



Caring for your Urinary Catheter

What Is a urinary catheter?

A urinary catheter is a soft flexible tube that is inserted into the bladder to drain urine.

There are 2 types of urinary catheters:

- **Urethral catheter** a soft flexible tube that is inserted into the bladder through the urethra (opening where urine comes out)
- **Suprapubic catheter** a soft flexible tube inserted during surgery into the bladder through your child's lower abdomen (tummy)

Why does my child need a urinary catheter?

- Allows bladder to be emptied on a regular basis
- Keeps the bladder empty to allow it to heal

Will my child be in pain?

Your child may experience bladder pain (bladder spasms) especially during the first few days after the catheter is inserted. Bladder spasms are contractions of the bladder wall muscle. Signs of a bladder spasm are sudden irritability, drawing up their legs, urge to urinate, small urinary accidents, blood in the urine or feeling pressure in their bottom. The spasms can come and go and usually last less than a minute.

Always check to be sure that the catheter is draining by looking to make sure there are no kinks in the catheter or tubing. If the catheter is not draining, you will need to irrigate the catheter. See "how do I irrigate the urinary catheter" in this document.

Bladder spasms can also be caused by any of the following:

- healing of the bladder wall incision
- catheter irritating the wall of the bladder
- kinked or blocked catheter (urine not able to drain out of the bladder)
- constipation

Keep your child's urine dilute with good fluid intake. Minimize intake of caffeine, carbonation, citrus, chocolate, and excessive vitamin C, these are bladder irritants and can make the spasms worse. Constipation can also worsen the spasms. Keep stools soft and easy to pass daily. Medications will be prescribed to help alleviate the bladder spasms.

While your child's catheter is in place they should avoid sporting activities, gym class, swimming, and bike riding.



How should I care for my child's urinary catheter?

Caring for a urinary catheter may be a little scary at first. Your child's nurse will teach you and help you become comfortable with the procedures before you do them yourself.

- Keep the catheter secure to your child's body to avoid being pulled on or accidentally pulled out.
- Wash area around catheter daily with plain water removing any crust like drainage or mucous.
- Apply Vaseline® or Aquaphor® where the catheter enters the body, either the urethra or lower abdomen to protect the skin

How do I care for the drainage bag?

The catheter may be connected to a drainage bag or may drain into a diaper. Always keep the drainage bag below the waist, so the urine can't run back towards the bladder. A leg bag may be used when sitting in a chair or walking.

- Avoid kinking, twisting, or clamping the catheter.
- If your child's urinary catheter is connected to a drainage bag, empty the bag whenever it is half full, and anytime you disconnect it from the catheter. Never leave urine in the bag when it is not in use.
- Before disconnecting or reconnecting the urinary catheter and drainage bag, clean the connection area of the tubes using a baby wipe.
- Clean the drainage bag **every day** while it is disconnected from the catheter, using 1 part vinegar and 3 parts water. Hang or lay flat to dry.
- You will need to discard the drainage bag every 7 days.

For an **infant**, the doctor may recommend draining the tube into a diaper so there is no need for a drainage bag. Your baby will wear a regular-sized diaper with the tube on the **outside** of the diaper and a larger diaper on top. This keeps stool from getting into the tube.

How do I irrigate the urinary catheter?

Irrigation is a procedure to wash out the inside of your child's bladder and to keep the urine free flowing through the catheter. The bladder and catheter will be irrigated with normal saline (salt water) to flush out any mucus or debris. Irrigation may be done only as needed, once a day, or each time you empty the bladder. If there is no urine coming out of the catheter, or there is urine leaking around the catheter you will need to irrigate the catheter. Always follow your surgeon's specific instructions when irrigating.

Supplies:

- 60 ml catheter tip syringe
- Measuring container
- Normal saline
- Basin



Procedure:

1. Wash hands.
2. Pour normal saline into measuring container.
3. Draw up 50-60mls of normal saline into syringe (the amount of normal saline may be different for each child).
4. Clean the end of the catheter if the catheter is draining into a diaper or the connection between the catheter and drainage bag and then disconnect.
5. Attach syringe to end of catheter and gently push the normal saline into the bladder.
6. Gently pull back on the plunger of the syringe and draw the normal saline back out of the bladder, discard the normal saline into the basin. If the normal saline has a lot of mucous, repeat the irrigation process once or twice more using fresh normal saline each time to remove remaining mucous.

Note: Never force more normal saline into the bladder until the previous normal saline has been removed.

7. Wash hands and clean the supplies.

Normal Saline Recipe

1 gallon of distilled water
8 teaspoons of table salt
Shake until salt dissolved

Normal saline is good for:

7 days if left out in room temperature
30 days if stored in the refrigerator (bring to room temperature before using)

What to call the surgeon for:

- Fever with worsening redness or pus like drainage around catheter site.
- Has blood clots or increasing amounts of blood in urine.
- Foul smelling or cloudy urine.
- Pain or bladder spasms not controlled with prescribed medications.

Call your primary care provider for any other concerns.

Questions? This sheet is not specific to your child but provides general information. If you have any questions, please call your surgeon's office at 612-813-8000 option # 6 to speak to the nurses.