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### **Contact Us**

**Urgent Questions** or Concerns

Telehealth Nursing 651-229-3890

#### Other Questions About Your Care

St. Paul Clinic patients: Nurse Call Line 651-578-5000

Patients at other locations: Contact a member of your Gillette health care team.

## **Appointments** 651-290-8707

# Books, DVDs and More

Find materials about disabilities, medical conditions and support for caregivers.

## Health Resources and Education

St. Paul campus, near fourth-floor skyway

**651-229-3938** hre@gillettechildrens.com

## Clean Intermittent Catheterization at Home: Male

patient education
DIS104

Clean intermittent catheterization is a way to empty your bladder by using a new catheter each time and using clean technique to catheterize yourself. By emptying your bladder regularly, you can help prevent urinary tract infections (UTIs), bladder stones and renal damage.

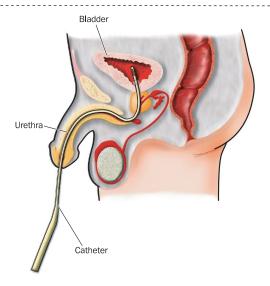
#### **Catheterization Schedule**

Catheterize at these times:

- 1. When you wake up in the morning
- 2. Every 4 hours during the day (your health care provider might give you a more specific schedule)
- 3. Before you go to bed

### **Steps to Catheterize**

- 1. Gather the equipment:
- Catheter (Size: \_\_\_\_\_Fr.)
- Soap and water and a clean washcloth or disposable wipes
- Water-soluble lubricant (such as K-Y Jelly). Do NOT use petroleum jelly, such as Vaseline
- Chucks or towel to place under yourself while catheterizing
- Urine collection container (if not catheterizing into the toilet)
- Gloves, if needed
- 2. Place all equipment on a clean surface.
- 3. Make sure your clothes are away from your body and you have enough light to see well.
- 4. Wash your hands well with soap and water. This reduces bacteria and prevents infection.
- 5. Open the catheter package and lubricate about 2 inches of the tip of the catheter with the water-soluble lubricant. Do **NOT** use petroleum jelly, such as Vaseline, because it doesn't dissolve.



- 6. Wash the end of your penis thoroughly with soap and water or a disposable wipe. If you're not circumcised, pull back your foreskin and wash thoroughly with soap and water. This reduces bacteria and prevents infection.
- 7. Place the drainage end of the catheter into a toilet, urinal or container.
- 8. Using your **nondominant hand** (for example, if you're right-handed, use your left hand), hold your penis erect, up and outward from your body. Grasp on the sides of your penis rather than pinching the top and bottom.
- 9. Hold the catheter with your **other hand** and insert it slowly about 6 inches into the opening of your penis (urethra), and continue to advance into the penis until urine flows through. When urine starts to flow, insert the catheter about 1 inch more. If you're using a coudé tip catheter, insert it with the curved tip pointing upward. Continue to hold the catheter in place until urine flow stops.

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- 10. If you feel resistance, just stop for a second. Take a deep breath. Then *gently* resume the insertion using gentle but firm pressure until your sphincter muscle relaxes and the catheter becomes easier to push. Your sphincter muscle controls the opening of your bladder. **Never force the catheter.**
- 11. After urine flow stops, slowly withdraw the catheter, allowing the urine in the bladder to completely empty. If you're not circumcised, pull your foreskin back over the head of your penis after you finish catheterization. If your foreskin is not returned, circulation can be affected, which can lead to tissue damage. If your foreskin is stuck and cannot be returned, this is a medical emergency. Go to a nearby emergency room.
- 12. When you're ready to remove the catheter tip, hold it so the urine drains down from the tip of the catheter and not onto you.
- 13. Look at your urine and take note of its color, odor, characteristics and amount. Record the amount if you've been instructed to do so by a health care provider. Then dispose of the urine and catheter. Wash your hands with soap and water.

## **Developing a Routine**

It's very important to set a schedule for catheterization. To establish a routine, keep a daily record of the time of catheterization, the amount of urine collected, and whether you're wet, damp or dry. Setting an alarm reminder on a cell phone, watch or other electronic device might be helpful.

Setting a routine might take several months. Once a routine is working well, you won't need to measure the amount of urine you collect each time you catheterize.

#### **Self-Catheterization**

To gain independence, you should learn to self-catheterize, if possible.

Because some patients have poor hand-eye coordinantion, it's important to practice activities that will help you guide the catheter into the urethra. Ask your health care provider for examples of activities that will help with this.

You should learn to catheterize from a seated position, so you can do it in a wheelchair, car or bed, or while you're on the toilet. To make it easier to pull clothing down for catheterization, consider sewing Velcro fasteners or zippers into seams at the sides or in the crotch area of pants.

### Follow-Up Visits

Your urologist or primary health care provider will recommend when to schedule follow-up visits. Bring your daily record of catheterization to your clinic visits, if directed to do so.

## When to Notify Your Health Care Provider

Notify your health care provider if:

- You can't pass the catheter through your urethra
- You leak urine between the times you catheterize
- You see blood in your urine
- You produce unusually small or large amounts of urine without a significant change in your eating or drinking activity
- You experience symptoms of a urinary tract infection, which might include:
  - o Pain or a burning sensation during catheterization
  - o Lower abdominal pain
  - o Fever higher than 101.5 F
  - o Increased leaking between the times you catheterize
  - o Increased odor of your urine