

## Catheter care

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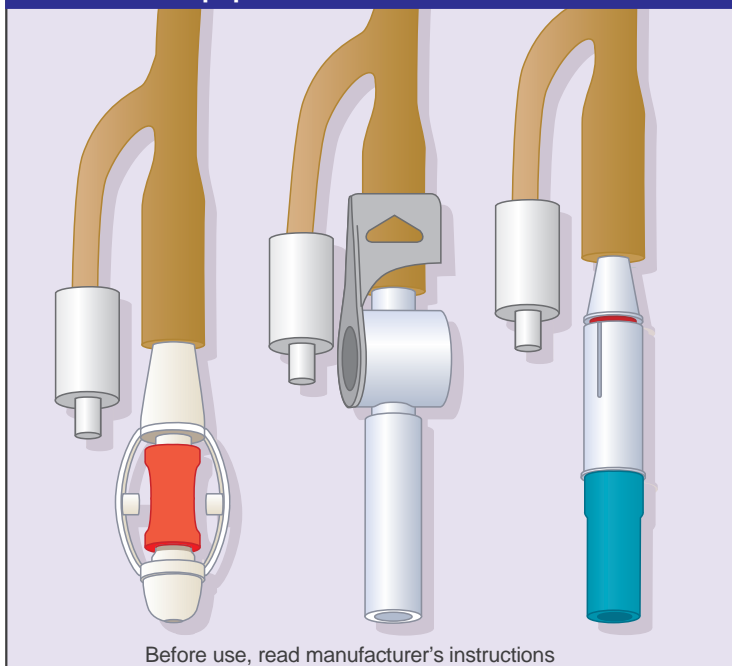
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Guidance from the National Institute for Health and Care Excellence (NICE, 2017) suggests that indwelling urinary catheters should only be used after alternative methods of managing urinary problems have been considered. Some patients may feel apprehensive about having a catheter inserted. The procedure may have been necessary to relieve urinary retention, or to improve the patient's quality of life and offer greater independence.

It is essential that patients who have had an indwelling catheter inserted are given adequate information on how to care for their catheter and change the drainage equipment. If patients are too ill to care for their own catheter, or lack the mobility or manual dexterity to do so, healthcare professionals and/or their carers will need to take responsibility for this aspect of care. Some patients may be able to choose between using a continuous urine drainage bag or a catheter valve.

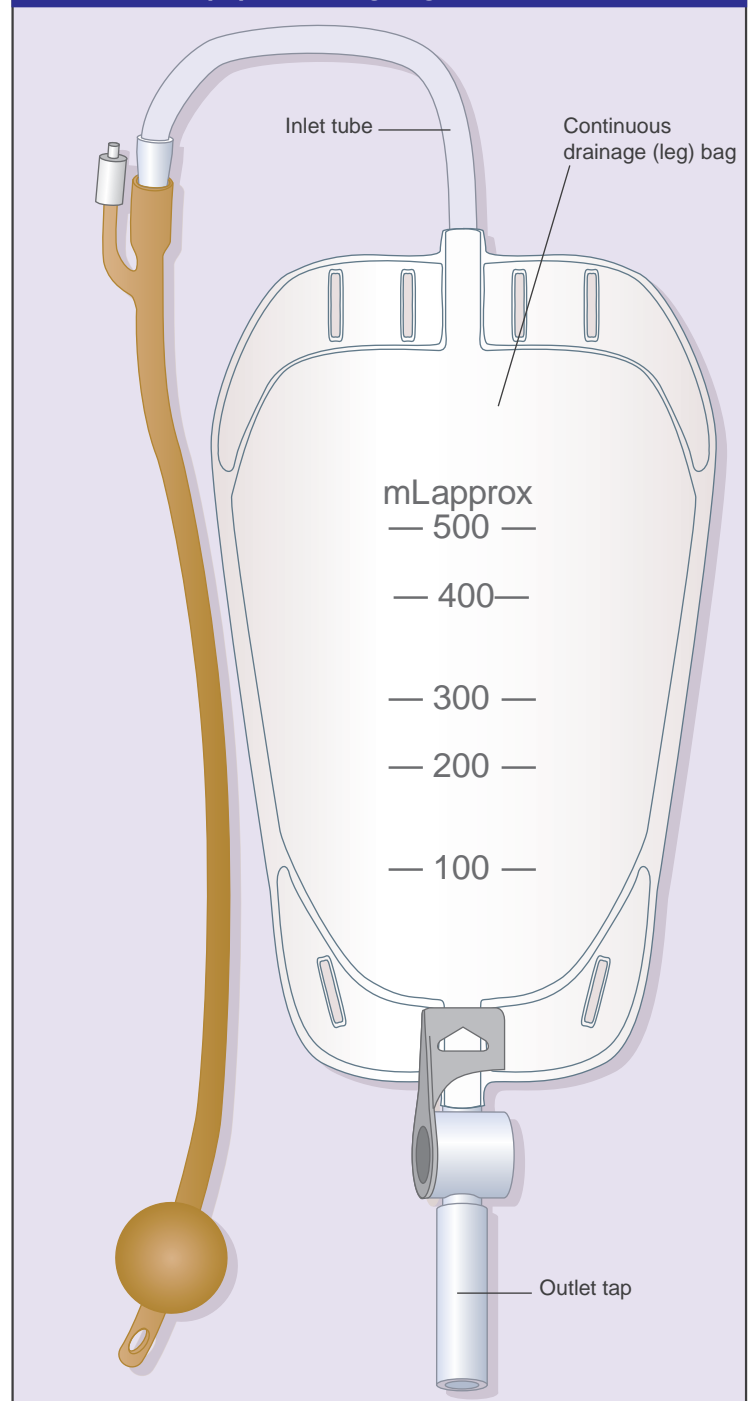
For information on how to remove a catheter, see the [clinicalskills.net](http://clinicalskills.net) procedure, "Trial removal of a catheter".

### Selection of equipment—catheter valve



Patients who have bladder sensation, a stable bladder, and who are likely to have a trial without catheter, should be offered a catheter valve rather than a continuous drainage bag. The patient can release the catheter valve several times a day when they feel that the bladder is full and needs to be emptied. It is therefore necessary to carefully assess the patient and their bladder function before selecting a catheter valve. Several types of catheter valves are available. A continuous drainage bag can be attached to most catheter valves to allow urine drainage overnight. In an acute setting, a valve-less catheter on continuous drainage into a large-capacity bag is most commonly used. Catheter valves that are currently available on the Drug Tariff should be changed every 5–7 days, in accordance with local policy and the manufacturer's recommendations. A catheter valve is contraindicated for patients with reduced bladder capacity, absence of bladder sensation and cognitive impairment, as well as those who do not have the manual dexterity to operate the catheter valve.

### Selection of equipment—leg bag



If a leg bag is the most appropriate urinary drainage system for the patient, the following features will influence your choice: the length of the drainage tubing (short, medium or long), the volume of urine to be contained (350 mL, 500 mL, 750 mL) and the outlet tap, which needs to be easy to open for the user/carer. Most leg bags have an integral sampling port to enable a urine sample to be taken.







