt, or cough a few times to help get all the urine out.
- 5. Slowly remove the catheter. Let any urine in the catheter drip into the toilet. Hold up both ends of the catheter in your hand to keep urine from spilling on your clothes.
- 6. Wipe your perineum with toilet tissue from front to back.



Picture 2 The perineal area.



Picture 3 Gently insert the catheter until urine begins to flow.

CARE OF THE CATHETER

- 1. Wash your hands with soap and water.
- 2. Wash the catheter, inside and out, with soap and water by rubbing it between your hands.
- 3. Rinse the catheter well and dry it with a clean towel or tissue.
- 4. Put the catheter in a plastic bag, pencil case, toothbrush holder, or other carrying case. Use a new plastic bag every day. If you use another type of case, wash it out once a day with soap and water and let it air-dry.
- 5. Wash and dry your hands.
- 6. Every few days rinse the catheters, inside and out, with full-strength distilled white vinegar. (This keeps crystals from forming inside the catheter.)

OTHER TIPS AND ADVICE

- If you're going to be in a place where soap and water are not available, you can carry disposable wipes for washing your hands and perineum.
- If you don't have soap and water or a disposable wipe, catheterize anyway. It's more important for urine to be emptied from your bladder regularly to help prevent infection and kidney damage.
- If you drop your only catheter on the ground, and there is no soap, water, or a disposable wipe, wipe it off as best you can, then go ahead and catheterize. It's more important to catheterize to empty urine from your bladder.
- Be sure to drain **all** the urine from your bladder. Remember to strain, grunt, change your position, or cough to help empty the bladder.
- The catheter may be kept in a plastic bag, toothbrush holder, or pencil case, and carried in your book bag, pocket, or purse.
- Catheters may be reused until they are too limp to handle or until they begin to crack. (Usually, about once a month, you will need to get new catheters.)
- Don't flush catheters down the toilet.
- If you have never seen your perineum, ask your mom (or whoever catheterizes you) to help you. You can use a mirror to see your perineum and where your labia, clitoris, urinary meatus (opening), and vagina are located. **Do not** use the mirror while you are learning to catheterize yourself. (You don't want to need a mirror with you every time you catheterize.)
- If you need more support to steady yourself while sitting on the toilet, bars can be attached to the wall or cabinet beside your toilet for you to hold on to. Ask your nurse about this.
- A catheter extension tubing made by Mentor will let you catheterize while sitting in your wheelchair. The urine goes through a long tube and drains into the toilet.

WHN TO CALL THE DOCTOR

Call your doctor at (phone)	or the Myelomeningocele	Clinic at (614)	722-5725	if any
of the following occurs:				

- Blood in the urine
- Chills or fever over 100°F by mouth or axillary (underarm)
- Nausea or vomiting
- Pain or tenderness across the lower back
- Dark, cloudy urine
- Change in the smell of the urine (Does it have a bad odor or a strong smell?)

If you have any questions, please ask your doctor or nurse, or call ______