



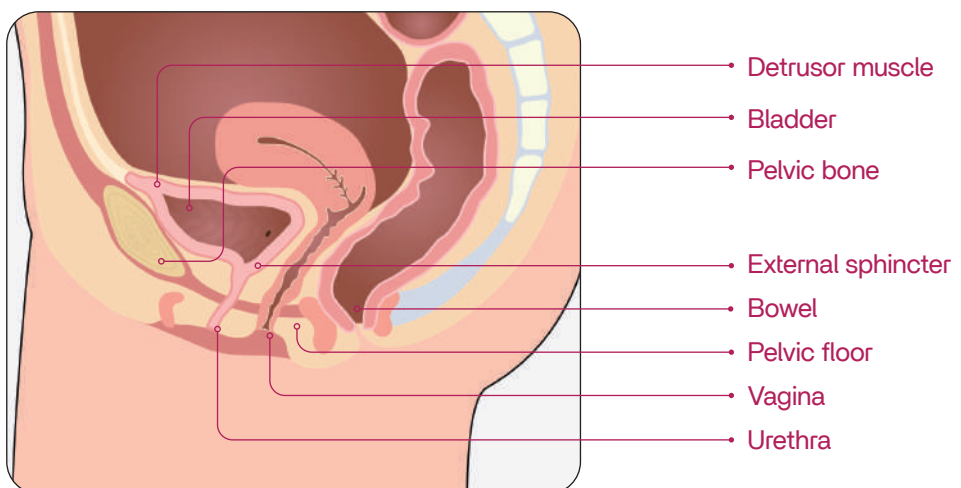
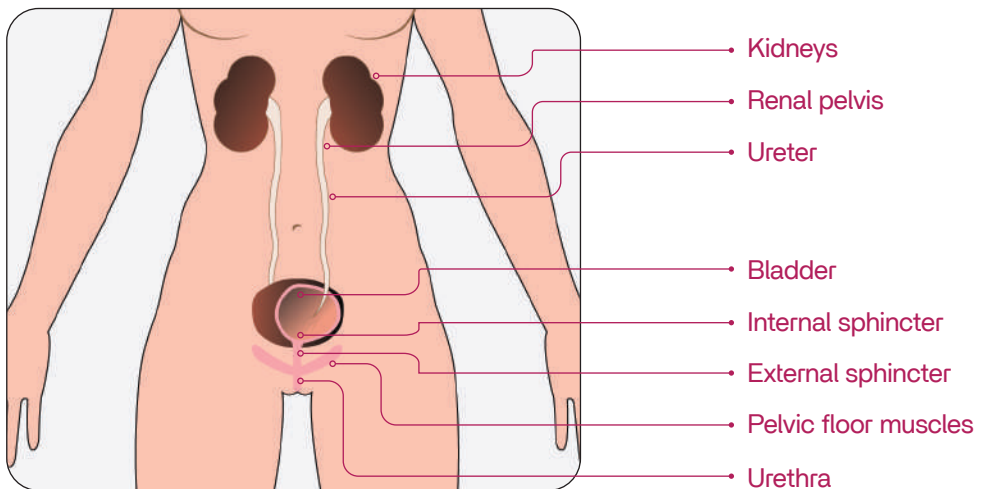
Healthy bladder care intermittent catheterisation

for people with a female urinary tract.

Female urinary tract

The urinary system is responsible for the elimination of waste and fluid in the body by making and excreting urine.

For normal urination to occur all parts of the urinary system need to work and be working together. The urinary system is the Kidneys, Ureter, Bladder and Urethra.



Female urinary tract

The kidneys have two primary functions:

- Eliminating waste products from the blood
- Regulating the body's salt and water balance

The kidneys excrete waste in the form of urine which is collected in the bladder. The bladder in turn serves as a reservoir to store the urine until such time that is convenient to empty it. The bladder is a large muscle that expands and contracts, think of it like a water balloon that inflates and deflates depending on how much liquid is in it.

Urine exits the bladder and passes via the internal sphincter; it works like a safety valve and is either open or closed. When open, urine flows into the toilet. The control of the bladder is via the central nervous system and coordinated by conscious and unconscious intent.

Volumes of urine vary from person to person but generally, the normal output is 200–400ml per urination and approximately 1–2 liters a day. The average person will urinate between 4–8 times a day.



Why bladder management matters

- Preventing reflux of urine and kidney damage
- Preventing complications, such as quantities of residual urine, Urinary Tract Infections (UTI's), stone formation etc
- Improving individual quality of life by reducing or eliminating incontinence and frequency of urges

What is a Urinary Tract Infection (UTI)

A UTI is a bacterial infection that contains fluids, salts and waste products. Urine does not normally contain bacteria, so when bacteria finds a way to enter the bladder or kidneys they will multiply, impacting the bladder lining and cause a UTI.

UTI's are either characterised as asymptomatic, meaning there is bacteria but no symptoms, or symptomatic, meaning that the patient is experiencing one or more of the following:

- Changes in bladder function
- Leakage/increased leakage
- Burning or painful emptying of the bladder
- Frequent urges often accompanied by small urine output
- Pain across the lower abdomen, back or kidney area
- Blood in the urine
- Offensive smelling urine
- Fever, sweating or chills
- Increased muscle tension or pain
- Confusion or lowered cognitive function

If you have symptoms of a Urinary Tract Infection, contact a health care professional for further medical advice.

Bladder management

All bladder management plans are individual to the patient and customised for your specific issues and lifestyle. In the first instance, this is usually with advice and tips on how to better manage issues. This may include improving pelvic floor function, medication to reduce urges and stabilise over-activity or direction for incontinence protection that is used for urine leakage.

Bladder catheterisation is a treatment that your health care professional may consider as a route of emptying the bladder of urine effectively. There are two methods of doing this, Intermittent Self Catheterisation (ISC) is the preferred method to reduce the possibility of urinary tract infections and the other is a more permanent catheter, also referred to as a foley catheter, this has a balloon that is inflated after insertion to prevent it from exiting the bladder.

The purpose of intermittent catheterisation is to empty your bladder completely on a regular basis and prevent UTI's, urine leakage and frequent urges to urinate. This type of catheter is inserted into the urethra or a Mitrofanoff.



Your guide to Intermittent Self Catheterisation (ISC)

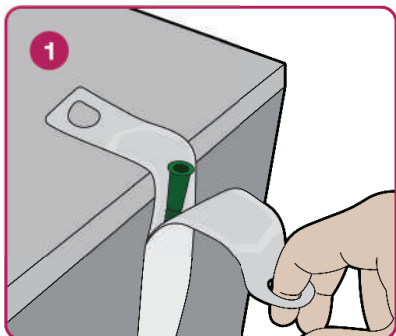
ISC may sound a little intimidating, difficult or uncomfortable but rest assured, hundreds of thousands of people around the world successfully use an ISC every day.

How often a person needs to catheterise depends on urine quantity, ideally ISC should be carried out so the urine drained is less than 400mls per catheterisation. This is to protect the bladder from over stretching. However, the volume drained first thing in the morning may be a higher volume. Patients should avoid holding on longer than necessary as this can put a patient at a higher risk of a UTI. It is also important that complete emptying of the bladder is achieved for the same reason and to avoid any unnecessary leakage. When the bladder is completely emptied, there is often the benefit of less visits to the toilet and patients who have traditionally taken a long time to empty their bladder often find ISC quicker and more convenient. Emptying the bladder on a regular basis helps to prevent kidney damage and this is especially important if you have a neurological disorder that causes abnormal bladder pressure.

Most people prefer using catheters that are simple to use and easy to insert. The surface of the catheter is extremely important as this comes into contact with the urethra and it is particularly important that the urethra is protected from any trauma to protect the passage of catheterisation.

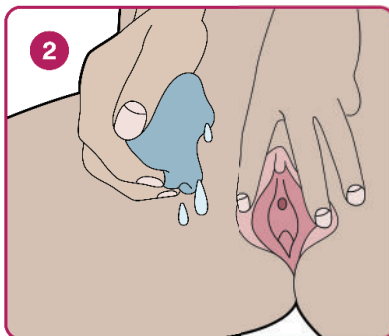
How to perform ISC standard catheter

 Before use, always consult the 'Instructions for Use' document delivered with the products.



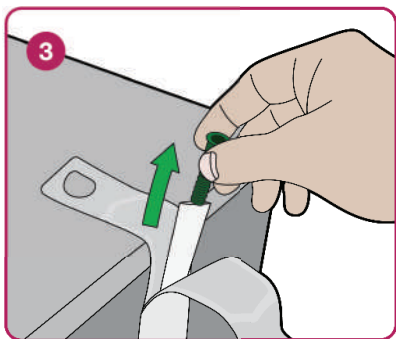
1. Open the package

Pull the ring towards you and then down to open the package. Take the catheter out carefully. Do not drop it or let it touch anything. You can stick the package to a surface using the sticker or hang it on a hook using the hole.



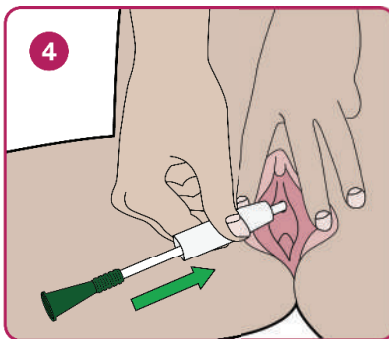
2. Clean the area and your hands

Clean the area around the urine opening always front to back, a disposable wipe will do. Wash your hands well with soap and water. If a caregiver is helping, they must wash and dry their hands and wear sterile gloves.



3. Prepare the catheter

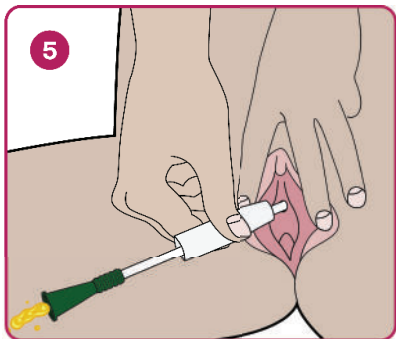
Your CareTip™ catheter is ready to use, requiring no additional lubrication. Take the catheter from the packaging with the hand you will use for insertion and touch only the lumen or the sliding gripper. Try not to touch the clear tube.



4. Insert the catheter

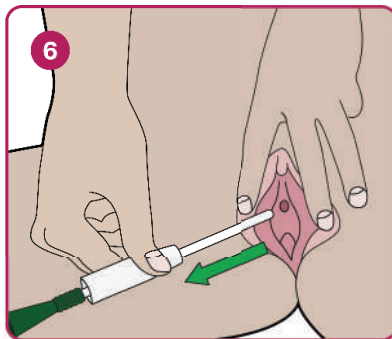
With one hand, part your labia so you can access the urethral opening. Use the sliding gripper to slowly guide the catheter into the urethra approximately 2cm at a time. You may feel some resistance just before the catheter enters the bladder.

How to perform ISC standard catheter



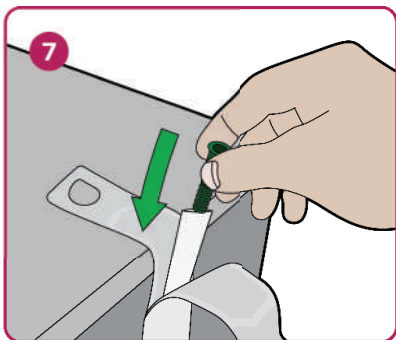
5. Urine flow

Continue to insert the catheter until urine starts to flow and then insert a little further. When the urine stops flowing, slowly pull the catheter out 1 to 2cm. If the urine starts flowing again, wait a few seconds and then pull it out another 1 to 2cm.



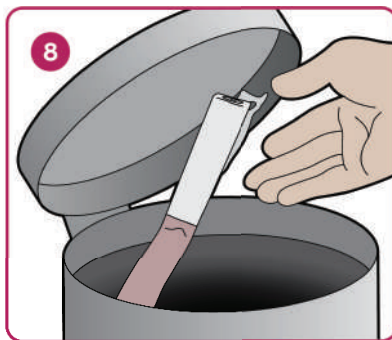
6. Remove the catheter

When the bladder is completely empty, gently remove the catheter.



7. After use

The used catheter can be put back in the original packet for disposal; it must not be re-used. You may wish to empty the remaining sterile water in the packaging into the toilet.

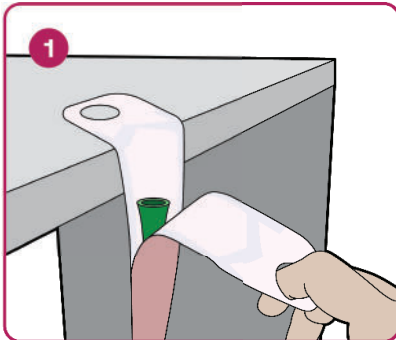


8. Dispose of the catheter

Dispose of your used catheter and packaging according to local guidelines.

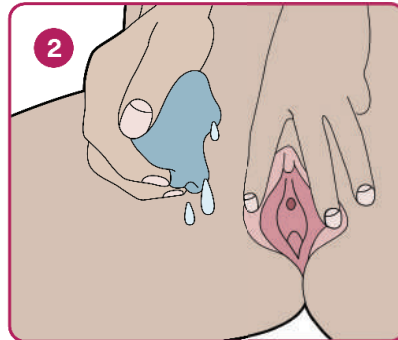
How to perform ISC compact catheter

 Before use, always consult the 'Instructions for Use' document delivered with the products.



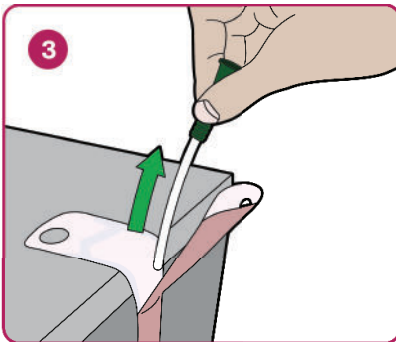
1. Open the package

Pull the ring towards you and then down to open the package. Take the catheter out carefully. Do not drop it or let it touch anything. You can stick the package to a surface using the sticker or hang it on a hook using the hole.



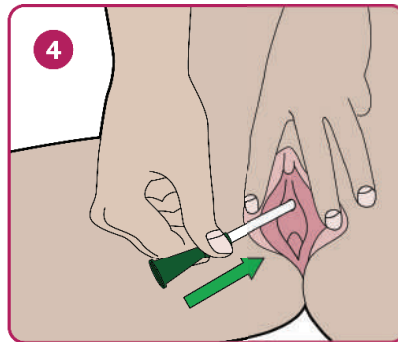
2. Clean the area and your hands

Clean the area around the urine opening always front to back, a disposable wipe will do. Wash your hands well with soap and water. If a caregiver is helping, they must wash and dry their hands and wear sterile gloves.



3. Prepare the catheter

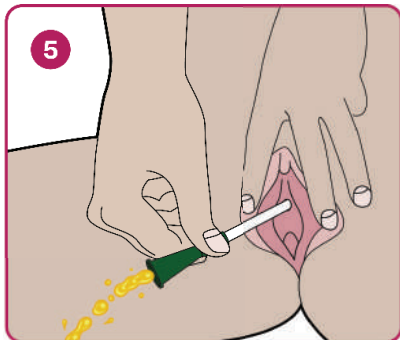
Your CareTip™ catheter is ready to use, requiring no additional lubrication. Take the catheter from the packaging with the hand you will use for insertion and touch only the lumen or the sliding gripper. Try not to touch the clear tube.



4. Insert the catheter

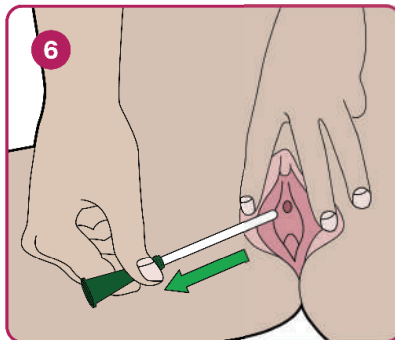
With one hand, part your labia so you can access the urethral opening. Use the sliding gripper to slowly guide the catheter into the urethra approximately 2cm at a time. You may feel some resistance just before the catheter enters the bladder.

How to perform ISC compact catheter



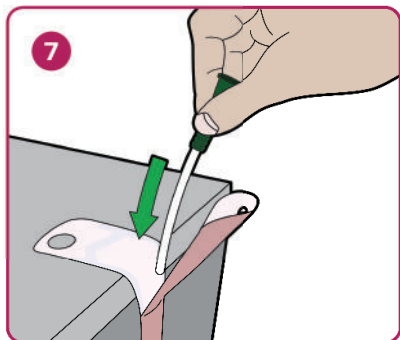
5. Urine flow

Continue to insert the catheter until urine starts to flow and then insert a little further. When the urine stops flowing, slowly pull the catheter out 1 to 2cm. If the urine starts flowing again, wait a few seconds and then pull it out another 1 to 2cm.



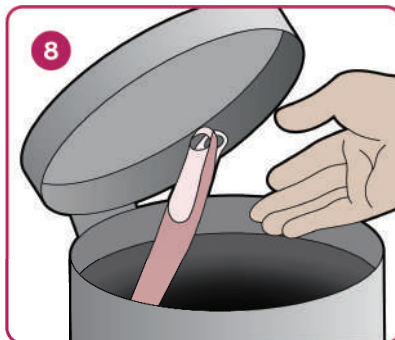
6. Remove the catheter

When the bladder is completely empty, gently remove the catheter.



7. After use

The used catheter can be put back in the original packet for disposal; it must not be re-used. You may wish to empty the remaining sterile water in the packaging into the toilet.

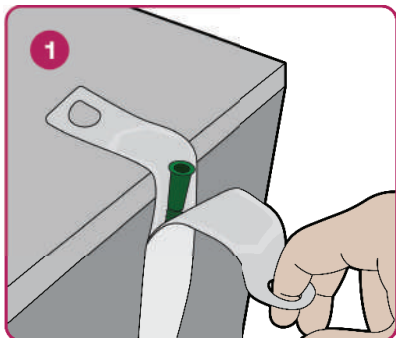


8. Dispose of the catheter

Dispose of your used catheter and packaging according to local guidelines.

How to perform ISC wheelchair user

 Before use, always consult the 'Instructions for Use' document delivered with the products.



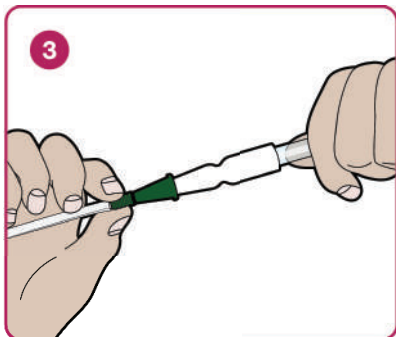
1. Open Package

Pull the ring towards you and then down to open the package. Take the catheter out carefully. Do not drop it or let it touch anything. You can stick the package to a surface using the sticker or hang it on a hook using the hole.



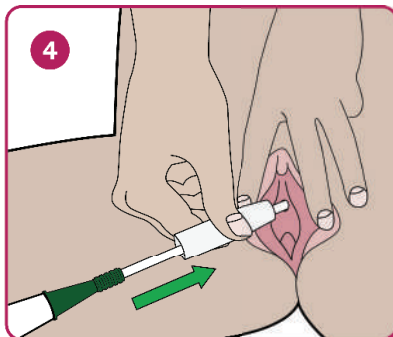
2. Clean the area and your hands

Clean the area around the urine opening always front to back, a disposable wipe will do. Wash your hands well with soap and water. If a caregiver is helping, they must wash and dry their hands and wear sterile gloves.



3. Attach drainage bag to lumen

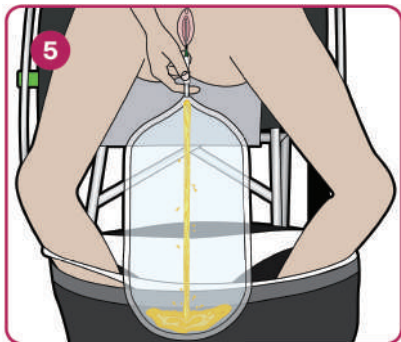
To prevent the need to transfer from chair to toilet, attach a drainage bag to the lumen, taking care not to touch the ridged connector on the bag.



4. Insert the catheter

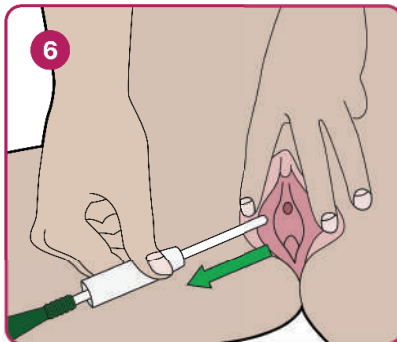
With one hand, part your labia so you can access the urethral opening. Use the sliding gripper to slowly guide the catheter into the urethra approximately 2cm at a time. You may feel some resistance just before the catheter enters the bladder.

How to perform ISC wheelchair user



5. Urine flow

Continue to insert the catheter until urine starts to flow and then insert a little further. When the urine stops flowing, slowly pull the catheter out 1 to 2cm. If the urine starts flowing again, wait a few seconds and then pull it out another 1 to 2cm.



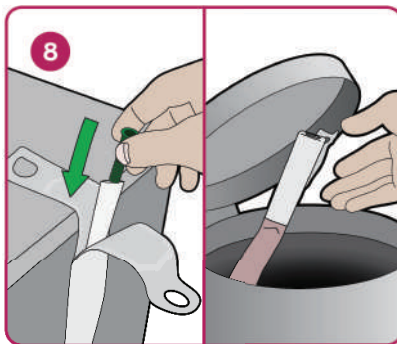
6. Remove catheter

When the bladder is completely empty, gently remove the catheter. Some patients find it easier to disconnect the drainage bag before removing the catheter.



7. Empty the bag

Empty the urine from your drainage bag into the toilet. This is now ready for disposal.



8. Dispose of the catheter

The used catheter can be put back in the original packet for disposal; it must not be re-used. You may wish to empty the remaining sterile water in the packaging into the toilet. Dispose of your used catheter and packaging according to local guidelines.

Tips for smooth catheterisation

- The body ideally needs 1.5–2 litres of fluid daily. This helps to keep the bladder healthy and flushed through to mitigate against the risk of Urinary Tract Infection.
- Keeping good hygiene in the genital area is recommended.
- Washing hands or the use of hand sanitiser before and after ISC is advised.
- Your Health Care Professional will advise on how often to catheterise but normal frequency is 4–6 times per day depending on fluid intake and recommendation from your health care professional.
- Sometimes it helps to change your body position while the catheter is in-situ to aid with the complete empty of the bladder. Slow withdrawal of the catheter also helps to ensure all the urine is drained.
- Try to relax for insertion to prevent the sphincter muscle around the urethra tightening up and making the insertion more difficult. Don't try and force a catheter in. If it does not go in straight away, try again in a new position or try and cough a little.
- At first you may notice a little blood in your urine or on the catheter which is usually caused by urethral irritation. This usually clears up quickly but if you are in any doubt please speak to your Health Care Professional.
- Don't forget to carry some catheters and any accessories on your person when you travel, in the event that luggage goes missing at least you will have a few days of supplies to tide you over.



Your catheters and supplies

Prescriptions for catheters and associated supplies are generated by your local GP, these prescriptions can be sent via EPS* (Electronic Prescribing Service) to your nominated pharmacy or home delivery contractor. If you are using a local pharmacy, it is wise to allow enough time for them to order your items, as it is rare that they are held in stock and sometimes this can take a few days for them to come in.

Home delivery offers an easy, convenient way for the free of charge delivery of your items. This route will also provide you with additional complementary items such as wipes and disposable bags.

Make life easier for yourself and have your catheters and supplies delivered directly to your door, when you need them.

For more information on GBUK care please visit:

www.gbukgroup.com/gbukcare

Phone 0800 0113 209



*EPS applies to patients in England only. For Scotland you may be provided a printed prescription. Delivery times may vary depending on location.

Intermittent catheter product codes



CareTip™ Product Codes

Size	Product	UOI	Product code	PIP code
06 Ch/Fr	Paediatric Female (20cm length)	30	GBHPF06	438-4988
08 Ch/Fr	Paediatric Female (20cm length)	30	GBHPF08	438-4996
10 Ch/Fr	Paediatric Female (20cm length)	30	GBHPF10	438-5001
10 Ch/Fr	Female (20cm Length)	30	GBHF10	438-4350
12 Ch/Fr	Female (20cm Length)	30	GBHF12	438-4947
14 Ch/Fr	Female (20cm Length)	30	GBHF14	438-4954
16 Ch/Fr	Female (20cm Length)	30	GBHF16	438-4962
18 Ch/Fr	Female (20cm Length)	30	GBHF18	438-4970



CareTip™ COMPACT Product Codes

Size	Product	UOI	Product code	PIP code
08Ch/Fr	Female (11cm Length)	30	GBHCF08	438-5548
10 Ch/Fr	Female (11cm Length)	30	GBHCF10	438-5555
12 Ch/Fr	Female (11cm Length)	30	GBHCF12	438-5563
14 Ch/Fr	Female (11cm Length)	30	GBHCF14	438-5571
16 Ch/Fr	Female (11cm Length)	30	GBHCF16	438-5498
18 Ch/Fr	Female (11cm Length)	30	GBHCF18	438-5589

Bladder diary

A bladder diary is used to better understand your bladder symptoms. It is used to track:

- when and how much fluid you drink
- when and how much urine you pass
- how often you have that urgent ‘got to go’ feeling
- when and how much you leak urine

Complete your bladder diary day and night.

Date Time	Urine Volume	Drinks volumes	Leakage	Urge	Description
Date and Time am/pm	The exact amount in mL	The exact amount in mL / oz	Did you experience any accidental leakage? Rank it 0-4	How strong was the urge to go? Rank it 0-4	

Scan for more details



GBUK Group Ltd.

Woodland House, Blackwood Hall
Business Park,
North Duffield, Selby, North Yorkshire,
YO8 5DD, UK

T +44 (0) 1757 288 587

E info@gbukgroup.com

W www.gbukgroup.com



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