Sterile Intermittent Catheterization for Women

This educational material is provided in an effort to answer questions and address possible concerns about the sterile intermittent catheterization process.

By following the basic steps for intermittent catheterization, it is possible to quickly master the technique and make the process part of your daily routine for bladder management and urinary tract health.

Thank you to Anne Boisclair-Fahey, DNP, RN, CPNP for writing this educational material. She is a pediatric nurse practitioner in pediatric urology at the University of Minnesota.

This instruction guide is not a substitute for medical advice from your healthcare provider.
The Urinary System

The urinary system contains two kidneys, two ureters, the bladder, and the urethra. The kidneys filter the blood and produce urine. The urine travels from the kidneys down the ureters and into the bladder, where it is stored until emptied during urination or catheterization. The urethra is the tube that empties the urine out of the body.

When the bladder is full, the brain sends a signal down the spinal cord to the bladder, causing it to empty. For people with spinal cord issues, the signal from the bladder to the brain gets interrupted, making them unable to empty their bladder.

When people are unable to empty their bladder on their own, they are at risk for urinary tract infections, as well as involuntary loss of urine (incontinence). When urine stays in the bladder and is not emptied, bacteria can grow, causing infections that can lead to illness. Research has shown that intermittent catheterization helps reduce urinary tract infections, control urinary leakage, and prevent urinary tract damage.

Introduction to Intermittent Catheterization

Intermittent catheterization is the periodic emptying of the bladder by the insertion of a hollow plastic tube (catheter) into the urethra, past the sphincter muscles and into the bladder. Urine then passes out of the bladder through the catheter. Intermittent catheterization is used when a person is unable to empty her bladder. It must be done at regular intervals each day to keep the bladder healthy.

Medical conditions that often require intermittent catheterization include spinal cord injuries, spina bifida, and multiple sclerosis.

What is Sterile Intermittent Catheterization?

Intermittent catheterization is normally performed as a clean technique, meaning gloves are not used, and the catheter can be held with bare, clean hands. However, your healthcare provider has recommended sterile intermittent catheterization to help empty your bladder, keep your urinary system healthy, and reduce urinary tract infections. The key to sterile intermittent catheterization is avoiding contact with the catheter; therefore, gloves must be worn and the catheter should go directly from the sterile package into the body without touching any surface. This can be achieved with the closed-kit system.
How Often Should I Catheterize?
Your healthcare provider will let you know how often you will need to perform intermittent catheterization and the size of the catheter you will need. Normally, self-intermittent catheterization is performed every four hours starting when you wake up in the morning and continues every four hours until bedtime. Some people catheterize on a more frequent schedule. Most people who catheterize do not need catheterization at night.

Where Do I Get Catheters?
You will be taught intermittent catheterization by your healthcare provider, who will determine the size and style of catheter that you will need.

Sterile Intermittent Catheterization Instructions for Women
Catheterization can be performed lying down, sitting on the toilet with your legs spread apart, standing in front of the toilet, or sitting in a chair or wheelchair. Do whatever is most comfortable for you. Initially you may want to use a mirror to help locate the urethral opening. The mirror can be placed on a low stool in front of the toilet seat. It may take time for you to locate the proper opening. Eventually, most women learn to catheterize by touch and feel.

1. Inspect the closed-kit system before use. If catheter or package is damaged, DO NOT USE.
2. Wash hands thoroughly with soap and water or use an antibacterial hand cleaner.
3. Open the closed-kit system.
4. Position yourself comfortably. If sitting in a chair or wheelchair, spread your legs apart and place the underpad on the chair. If lying down, bend knees and place your heels together in a “frog-like” position on the underpad provided in the kit.

5. Put on the gloves provided in the kit. Open the povidone-iodine swabsticks or BZK wipe provided in the kit.

6. Using the non-dominant hand, separate the labia with the thumb and forefinger to locate the urethra.

7. With the labia separated, wash the urethral area from front to back thoroughly with a povidone-iodine swabstick or the BZK wipe. Never go back and forth over the urethral opening. Repeat washing from front to back with the other two swabsticks or two different areas of the BZK wipe.

8. Remove the cap from the introducer tip and slide the catheter to within 1/8” (2 mm) of the top of the silicon tip. Do not slide the catheter past the introducer tip yet.

9. With the non-dominant hand, hold inner labia apart. With the dominant hand, insert the introducer tip into the urethra. Hold it securely in place with thumb and forefinger of the non-dominant hand. Use the dominant hand to grasp the catheter through the bag close to the base of the introducer shaft.

10. Slowly push the catheter through the introducer tip and into the urethra. Continue to insert the catheter until urine begins to flow.
11. When urine stops flowing, slowly rotate the catheter through the bag between your fingers while withdrawing the catheter. If urine starts to flow again when withdrawing the catheter, stop each time it flows and let the urine drain. When the bladder is empty, finish removing the catheter.

12. To empty the bag, hold it upright and put your thumb in the hole at the top of the bag. Grasp the tab and tear downwards at the perforation located above “To Empty Tear Here.” Pour the urine through the opening into the toilet. Dispose of the bag properly.
Intermittent Catheterization Specifications:

- Use Closed System intermittent catheter with polished eyelets in size:
  - [ ] 8 FR
  - [ ] 10 FR
  - [ ] 12 FR
  - [ ] 14 FR
  - [ ] 16 FR

- Catheterize ________times a day or every________hours.

- Catheterization required at night: [ ] Yes [ ] No

Physician contact information:

____________________________________________ _______________________________
Name                                  Telephone Number

Product supplier contact information:

____________________________________________ 1-800-700-4246
Comfort Medical                              Telephone Number
Name                                      1-800-604-9760
                                                Fax Number