

Care and Use of an Indwelling (Foley) Catheter (Suprapubic [SP] or Urethral)

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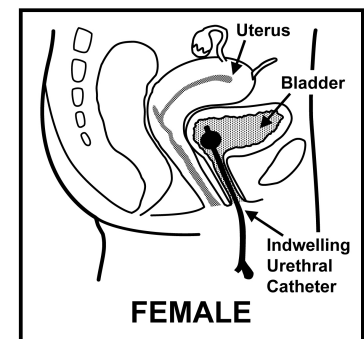
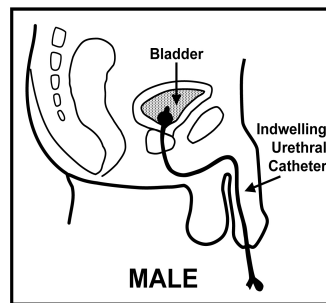
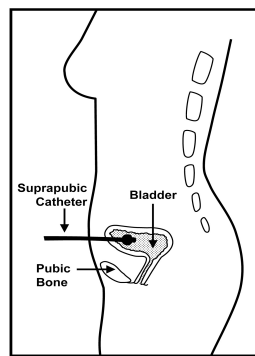
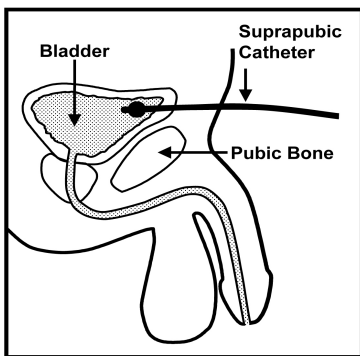
What Is an Indwelling Urinary Catheter?

A **catheter** is a soft tube that drains the urine from your bladder. The catheter is made from latex or other materials, such as silicone. The catheter is attached to a long tube that carries the urine to a **drainage bag**, which collects the urine. The catheter is held in place in the bladder by a balloon filled with water. The balloon sits at the bottom of your bladder and keeps the catheter from falling out. Once the catheter and bag are put in place, it is a **closed system** and should never be opened unless you are told to do so by your nurse or doctor. These catheters are ordered by your doctor and are usually changed by a nurse.

Why Do I Need An Indwelling Catheter?

Some people need help to empty urine from their bladder because of certain medical problems that do not let the bladder empty completely. If this happens, a tube called a catheter or Foley catheter is put into the bladder to drain the urine. The catheter can be put in your bladder in one of two ways and are shown here.

One way is through the urethra (the tube that carries urine from your bladder to the outside). The pictures to the right show a catheter that has been placed through the urethra.



The other way is through an opening or hole made in your lower abdomen above your pubic bone and is called a suprapubic or "SP catheter." The pictures to the left show a catheter that has been placed through the stomach, into the bladder, above the pubic bone.

How Does a Catheter Feel?

You may sometimes feel burning or spasms when urine passes through the catheter. This is normal so don't be alarmed. The spasms may cause some urine to leak out around the catheter. If the leaking does not stop, call your doctor or nurse. A medication to relieve the spasms may be prescribed. This may also be a sign that the catheter needs to be changed.

How to Care for Your Catheter

ALWAYS wash your hands before and after touching the catheter, tube, or bag. Wash the skin around the catheter with soap and water every day and after you move your bowels. You can also use antibacterial soap to wash. It is okay to shower if you have a catheter. Empty the drainage bag at least every 4 to 8 hours or if it becomes filled with urine before 4 hours. Do not touch the end of the drainage spout. Do not disconnect any part of the catheter system unless your doctor or nurse has allowed you to use a leg bag during the day and an overnight bag at night. If the tubing becomes disconnected, clean the ends with an alcohol-soaked pad and reconnect it immediately. Then call the nurse, because the catheter may need to be changed or you have an infection.

How to Position Your Catheter and Drainage

Avoid kinks or loops in the catheter and tubing that could stop the flow of urine. When you go to bed, hang the night bag on the side of your bed or put it in a small wastebasket lined with a clean plastic trash bag next to your bed. Keep drainage bags below the level of the bladder at all times.

Securing the Catheter

As shown in the picture to the right, the urethral catheter should be attached to your upper thigh. The suprapubic catheter should be taped or secured to your stomach. With both types, leave some slack on the catheter to prevent tension on the bladder.



How to Prevent Infections

Drink plenty of nonalcoholic liquids daily (at least 6 to 8 glasses, 8-ounce size), unless your doctor or nurse tells you otherwise. Liquids include water, tea, coffee, ice cream, sherbet, fruit juice, Popsicles, Kool-Aid, lemonade, and the like. Take vitamin C (true ascorbic acid), 500 to 1,000 mg two times a day, or drink three 8-oz glasses of cranberry juice, or take two cranberry pills (500 mg) each day. For infections that do not clear up or keep coming back, call your doctor or nurse.

What to Do and What Not to Do

- **Do**—Drink enough liquids during the day as this will help keep fluids moving through the catheter and prevent infection. Keep glasses of water or a jug of water around the house, near you.
- **Do**—Wash once a day the area around the catheter where it enters your urethra or the opening in your stomach. Wash with soap and water. Also, wash after you have a bowel movement.
- **Do**—Wash your hands before and after emptying or changing drainage bags.
- **Do**—Keep the drainage bag connected to the catheter while in the shower.

- **Do Not**—pull on the catheter, tubing, or bag, and never pull out the catheter yourself.
- **Do Not**—irrigate the catheter, unless told to do so by your doctor or unless you have been shown the correct way to do it. If it becomes clogged and stops draining, call your doctor or nurse.
- **Do Not**—be alarmed if the catheter sometimes leaks. This is normal and is caused by bladder spasms. It is only a problem if there is no urine in the drainage bag.

Call Your Doctor or Nurse if:

- Your urine has a strong smell, becomes cloudy or dark, or turns red.
- You have chills, a fever above 100° F, low back pain, weakness, and/or leakage around the catheter.
- There is swelling at the place where the catheter is inserted.
- There is an increased amount of sediment in the drainage tube or bag.
- The catheter is not draining any urine (first make sure the catheter or tubing is not blocked or kinked).
- The catheter falls out. *If you have an SP catheter and it falls out, you must call your doctor or nurse right away.*

Adapted from: Newman, D. K. and A. J. Wein. (2009). "Urinary Collection and Management Products." *Managing and Treating Urinary Incontinence*, 2nd ed. Health Professions Press; Baltimore, MD.



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