

Royal Manchester Children's Hospital

Information for Patients

Indwelling Catheter Care

This leaflet is for parents or carers whose baby or child is going home with an indwelling catheter and will help you manage the catheter at home. The catheter may be inserted via the urethra (where wee drains) or suprapubic (directly into the bladder through the lower tummy).

There are many different reasons why children require this form of catheterisation. Your doctor/nurse will explain the reasons why your child requires an indwelling catheter.

What is a catheter?

A catheter is a hollow, flexible tube which helps to drain the urine from the child's bladder. To prevent the catheter falling out, a small balloon at the catheter tip is inflated once the catheter is passed into the bladder.

Catheters can be inserted via the urethra (the hole through which you usually pass urine) or through the abdomen (this is called a suprapubic catheter).

This is the drainage port where you when we put the catheter in, then we fill it connect the drainage bag/flip-flo with water once it's in the bladder (you do catheter valve. This is also where not feel this). When the catheter is ready you connect the syringe to do a to be removed, we empty the balloon first flush/washout if necessary This is the balloon port. When we inflate or deflate the balloon, we attach the syringe to this port to put in or take out the water

This is usually how far a catheter is inserted. although it varies for every individual. The balloon is inside the bladder, and the balloon port and drainage port are always on the outside of the body

This is the balloon. The balloon is empty







How is the urine collected from the catheter?

Your child's catheter will be attached to a urine bag which allows the urine to drain freely all the time. Alternatively, the catheter may be attached to a catheter valve which is a tap that fits on the end of the catheter and can be opened and closed to empty the bladder intermittently. Your Doctor will decide which form of drainage is appropriate for your child.

If you child is still in nappies, the catheter can be drained into the nappy, using "double nappies", which prevents faeces contaminating the catheter. You will be shown how to do the nappies by the ward nursing staff before you go home.

What is a catheter bag?

There are two types of urine drainage bags:

1. Leg Bag

A leg bag is worn under normal clothing during the day, usually secured by soft, comfortable Velcro straps around your child's calf or thigh. As the bag fills, it will need to be emptied from the tap at the bottom of the bag. Leg bags are discreet but hold less than an overnight drainage bag so it may need to be emptied more regularly. It is important that the bag is not allowed to become overfilled as it can become heavy, pull on the catheter and eventually burst. The overnight drainage bag is connected directly to the bottom of the leg bag for overnight drainage.

2. Overnight drainage bag

An overnight urine drainage bag is a much larger bag that connects by a long tube to the end of the leg bag/catheter valve and provides larger storage for overnight drainage. To ensure free flow of urine overnight, the leg bag/catheter valve must be opened once the overnight bag is attached and the overnight bag placed below the level of the bladder.

What is a catheter valve?

A catheter valve is a small tap that fits on the end of the catheter. This acts like a clamp and must be opened every 3-4 hours during the day to drain your child's bladder. Depending on your child's condition, you may be asked to open it more or less frequently than this. You can drain the urine straight into the toilet or into a jug. If you are using a catheter valve, you will not need a leg bag during the day.

Most children who use a catheter valve during the daytime will need to open the valve and connect it to an overnight drainage bag at night.

The catheter valve must be changed every 7 days.

















How do I empty the catheter bag?

Emptying the catheter bag is a very simple procedure and, if your child is old enough, they can help and eventually learn to do it themselves.

- 1) Wash your hands before touching the catheter or bag
- 2) Clean the tap at the bottom of the bag with a tissue/wipe, and then open the tap and allow the urine to drainage either into the toilet or a measuring jug
- 3) Close the tap and wipe the end with a tissue/wipe to ensure it is dry
- 4) Wash your hands again

Leg bags/catheter valves are only disconnected from the catheter when they are changed every seven days, or if the catheter needs flushing because it is blocked. Overnight drainage bags are changed every night.

How do I connect the overnight urine drainage bag?

- 1) Wash your hands
- 2) If your child has a leg bag, empty the bag and close the tap
- 3) Remove the protective cap from the overnight drainage bag and insert the overnight drainage bag into the end of the leg bag/catheter valve
- 4) Open the tap on the leg bag or catheter valve and check urine flows freely into the night bag

Ensure that the overnight bag is lower that your child's bladder to allow urine to drain freely.

In the morning, close the tap on the leg bag or catheter valve and disconnect the overnight bag. Empty the urine from the overnight bag into the toilet and place the bag into a plastic bag and dispose of in the dustbin. The urine bags are designed to be disposable and can be placed in the dustbin; overnight bags should not be reconnected once disconnected.

How do I change the catheter bag/catheter valve?

- 1) Wash your hands
- 2) Clean around the catheter junction where is connected to the leg bag/catheter valve with a tissue/wipe
- 3) Disconnect the leg bag/catheter valve from the catheter
- 4) Remove the protective cap from the new leg bag/catheter valve and insert the new leg bag/catheter valve into the catheter
- 5) Check the urine flows freely

How often does the catheter need to be changed?

Most catheters need changing every 3 months, although this depends on your child, their underlying condition, and what kind of catheter it is. Your consultant will tell you when the catheter needs to be changed.

Your child will usually be admitted to the hospital as a day case to have the catheter changed routinely; the urology nurse specialists usually arrange this. If your child has a suprapubic catheter, they may need to have the catheter changed under a general anaesthetic.







Where do I get supplies of bags/catheter valves?

Manchester University

You will be given a 2 week of supply of equipment from the discharging ward, and your nurse specialist will organise ongoing supplies to be delivered to your home address. It is important your address and GP details are up to date with the Hospital, as we will use this information when setting up your home delivery.

It can take up to 2 weeks for equipment to arrive at home after an order is placed with a home delivery company, so you should always order your next delivery via your home delivery company once you have approximately 2 weeks of supplies left. This will be your responsibility once you receive your first order.

What are bladder spasms?

When a catheter is in the bladder, it can irritate the nerves and lining of the bladder and cause "bladder spasms". Children often display symptoms of sudden discomfort which can last anything from a few seconds to several minutes, and then the symptoms often pass. This can happen occasionally or frequently throughout the day for the duration the catheter is in place.

If you think your child may be experiencing bladder spasms then please contact the nurse specialists or the urology secretaries as we may be able to give your child some medication to relax the bladder and reduce the frequency or severity of the bladder spasms. Pain relief such as paracetamol will not improve bladder spasms, so it's important you contact us if you think this is what your child is experiencing.

What if the catheter stops draining?

It is important you keep a close eye on your child's catheter to ensure it is draining; if the catheter stops draining then the bladder can become overly distended which can cause other complications and potentially make your child unwell.

There are some simple things you can do to check why the catheter might not be draining:

- Check that the catheter is not twisted or kinked
- Check the catheter drainage bag is lower than the bladder
- Check the leg bag/catheter valve are connected properly
- Check that your child's clothing is not too tight and restricting the flow of urine
- Has your child been drinking enough? This is especially important in hot weather and during exercise

Catheter Flushing

If your child's catheter stops draining it may be necessary to flush the catheter with saline (0.9% sodium chloride). The solution is inserted into the bladder and then removed. This is known as a catheter flush or bladder washout. You will be shown how to do this by the ward staff before you are discharged and given written instructions should you need to perform this at home.







Caring for my suprapubic exit site

The exit site needs to be cleaned once a day using warm water and unperfumed soap. Using a clean cloth, wipe away from the abdomen a little way down the catheter tube, never towards the site. The site does not need a dressing over it unless it is actively oozing, or it is within 48 hours of the catheter being inserted. If you go swimming, ensure you cover the site with a waterproof dressing.

Infections

Observe the site for signs of infection. If the surrounding skin is red, hot, painful, hard, inflamed or there is an offensive discharge, contact your Community Nurse or GP. Never use talcum powder or creams around the site of the supra pubic catheter, these can cause irritation.

Keep the site free of hairs as these can cause irritation, shave the area if necessary.

Commonly asked questions

Can my child have a bath?

Yes, try to give you child a daily bath or shower. Do not use strong perfumed soaps, or creams on or around the catheter. If your child has a suprapubic catheter, then you may need to cover the site with a waterproof dressing. Ensure the catheter bag is emptied before the bath and that it is kept out of the water.

Can I go swimming?

Yes, but we would usually recommend you disconnect the catheter from the bag/valve and securely attach a spigot (small green bung) to prevent water entering the catheter. If your child has a suprapubic catheter, then you may need to cover the site with a waterproof dressing.

How much can my child have to drink?

Encourage your child to drink 6-8 glasses of fluid per day, although this varies depending on the age of your child and their underlying condition. Your Doctor/nurse will provide any advice specific to your child. Cranberry juice may help to reduce urinary tract infections, although it is very high in sugar so should be drank in moderation.

What should I give my child to eat?

Encourage your child to eat plenty of fresh fruit, vegetables and cereals to provide enough fibre to avoid constipation.

Are we able to travel?

Yes, but you must always take enough supplies with you to last the whole holiday. It's also useful to take a spare catheter with you, the urology nurse specialists can provide you with this. If you are travelling abroad, the urology nurse specialists can write a letter explaining why you must travel with medical equipment. This may save time with custom officials.

Always carry some supplies in your hand luggage just in case your luggage gets lost.

Remember to check the small print on your travel insurance policy to make sure that it includes your child's medical condition.





Please contact your GP/Hospital ward if your child:



- Has a high temperature
- Complains of feeling generally unwell
- Has strong smelling urine or there is visible blood in the urine
- Complains of back pain

If the catheter falls out contact the hospital immediately

If your child has a suprapubic catheter this is especially important as the tract (opening) where the catheter is can close very quickly. Likewise, if your child has a urethral catheter, your child may struggle to pass urine until the catheter is repassed.

Contact

If you would like to discuss any of the information in this leaflet further, please contact a member of the team.

In case of problems or advice please call:

Secretaries

Clinical Nurse Specialists

Ward 77 (urology ward) Ward 76 (day case) (0161) 701 1635 (0161) 701 2476 (Hayley) (0161) 701 1637 (Sue) (0161) 701 7707 (Jen) (0161) 701 7700 (0161) 701 7600



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