



# Urinary Self-Catheterization Procedure

Information guide for patients

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Québec 

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# Introduction

Soon you will undergo gynecological or urological surgery. These kinds of surgery may cause swelling in the pelvic area. Therefore, for a while, you may no longer feel the urge to urinate or you may feel that you are unable to fully empty your bladder. This is what we call urinary retention. Urinary retention is a common, but temporary, issue. While waiting for the urinary tract to function normally again, you must help it release urine from your bladder using a urinary self-catheterization procedure.

This guide was created to help you perform this procedure yourself, at home. It provides useful information regarding the materials required, the steps to follow, and catheter maintenance. Feel free to consult this document often.

We also encourage you to watch the video on urinary self-catheterization, available on the hospital's website: [chus.qc.ca](http://chus.qc.ca).

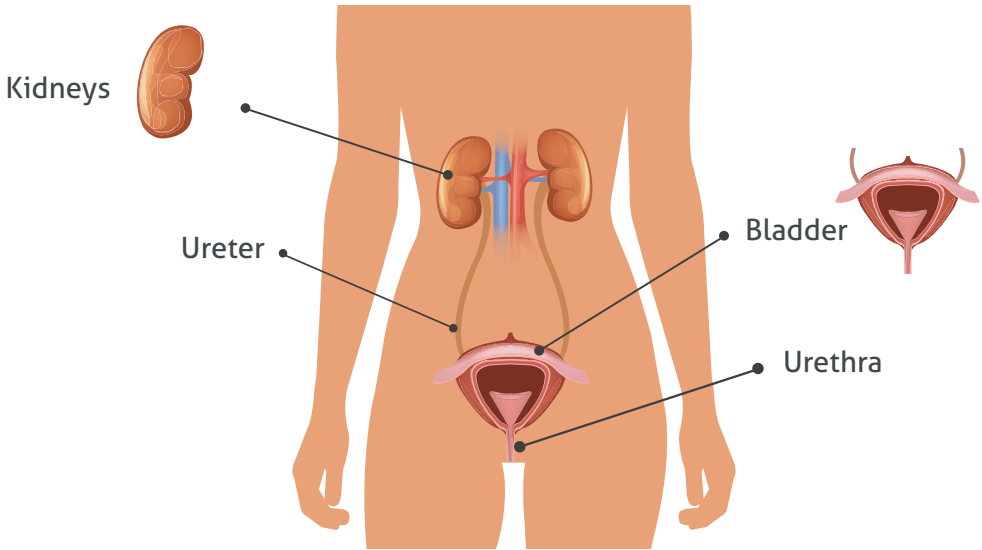
## **Play an active role in your health care**

Feel free to share your questions and concerns with a member of the care team to help you better understand your situation.

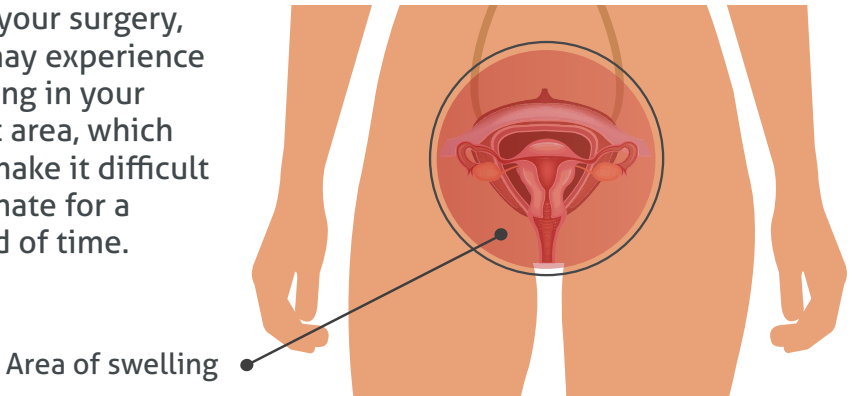
The team is here to support and guide you, and is committed to being available and providing you with the best possible care.

# Anatomy of the urinary tract

The urinary tract consists of the kidneys, ureters, bladder, and urethra. The urine produced by the kidneys travels down the ureters to the bladder, where it is temporarily stored. When you urinate (pee), the bladder contracts and urine is expelled through the urethra.



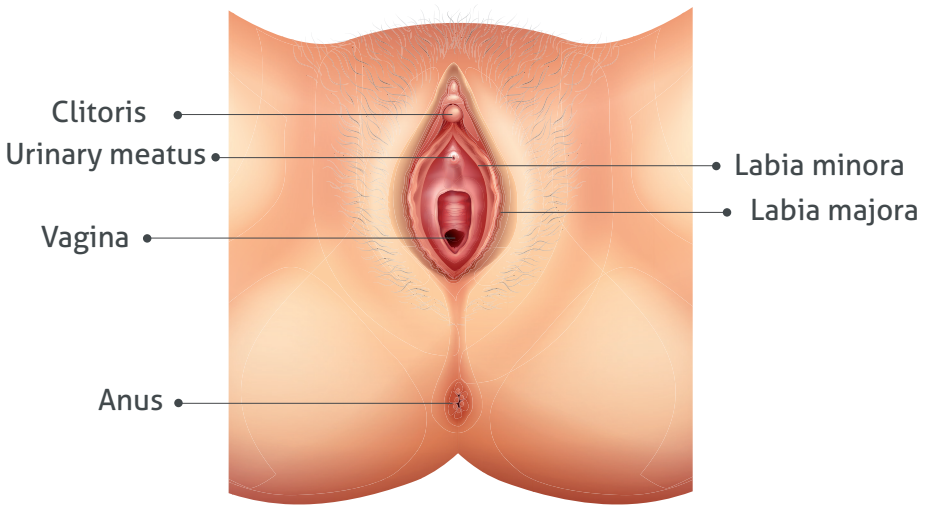
After your surgery, you may experience swelling in your pelvic area, which may make it difficult to urinate for a period of time.



This is why you must perform urinary self-catheterization.

## Anatomy of the female genital area

The female genital area consists of the clitoris, urinary meatus, vagina, and anus. To perform self-catheterization, you must insert a catheter into your urinary meatus, up to your bladder. The urinary meatus is the orifice located between the clitoris and the vagina.



# Materials required for urinary self-catheterization at home

- Mild liquid soap  
Ex.: Dove® or Cétaphil®
- Tap water
- 2 facecloths
- 2 or 3 hand towels  
You may substitute one of the hand towels for paper towels.
- Short urinary catheters for women  
Size: \_\_\_\_\_ Fr.  
Quantity: \_\_\_\_\_  
Where to obtain the catheters: \_\_\_\_\_  
\_\_\_\_\_
- Water-soluble lubricant in a packet or a tube\*  
Ex.: K-Y® or Muko®

## Warning

Do not use Vaseline® or any other product containing petroleum jelly as a lubricant.

- A mirror
- 2 measuring cups to collect the urine
- A pencil and the form provided to record the quantity of urine
- A cone syringe\*
- 2 Ziploc®-style bags  
Write DIRTY on one bag, using a felt-tip pen  
Write CLEAN on the other bag, using a felt-tip pen
- Dish soap

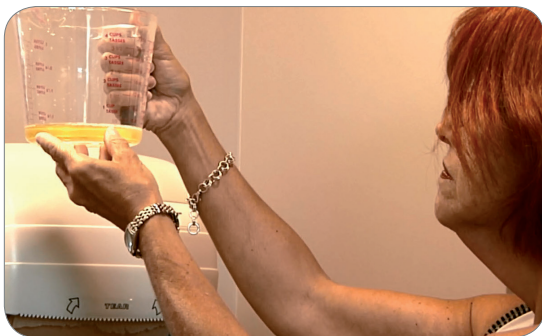
\*You may purchase this item at the pharmacy or ask the nurse to provide you with one before you leave.

# Self-catheterization procedure

## 1

### Step 1: Collecting urine produced naturally

- A) Have a measuring cup close at hand.
- B) Sit on the toilet and place the measuring cup in such a way that it will collect the urine. Avoid straining to urinate, take your time.
- C) Urinate.
- D) Measure (in ml) the quantity of urine in the measuring cup.
- E) Record the quantity of urine on the form.
- F) Discard the urine in the toilet.
- G) Wash your hands.



# 2

## Step 2: Choosing the right location

To perform urinary self-catheterization, find a well-lit place where you are at ease and comfortable. You may choose one of the three following positions:

1. Standing near the toilet



2. Sitting on a chair facing the toilet, or on the toilet



3. Sitting in the lithotomy position on a bed





# 3

## Step 3: Gathering the necessary materials

- A) Choose a surface that is large enough to accommodate all of the materials.
- B) Place a hand towel near the place chosen.  
Ex.: bathroom counter, bedside table, or table near the toilet, etc.
- C) Place the following items on the towel:
  - Mild liquid soap  
Ex. : Dove® or Cétaphil®
  - 2 facecloths
  - 1 clean hand towel
  - Water-soluble lubricant in a packet or a tube  
Ex. : K-Y® or Muko®

### Warning

Do not use Vaseline® or any other product containing petroleum jelly as a lubricant.

- A mirror
- A short urinary catheter

### Important

You must use a new catheter for each catheterization of the day.

- The second measuring cup to collect urine
- A pencil and the form to record the quantity of urine

# 4

## Step 4: Washing your hands and preparing the materials

As this procedure does not require disinfectant or the use of gloves, good hand hygiene is essential at all times to reduce the risk of infection.

A) Wash your hands with the mild liquid soap.

1- Wet your hands.

2- Prenez le savon.

3- Lather the soap and rub your hands together for 20 or so seconds while washing between your fingers, under your nails, and on the backs of your hands.

4- Rinse your hands for roughly 10 seconds.



B) Wet the first facecloth with tap water, add soap, and then place the facecloth on the towel.

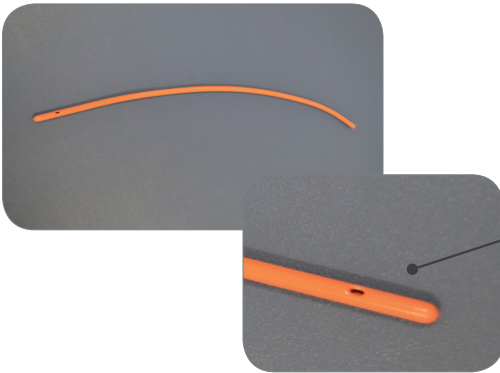
C) Take the second facecloth, wet it with tap water, and then place it beside the other facecloth.

D) Dry your hands with the towel that has not yet been used and use it to turn off the tap.



E) Open the container of lubricant.

F) Take the catheter and apply a generous amount of lubricant to the rounded end with two openings.



**You must not touch this part with your fingers.**

G) Put the catheter in the measuring cup.



# 5

## Step 5: Performing self-catheterization

A) Remove your underwear and sit comfortably in the place you have chosen.

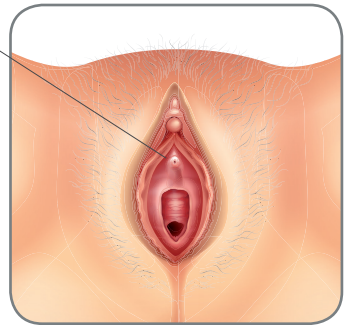
\*If you have chosen to sit on the bed, place a towel under your buttocks.

B) If you are right-handed, use your left hand to spread your labia majora. Conversely, if you are left-handed, use your right hand to do so.

\*You must keep your labia majora parted until the catheter has been inserted.

C) With your free hand, locate your clitoris with your index finger. The urinary meatus is just below it. If needed, you may use a mirror to help you find your urinary meatus.

Urinary  
meatus



D) Keeping the labia majora parted, use your other hand to pick up the facecloth with soapy water on it and wash the urinary meatus area with it, from front to back. Set this facecloth aside.

E) Take the soap-free, moistened facecloth and use it to rinse the urinary meatus area, from front to back. Set this facecloth aside.

F) Ensure the measuring cup with the catheter in it is close at hand.

- G) Hold the catheter between your thumb and index finger without touching the rounded end with your fingers and slowly insert the catheter into the urinary meatus, angling it upwards.



### Important

Immediately change the catheter to ensure that no bacteria is introduced into the urethra, if the catheter:

- Falls on the floor
- Touches another object
- Slides into the vagina

In such a situation, take a new catheter, apply a generous amount of lubricant to the rounded end, and restart the procedure.

- If you have a difficult time inserting the catheter due to a sphincter spasm, take a break, relax, change position, and restart.

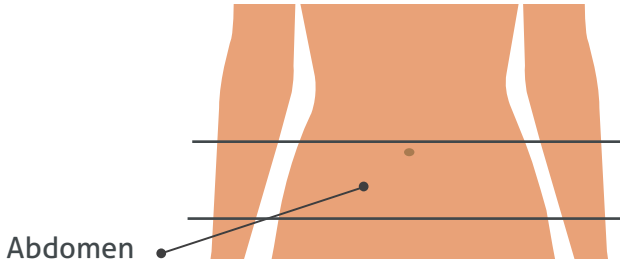
- H) When the urine starts to flow, continue to push the catheter into your urinary meatus, approximately 2.5 cm (approximately 1 inch).



**1 pouce**

- I) Check that your urine is flowing into the measuring cup. If not, move the measuring cup so that the urine flows into it.
- J) Hold the catheter in place until the urine stops flowing. At this point, you may stop holding the labia majora apart.

- K) Once the urine has stopped flowing, apply gentle pressure to your abdomen over your bladder, to ensure that it is empty.



- L) Slowly remove the catheter. If urine begins to flow again, stop, to allow the urine to be expelled. When the urine stops flowing again, continue to gently remove the catheter.

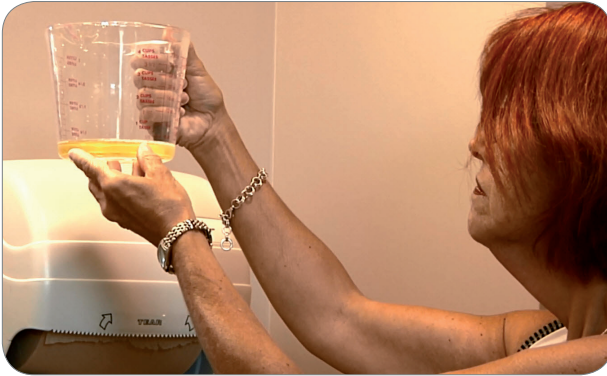
### Important

If you notice blood on the catheter, this is a sign that your urethra is irritated. In theory, there should no longer be blood after a few catheterizations. If the bleeding increases or doesn't stop, contact your physician.

# 6

## Step 6: Measuring the quantity of urine collected

- Measure (in ml) the quantity of urine in the measuring cup.
- Record the quantity of urine on the form.
- Discard the urine in the toilet.
- Wash your hands.



## Catheter maintenance

You must clean the catheter after each use. You'll need the following materials:

- Tap water
- A hand towel or paper towel
- The Ziploc®-style bag with DIRTY written on it
- The cone syringe
- Dish soap

### Cleaning the catheter after use

1. Rinse the catheter with cold water until it is clean, ensuring that it does not come into contact with the sink.
2. Dry the outside of the catheter with a clean towel or paper towel.
3. Use the cone syringe to inject air into the catheter to dry it.
4. Place your catheter in the Ziploc®-style bag with DIRTY written on it.
5. Wash the 2 measuring cups with warm, soapy water.
6. Wash your hands according to the method described on page 10.

#### Important

You must use a new catheter for each catheterization of the day.

Ex.: 5 self-catheterizations per day = 5 catheters



## Cleaning the materials at the end of the day

At the end of the day, clean all of the catheters that you have used and placed in the bag with DIRTY written on it. Wash them one by one in warm, soapy water **ensuring that they do not come into contact with the sink.**

1. Wash the catheter with warm, soapy water.
2. Rinse each catheter, then dry the outside with a clean towel or paper towel.
3. Use the cone syringe to inject air into the catheter to dry it.
4. Place the catheter in the Ziploc®-style bag with CLEAN written on it.
5. Repeat the same process for all of the catheters in the Ziploc®-style bag with DIRTY written on it.
6. Wash the 2 measuring cups with warm, soapy water.
7. Wash your hands.

### Important

It is recommended that you throw out the catheters each month. However, if you notice that one of the catheters is too soft, sticky, or too brittle, don't wait until the end of the month; throw it out immediately.

## Urinary self-catheterization schedule

You must perform urinary self-catheterization according to a precise schedule. It is important that you follow this schedule, as allowing too much urine to accumulate in the bladder may compromise the success of your surgery.

You must perform this procedure every 4 hours.

At night, the interval between self-catheterizations may be extended to a maximum of 8 hours.

Increase the frequency of self-catheterization if:

- You feel the urge to urinate
- The quantity of urine obtained naturally plus the quantity of urine obtained through self-catheterization exceeds 500 ml

## Ceasing to perform urinary self-catheterization

You may stop performing the urinary self-catheterization procedure when, twice in a row, you have been able to pass 200 ml of urine on your own and the quantity of urine collected through self-catheterization is less than 100 ml.

# Recommendations to follow



## Hydration

- Drink 2 litres (8 glasses) of fluids (water, milk, juice) per day, unless otherwise instructed by your doctor.
- Avoid drinking after your evening meal. If you drink more on any specific day, empty your bladder more frequently.



## Constipation

- Avoid straining to pass stools.
- Use products that will keep your stool soft to avoid constipation (Metamucil<sup>®</sup>, psyllium, Colace<sup>®</sup>, or lactulose).
- Drink an adequate amount of water.
- Eat foods that are high in fibre (ex.: fruits, raw vegetables, grains).
- If you become constipated, use a glycerin suppository.



## Pain management

- If your doctor has given you a prescription for a pain reliever, don't hesitate to take it if you are in pain (Tylenol<sup>®</sup>, Dilaudid<sup>®</sup>, morphine).



## Hygiene

To reduce the risk of contracting a urinary tract infection, it is important that you practise proper hygiene in terms of washing your hands and genital area.

- Clean your catheters properly (after each self-catheterization and at the end of the day).
- Keep your surroundings clean.
- For the first month following your surgery, take showers and not baths.



### **Vaginal douche**

- Do not douche before your follow-up appointment with your surgeon.



### **Sexual relations**

- Do not have sexual relations involving penetration before your follow-up appointment with your surgeon.



### **Physical exertion, exercising, activities, and sports**

- You may walk on level ground, and go up and down stairs inside your home.



### **For an 8-week period following the surgery:**

- Do not strain to pass stool.
- Do not strain to urinate.
- Do not lift anything that weighs more than 2 kg (5 lb.), for example:
  - Lifting a child or pet
  - Lifting heavy objects (grocery bags, luggage, etc.)
  - Shovelling snow
  - etc.
- Do not push anything that weighs more than 4 kg (10 lb.), for example:
  - Pushing a lawn mower or piece of furniture
  - Vacuuming
  - etc.
- Avoid running, jogging, and aerobic activities.

Be careful when you lift or push anything. If possible, avoid these activities for 6 months after the surgery.



### **Driving**

- You may start driving again once you have stopped taking narcotics (ex. morphine, Dilaudid®) to manage your pain.



### **Returning to work**

- There is no set time for returning to work; the date will be determined based on your surgeon's recommendations.

## **Medical follow-up**

Before you are discharged, a nurse will teach you how to perform the procedure, and you will have an opportunity to practise it.

## **In-home follow-up**

When you leave the hospital, a request will be sent to your region's CLSC to ensure that you are monitored.

Once you have returned home, a nurse will contact you to provide support to you in terms of performing the procedure.

## **Medical follow-up with your surgeon**

You'll have a follow-up appointment with your surgeon approximately 6 weeks after your surgery. You will be given the appointment date when you are discharged from the hospital. Remember to bring this guide.

# Symptoms to watch for

Seek medical advice if you experience any of the following symptoms:

- Difficulty urinating or a burning sensation while urinating
- A large amount of blood in your urine
- Strong-smelling or foul-smelling urine
- Cloudy urine (as though a drop of milk has been added to it)
- Foul-smelling vaginal discharge
- Ongoing presence of blood on the catheter after a few catheterizations
- Difficulty inserting the catheter
- Pain while inserting the catheter
- Pain that persists despite taking medication
- Back pain
- Fever (38.5°C or 101.3°F)
- Shortness of breath or chest pain
- Pain in one of your legs
- Any other issue that is of concern to you



Contact a nurse at your region's CLSC.



Call Info-Santé at 8-1-1.



Contact your family physician.



Go to the nearest hospital emergency department.

# Urination journal

Date and time	Quantity of urine obtained naturally	Quantity of urine obtained through self-catheterization	<b>TOTAL</b> (quantity of urine obtained naturally + quantity of urine obtained through self-catheterization)



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**Editing and layout**

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March 2016 – 1-6-72043