



How you want to be treated.

*A Patient's Guide to*  
**Going Home with a Urinary Catheter  
after Surgery**

This material is for informational purposes only. It does not replace the advice or counsel of a doctor or health care professional. Providence Health Care makes every effort to provide information that is accurate and timely, but makes no guarantee in this regard. You should consult with, and rely only on the advice of, your physician or health care professional.

This material has been reviewed and approved by patients, families and staff.



### **Going Home with a Urinary Catheter after Surgery**

© 2019 Providence Health Care

The information in this book has been adapted from a number of sources

–

our thanks to all.

References available upon request.

In particular, we would like to acknowledge Pam Turnbull and the PHC UTI Prevention Working Group.

Edited by Hedda Eyben

Illustrations & layout by Max Foss

## Key Points to Remember

- Always wash your hands before and after you touch the catheter, tubing or bag.
- Wash the area where the catheter enters your body at least 2 times every day.
- Always keep the drainage bag below your bladder but never touching the floor
- Never let the tubing kink, twist or bend.
- Never disconnect the catheter from the tubing unless otherwise instructed.



## What is a urinary (Foley) catheter?

A urinary catheter is a tube that allows urine to drain from your bladder into a bag. A small balloon on the catheter holds it inside your bladder. The catheter is attached to a drainage tube that leads to a bag that will hold your urine. This can be carried or clipped to your clothing. To prevent pulling, the catheter is attached to your thigh.

Some people go home with a leg bag which can be strapped to your calf.

## Why do you need a catheter?

Sometimes after surgery, it takes some time for your bladder to start working properly. Until your bladder heals, the catheter will empty your urine into a bag. The bag also means you can eat and drink normally if you go out without fear of it leaking.

While you have a catheter drink 8 to 10 glasses (2 to 3 litres) of fluids every day. If you have fluid restrictions, or heart or kidney problems, check with your doctor about how much fluid you need.

## Caring for your catheter

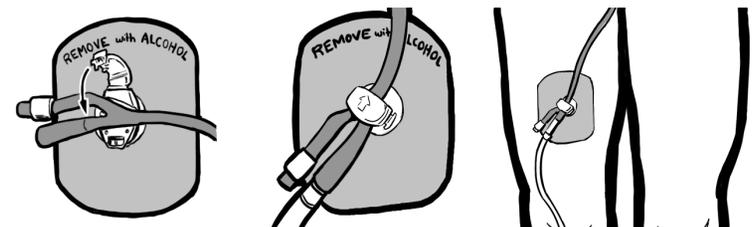
- Always wash your hands with soap and water for at least 30 seconds before and after you touch the catheter, tubing, or bag.
- Always keep the drainage bag below your bladder so the urine can flow. Never let the drainage bag touch the floor.
- Check the catheter and drainage tubing often for kinks or twists. Kinks in the tubing will stop your bladder from emptying.
- Unless instructed to change drainage bags, never disconnect the tubing for any reason.
- Some people may notice some leaking from the penis/ urethra. This is ok as long as the urine continues to drain into the tube.



*Avoid twists or kinks in the tubing that can stop urine from flowing into the bag.*

## Attaching your catheter to your leg

Always attach the catheter to your thigh. You can use the securement device we give you, or you can use medical tape. Leave the tubing loose between your bladder and the tape or securement device. The catheter should not pull when you move.



## Emptying the urinary bag

Empty the bag when it is 1/3 to 1/2 full. This should be about every 3 to 6 hours. Never let the drainage spout touch the toilet or the floor.

1. Wash your hands.
2. If there is one, take the cap off the drainage spout.
3. Lift the spout upward to prevent spilling. When the spout is pointing upward, open the stopper.
4. Lower the drainage spout into the toilet (or measuring container as instructed).
5. Do not touch the end of the drain opening. If you accidentally touch the opening, clean it with an alcohol swab.
6. Close the stopper and put the cap back on the spout.
7. Wash your hands.



Before you go out, empty your bag. Think about the location of toilets before you go, so you can empty your bag if you need to.

## Regular Hygiene (Peri-care)

Germs can travel through the tube and give you a urinary tract infection. Clean between your legs and around the catheter tubing at least 2 times a day and after you have a bowel movement (poop). This helps prevent infection.

### For Women:

- Wash the area where the catheter enters your body and between your legs with mild, unscented soap and water.
- Always clean from the front to back.
- Rinse the soap off with a damp cloth and dry with a clean towel.
- If you are menstruating, change your sanitary pad as usual. Wash between your legs after each change. Check with your surgeon if it is safe to use tampons.

### For Men:

- Wash your penis with mild, unscented soap and water.
- If uncircumcised, pull back and clean under the foreskin.
- Rinse the soap off with a damp cloth and dry with a clean towel.
- If the penis tip becomes irritated, apply a water-soluble lubricant like KY Jelly for relief. Do not use Vaseline or antibiotic ointment, unless instructed by your surgeon.

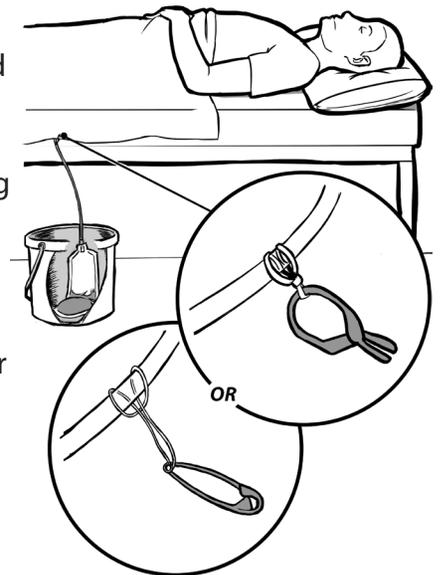
## Showering

Before you shower, cover your drainage bag with plastic wrap to keep it dry.

## Getting ready for bed

1. Empty your urinary bag.
2. Decide which side of the bed you want to hang the drainage bag on. Attach the catheter to your thigh on the same side.
3. Arrange the drainage tubing so that it is straight. No kinks or loops.
4. For urine to drain properly, attach the tubing to your sheets and keep the drainage bag upright. Here is how:

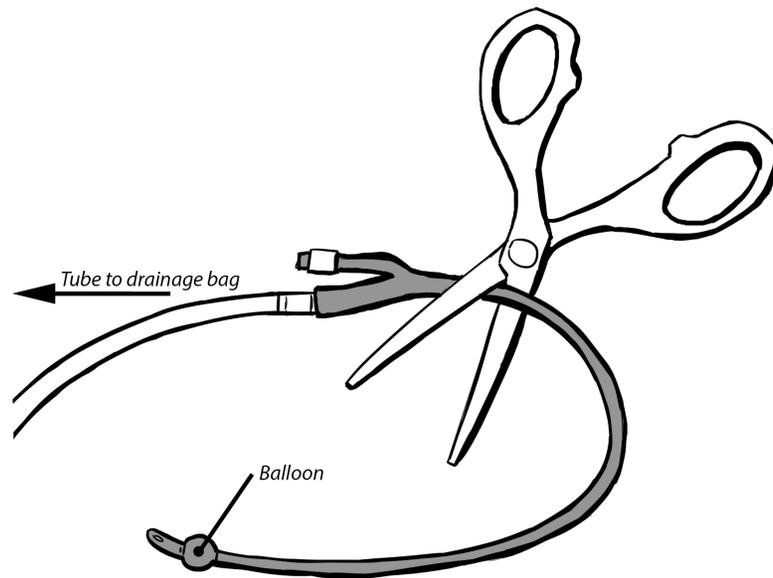
- a. Attach the drainage bag tubing to your sheets using the plastic clip or use a safety pin with an elastic band.
- b. Hang the bag from your bed using the hooks on the bag, or place the bag in a clean bucket beside your bed. Never put the drainage bag on floor.



## Taking out the catheter

If your surgeon tells you to take out the catheter follow the steps below.

1. Wash your hands well using soap and water for at least 30 seconds.
2. Empty the urine from the bag into the toilet.
3. Sit on the toilet.
4. Cut the catheter tube about 15 cm (6 inches) away from you, or where marked by the nurse.
5. Point the cut end of your catheter downward into the toilet. Water will flow out of the tube as the tiny balloon inside your bladder deflates.
6. When the water stops flowing, gently pull the catheter out. It should come out easily.
7. Put the catheter and drainage bags in the regular garbage.
8. Wash your hands.



If the catheter does not come out easily, stop and call your surgeon's office. They will tell you what to do next. It is safe to keep the catheter for a little bit longer.

## After you take out the catheter

- You may feel some burning or stinging when you pass urine. This will get better with time.
- Some people have difficulty passing urine. If you are unable to urinate after 6 hours or your bladder feels full, phone your doctor or go to the emergency department.
- You may pass urine often for the first few days. This will also get better.
- You may see some blood in your urine. This is normal and will go away within 24 hours. Drink 8-10 glasses (2-3 litres) of fluids every day. If you have fluid restrictions, or heart or kidney problems, check with your doctor about how much fluid you need.

## Questions?

Talk to your nurse if you have any questions while you are in the hospital. When you go home, call your family doctor or surgeon with questions, or phone 8-1-1 to speak to a nurse.





How you want to be treated.

[www.providencehealthcare.org](http://www.providencehealthcare.org)