

NHS Urinary Catheter Passport

Information for patients and carers



Issue date: _____

Patient ID: _____

Always wash and dry your hands before and after touching your catheter and catheter bag to help prevent infection!



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Patient details

Patient	
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GP	Name:	
	Address:	
	Tel No:	

Who to contact

Community Nurse	Name and Clinic name:	
	Address:	
	Daytime Tel No:	
	Out of Hours No:	

Other	Name and Clinic name:	
	Address:	
	Daytime Tel No:	
	Out of Hours No:	

Catheter details

Catheter initiated by and date:	Hospital <input type="checkbox"/> Date: Community <input type="checkbox"/>
Reason for catheter insertion:	
Catheter type:	Urethral / Suprapubic Short term / Long term
Catheter details: Size / Length:	
Amount of water in balloon:	
Problems on catheterisation Yes <input type="checkbox"/> No <input type="checkbox"/>	Details:
Urinary drainage system:	Long tube / short tube Leg bag / valve Night time drainage Yes <input type="checkbox"/> No <input type="checkbox"/> Catheter anchorage type: Choice of catheter products discussed with patient & ordered Yes <input type="checkbox"/> No <input type="checkbox"/>
Date of next planned change Trial without catheter	Details:
Catheter can be changed by district nurse in community	Yes <input type="checkbox"/> (ensure spare catheters No <input type="checkbox"/> supplied and ordered)
Signature:	

UTI - antibiotic treatment

Known colonisation with antibiotic resistant bacteria If Yes - please tick below and record date (if known)		Yes / No
<input type="checkbox"/> MRSA	<input type="checkbox"/> VRE	<input type="checkbox"/> ESBL
<input type="checkbox"/> MRSA	<input type="checkbox"/> VRE	<input type="checkbox"/> CPE
<input type="checkbox"/> MRSA	<input type="checkbox"/> VRE	<input type="checkbox"/> Other MDR

Date	CSU result	Blood culture result (n/a if not obtained)	Antibiotic commenced for CAUTI + duration <small>(if gentamicin and/or ciprofloxacin resistant, CPE or MDR isolate seek advice from medical microbiologist re antibiotic prescribing)</small>

UTI / CAUTI / Antibiotic therapy

Date	CSU result	Blood culture result (n/a if not obtained)	Antibiotic commenced for CAUTI + duration (If gentamicin and/or ciprofloxacin resistant, CPE or MDR isolate seek advice from medical microbiologist re antibiotic prescribing)

(CA)UTI: (Catheter associated) urinary tract infection **CSU:** Catheter specimen urine
CDT: Clostridium difficile toxin **MRSA:** methicillin resistant Staphylococcus aureus
CPE: carbapenem resistant bacteria **VRE:** vancomycin resistant enterococcus
MDR: multidrug resistant bacteria **ESBL:** Extended spectrum β -lactamase producing
 bacteria resistant to penicillin and cephalosporin antibiotics

Subsequent catheter changes

Catheter bags to be changed every 7 days on every day

Catheter label:	
Reason for catheter change:	
Problems:	
Date of next planned change:	
Print name: Signature: Designation:	

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Reason for catheter change:	
Problems:	
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What is a urinary catheter?

A catheter is simply a hollow tube which drains urine from the bladder. It is usually inserted through the urethra, see pictures below (the tube that leads from the bladder to the outside of the body). Occasionally it will be inserted through a small incision in the abdominal wall (suprapubic catheter).

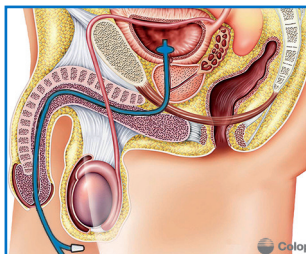
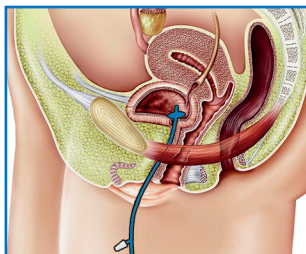
It is held in place by a small balloon filled with sterile water following insertion of the catheter. A catheter is usually necessary because the bladder is not emptying properly.

Urine drains into the catheter bag as the bladder fills. The bag will be strapped to the leg so that it is hidden under your clothing.

You will be advised about appropriate straps by the nurse.

Usually the leg bag is changed on a weekly basis. Do not disconnect your leg bag from the catheter unless it is being changed.

This will help to stop bacteria from getting into the drainage system and help reduce the risk of infection.



Bags come in different sizes with different lengths of tube; your Community Nurse will be able to advise you on the most suitable bag for your needs.

What problems might I face?

- Infection and catheter blockage can occur
- Signs of infection may include feeling unwell, a high temperature, change in smell of urine, cloudy urine.
- Pink / rose coloured urine could be caused by blood as a result of infection or trauma from the catheter being inserted or pulled

You should call your nurse or doctor if you notice any of the following:

- A high temperature,
- Feeling unwell,
- Pain in your lower abdomen or where the catheter comes out,
- Cloudy, blood stained or offensive smelling urine,
- No urine passed in over four hours,
- Bladder spasms, which feel like abdominal cramps caused by your bladder trying to squeeze out the balloon,
- Leakage around the catheter caused by contipation, bladder spasms or a blocked catheter.

When your catheter is first inserted you may still feel as though you need to go to the toilet and you may get occasional bladder cramps.

This will usually settle down in a few days. If not, speak to the Community Nurse.

Sometimes urine may leak around the outside of your catheter. This is not an emergency as long as your catheter is still draining but please inform the Community Nurse.

If urine is not draining into your bag consider the following:

- Ensure there are no kinks in the catheter tubing,
- Check the bag is below the level of the bladder,
- Make sure you are drinking enough liquid,
- You may be constipated.

If the problem fails to resolve by simple measures, contact the Community Nurse.

Risks of indwelling urinary catheters

Long-term catheterisation carries a significant risk of urinary tract infection. The risk of infection increases if your catheter is left in place continuously (an indwelling catheter).

Bladder spasms, which feels like abdominal cramp, are quite common when you have a catheter in your bladder. The pain is caused by the bladder trying to squeeze out the balloon.

Leakage around the catheter is another problem associated with indwelling catheters.

This is called by-passing and can occur as a result of bladder spasms, constipation or a blocked catheter, so it's essential to check that the catheter is draining.

Blood or debris in the catheter tube is also fairly common with an indwelling catheter, this could become a problem if the catheter drainage system becomes blocked.

What happens when the bag fills up?

It is important not to let your leg bag get too full. It should be emptied when it is around three quarters full. However, emptying it too often will increase the risk of bacteria entering the draining system.

If you live in your own home, the urine may be drained straight into the toilet. To empty the bag, open the tap at the bottom and let it drain. If you live in a nursing or residential home, or find it difficult to reach the toilet, you should use a container reserved for your urine only, which can be washed and dried thoroughly in between use.

Remember to close the tap once you have emptied the bag.

Important: you and your carers should wash your hands before and after emptying your bag.

At night time a larger bag called an overnight drainage bag should be attached directly to your leg bag when you go to bed.

This can hold all the urine that drains from your bladder overnight, and this is known as the closed drainage system, as shown in the picture.

You will be shown how to attach the night bag. You may loosen the straps on your leg bag when



you get into bed. Make sure that your overnight drainage bag is supported on a stand by the side of your bed. This can be provided by the Community Nurse.

The bag should be kept off the floor, but at a level lower than the bladder, as urine cannot drain uphill.

You will need to have a new overnight drainage bag attached every night.

Are there any alternatives to wearing a urine drainage bag?

Yes there are catheter valves which attach to the end of the catheter enabling your bladder to continue storing urine. It is important to drain your bladder by opening the valve when you feel the need to pass urine, or every 3 hours during the day.

At night time you need to have a night bag attached to the valve and the valve position left open so that the urine can drain straight into the bag. This is called “free drainage”.

Care of the catheter valve

Change the catheter valve every 5-7 days. To minimise the risk of infection it is essential to wash your hands before and after emptying, or changing the valve.

When emptying the valve try to make sure that the outlet does not come into contact with toilet or other receptacle and the outlet tap is dried with clean tissue paper following emptying.

It is possible to attach an overnight bag to the valve. Once the night bag is connected, the valve should be in the open position to allow urine to drain.

Disposing of catheter valves

Catheter valves may be disposed of in the dustbin, provided they have been wrapped in newspaper or a plastic bag.

How long should my catheter stay in?

This will depend on the reason your catheter was inserted and the type of catheter you have. The nurse will review the need for the catheter at each change.

How do I dispose of the drainage bags?

Empty any urine from the drainage bags into the toilet, and then wrap them in newspaper or a plastic bag and place them in the dustbin.

How do I store my catheters and drainage bags?

It is important to store spare catheters and your urine drainage bags in their original packaging away from heat and direct sunlight. You should always have a spare catheter and an adequate supply of catheter bags in case of emergencies.

What should I eat and drink?

Try to drink at least 1.5 litres (2.5 pints) of fluid every day to ensure good urine drainage. You do not need to change your diet. It is a good idea to make sure that you are eating fresh fruit, vegetables and fibre so that you do not become constipated.

Constipation

A full bowel may press on the catheter and stop urine from draining. If you think you may be constipated, speak to the nurse or doctor as soon as possible.

Is my personal hygiene important?

Yes, gently wash the area around your catheter with mild soap and water each day and dry thoroughly. If possible, take a daily bath or shower. Do not remove your leg bag when taking a bath or shower.

Men should wash carefully under the foreskin. It should be pulled back in place after washing.

Women need to take extra care in cleaning the area around the back passage, always wiping from front to back after going to the toilet. Do not use talcum powder or creams around your catheter.

Remember, you (and/or your carers) must wash your hands before and after touching your catheter.

Will the catheter affect me having sex?

Sexual intercourse is possible if you take the following steps.

- Wash genitals before and after sexual intercourse.
- Men should tape their catheter along the penis and then apply a condom.
- Women can tape their catheter along their abdomen.
- A suprapubic catheter can be considered for those with an active sex life.

Do I need a catheter stand?

You will require a catheter stand to hold your urine drainage bag off the floor whilst you are in bed or sitting if it is not attached to a leg bag. This is to reduce the risk of infection and reduce the risk of you pulling out your catheter accidentally.

Attach the night catheter drainage bag to the stand and hang this on the side of the bed or place it on the floor. The District Nurse will show you how to do this at the first visit.

Wash the catheter stand as required with warm soapy water. Dry with disposable paper towels or allow to air dry.

Are there any safety precautions?

Remember to disconnect the night catheter drainage bag from the stand when you get up. Should any fault be seen with the catheter stand, please contact the Community Nursing Services who will arrange for a replacement.

When should I contact my Community Nurse?

If you have pain related to your catheter or bladder and / or :

- You have not drained any urine and have checked for problems

- If your catheter comes out
- If you think that your catheter may be blocked
- You see blood in your urine (a small amount of blood following a change of catheter is not unusual)
- Your urine is smelly and/or cloudy (make sure you are drinking plenty of fluid). Urine should be light yellow in colour. If it is dark brown you may not be drinking enough.

Where can I get further supplies?

Keep either option 1 or 2

*** 1 *** You can order your supplies from Coloplast Charter home delivery service on 0800 132 787

You can request which items you need and they will be delivered to your door free of charge. Please note that new patients will need to register for home delivery. Your healthcare professional can advise you on what to order.

Please always ensure you have two weeks' worth of supply when placing further orders as Coloplast Charter has to request the prescription from your doctor.

You can also choose to take your prescription to your local chemist.

*** 2 *** You can choose to collect the prescription yourself, ask your GP to pass to the pharmacy, or use a delivery appliance contractor (home delivery).

Please always ensure you have two week's supply.

Useful Information

XX Community Health

Dept or Name:

01234 567890

XX Hospital NHS Trust

Dept or Name:

01234 567890

Bladder and Bowel Foundation

01926 357220

help@bladderandbowelfoundation.org

NHS 24/7

24 hour advice & health information

111

Coloplast Charter - home delivery service

To obtain supplies or product advice

0800 132 787

(Mon-Fri 8am to 6pm, Sat 9am to 12:30pm)

help@charter.co.uk