

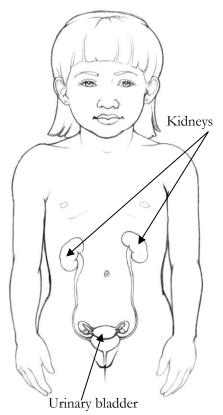
Helping Hand[™]

Catheterization: Self-Clean Intermittent – Female

Clean intermittent catheterization (kath-e-ter-i-ZA-shun) is done by putting 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 (UTI) 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 care 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

- $\Box \quad \text{Catheter (size} \quad)$
- □ Plastic bag or toothbrush holder to carry the catheter

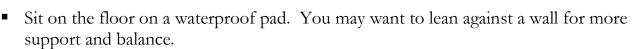
D Toilet tissue

 \square Soap and washcloth or a Wet Wipe \mathbb{R}

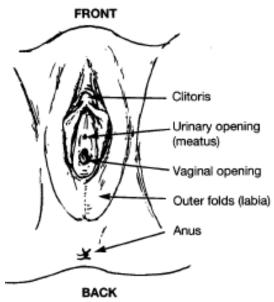
Getting ready

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 Wet 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 2). 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.



- Stand in front of the toilet with one foot on the seat if you are able.
- 3. Spread your legs apart.
- 4. Wash your perineum (between your legs) with soap and water or a disposable wipe (Picture 3). Start in the front and wipe toward 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.



Picture 3 The perineum.

Picture 2 Gently insert the catheter until urine begins to flow.

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.

Care of the reusable catheter

If you are have a catheter that can be used over and over, you will need to keep it clean. This will help keep you from getting an infection. Follow the steps below for cleaning 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.

You may rinse the catheter, inside and out, with full-strength distilled white vinegar as needed to prevent crystals from forming inside the catheter.

Other information

- If you are going to be in a place where soap and water are not available, you can carry Wet Wipes® for washing your hands and perineum.
- If you do not have soap and water or a Wet Wipe®, catheterize anyway. It is more important for urine be emptied from your bladder regularly to help prevent infection and kidney damage.

Other information, continued

- If you drop your only catheter on the ground, and there is no soap, water or a Wet Wipe[®], wipe it off as best you can then go ahead and catheterize. It is 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.)
- Do not 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 do not 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.
- 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.

When to call the doctor

Call the doctor or the Myelomeningocele Clinic at (614) 722-5275 if any of the following occurs:

- Blood in the urine
- Chills or fever over 100°F by mouth or axillary (under the arm)
- 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 have a strong smell?)
- Trouble inserting the catheter

Please call the Urology Nurses at 614-722-6630 or send a MyChart message to the Urology Clinic or the Myelomeningocele Clinic at 614-722-5275.