A Guide to SELF-CATHETERISATION for Men

HydroSil® male

Male Hydrophilic Intermittent Catheter

Rochester® MEDICAL

Intermittent self-catheterisation (ISC) is a simple procedure that drains the residual pool of urine from the bladder after incomplete urination. It can be carried out safely at home, at work, or when travelling so it need not restrict or impede a busy life. Whilst your nurse specialist is your best resource on ISC, this booklet is intended to provide additional information and support for you to refer to as you learn to take back control of your bladder management.

Take Back Control of Your BLADDER

NURSE SPECIALIST:			
CLINIC OR HOSPITAL:			
TELEPHONE NUMBER:	EMERGENCY NUMBER:		
SELECTED CATHETER	CATHETER DESCRIPTION	FP10 CODE	PIP CODE
	☐ HydroSil male 10Ch	63610	301-4396
	☐ HydroSil male 12Ch	63612	301-4404
	☐ HydroSil male 14Ch	63614	301-4412
	☐ HydroSil male 16Ch	63616	301-4420
GENERAL INFORMATION:			

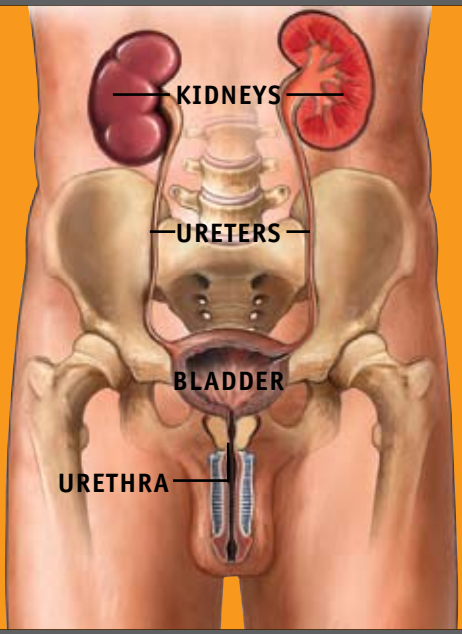
MANAGEMENT

The bloodstream carries the body's waste products to the kidneys where they are filtered from the blood and combined with water to produce urine. The urine flows – via tubes called ureters – a few drops at a time from the kidneys to the bladder.

The bladder acts as a storage vessel for urine. As it gradually fills with urine, the stretch receptors in the bladder wall send messages to the brain that it is time to think about emptying. When functioning normally, the bladder receives signals from the brain that cause the urethral sphincter to open and the bladder walls to contract. The urine is then discharged from the bladder through the urethra. A man's urethra is about 20cm long and runs from his bladder to outside the body at the tip of his penis.

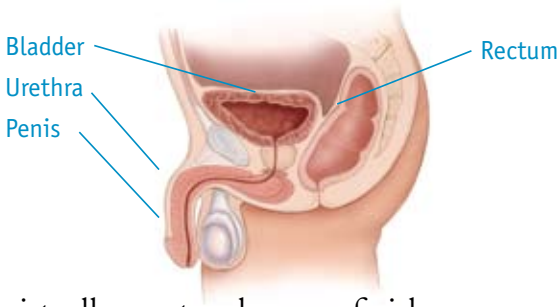
REASONS THAT MAY CONTRIBUTE TO INCOMPLETE URINATION:

- Nerve damage, such as spinal injury or diseases that affect the nervous system
- Poor bladder tone
- Back injury
- Pelvic surgery
- The presence of urethral obstructions
- Problems with the normal feedback mechanism between bladder and brain
- Constipation



ABOUT YOUR ANATOMY

Urination typically occurs 5-6 times per day, or whenever the bladder collects 250-350ml of urine. Production of urine slows down during the night, decreasing the need for urination.



Normally the bladder will be virtually empty when you finish urinating, but in some people the process of urination remains incomplete, leaving a residual pool of urine in the bladder. Residual urine provides a haven for bacterial growth and may lead to a urinary tract infection.

HELPFUL HINTS FOR BLADDER MANAGEMENT

> Always maintain a good healthy diet and keep your fluid intake up at the recommended level of 1½ litres (about 2½ pints) each day.

> Seek advice from your District Nurse, GP or Spinal centre if you become constipated as this can affect your bladder function.

> If your urine becomes cloudy or has an unpleasant odour, or you have a burning sensation or discomfort whilst passing urine, increase your fluid intake and contact your GP as these symptoms may indicate a urinary tract infection.

> Should you become feverish, contact your GP immediately.

INTERMITTENT SELF-CATHETERISATION

If the bladder cannot be emptied completely through normal urination, it can be drained using a thin tube passed up the urethra into the bladder. The tube, called a catheter, is removed when drainage is complete.

This procedure is called ISC and most men can easily learn to do it themselves. ISC is taught by specially trained healthcare professionals – such as nurse specialists – who provide training and advice to ensure correct procedures are followed to minimise risks.

TIPS FOR INTERMITTENT SELF-CATHETERISATION

- To help minimise contamination of the catheter, avoid touching the tip with your fingers and avoid letting it touch other surfaces.
- Try to stay relaxed when inserting the catheter. If you feel tense, your sphincter muscle may tighten and make it difficult to insert or withdraw the catheter. Coughing or taking a warm bath can help relax your sphincter muscle.
- Remember that your catheter is designed to be used one time only. After each use, the catheter should be discarded in a suitable bin.

ABOUT YOUR HYDROSIL CATHETER

Your HydroSil catheter has many special features that make it soft and comfortable to use.

> The unique outer layer becomes slippery when wet, for virtually friction-free insertion and removal.

> For your safety and convenience, a sachet of sterile water is provided inside each pouch to help keep your catheter free from external contamination.

> The tapered seamless catheter tip is designed to pass smoothly through your urethra and into your bladder.

> Four comfort-sized drainage eyes in the catheter tip allow urine to flow through the catheter tube and out into the toilet or a suitable receptacle.

> The funnel shaped catheter outlet prevents urine from running back up the outside of the catheter. The funnel end may also be connected to a urine collection bag, if preferred.

> The catheter is made of silicone, so there are no toxins or disposal concerns like those that may be associated with PVC catheters.

HOW TO PREPARE AND USE

Always try to pass urine and empty your bladder as

Step 1

Wash your hands thoroughly with soap and water and dry them. Washing your hands properly will ensure that you don't accidentally contaminate the catheter. You should pay particular attention to washing between your fingers and the backs of your hands - these are areas that are all too often overlooked.

Step 2

Release the sterile water from the foil sachet by folding it in half and squeezing it firmly between fingers and thumb through the catheter pouch.

Step 3

Tip the catheter pouch end-to-end three to six times so the water moves back and forth to thoroughly wet the catheter surface.

Peel open the pack at the funnel end just enough to allow you to grip the catheter funnel. Don't remove the catheter just yet. Use the adhesive tab at the funnel end of the pack to stick the pack to a nearby surface whilst preparing to catheterise.

Step 4

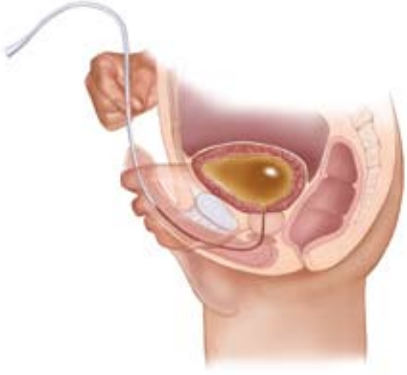
Always wash the tip of your penis before catheterising, using a wet wipe if you like. You can catheterise in a number of different positions, as shown in the illustrations. You can sit or stand by the toilet. Your nurse specialist will help you find the position that suits you.

If you are in a wheelchair your specialist nurse will advise you on how ISC can be adapted for your particular needs.

- Never strain to empty your bladder. Only try to pass urine prior to passing the catheter if agreed with your spinal centre.
- It is possible to catheterise without removing a silicone sheath. This helps to preserve skin integrity but you may not be able to adequately clean your penis prior to catheterisation and should discuss the procedure with your specialist nurse.
- You may find it easier to drain your bladder into a bottle, rather than directly into the toilet. If preferred, a urine collection bag can be attached to the catheter funnel before insertion.

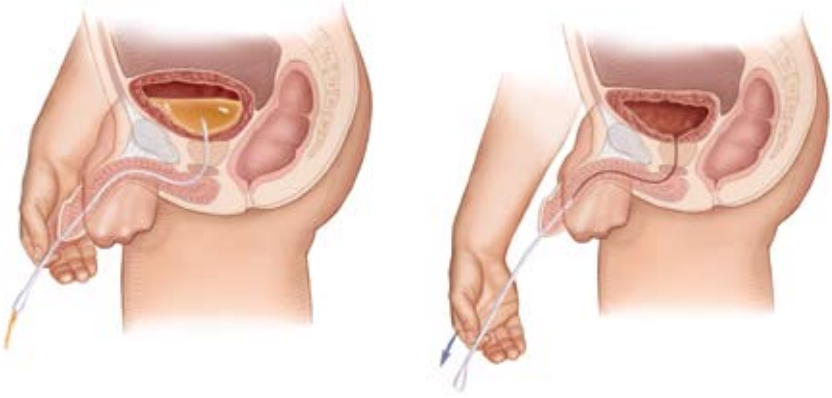
Step 5

Wash your hands again and take the catheter out of the pouch holding the funnel end. If you have a foreskin, gently pull it back and keep it in position until catheterisation is completed. Hold your penis up towards your stomach as this will make it easier to slide the catheter into your bladder. Avoid squeezing the penis as this can block your urethra. Pass the tip of the catheter into the opening of your urethra and onwards until urine starts to flow. If you feel that the catheter is not moving freely enough towards your bladder it may be helpful to cough or try to pass urine, as this can help to make it easier.



Step 6

As soon as urine starts to flow, point your penis downwards towards the toilet or other collection device such as a jug, bowl or urine bag. Try to keep the catheter steady until urine stops flowing. When urine stops flowing, slowly withdraw the catheter, stopping if flow starts once more, until the last few drops have drained.



Step 7

Finish by disposing of the catheter and its packaging. Wash your hands with soap and water, just as you would normally do after using the loo. Bags for hygienic disposal of your catheters with the general waste are available free of charge from Script-*easy* with your prescription.

DO NOT FLUSH THE CATHETER DOWN THE TOILET – IT MAY CAUSE A BLOCKAGE.

How often should I catheterise? This will depend on the amount of your fluid intake, the amount of residual urine to be drained and the effect of any medication you may be taking. Some people may only need to catheterise once daily, whilst others may catheterise up to six times a day. Your nurse specialist will advise on the regime that will suit you.

How much fluid should I drink? You should drink about 1½ litres of fluid every day. This is about 2½ pints (6-8 cups).

What do I do if I can't insert the catheter? Just relax for a few minutes and try again. You may be anxious causing your sphincter muscle to tighten. Coughing may help or try relaxing in a warm bath. If you still have difficulty contact your nurse specialist who will give further advice.

What if there is blood in my urine? Sometimes there will be specks of blood on the catheter or slight bleeding after removal. Don't worry, as this will usually clear up in a couple of days. If the bleeding persists, you should contact your nurse specialist or GP for advice.

What if the catheter won't come out? This can happen if you are tense. When you are tense your muscles can go into spasm and prevent the catheter from coming out. Eventually these muscles will relax and allow you to remove the catheter, so rest for a few moments then try again. Coughing several times as you begin to remove the catheter will also help. If the catheter still won't come out, don't panic, run yourself a warm bath and lie in it to help relax. If these suggestions don't work you should contact your nurse specialist for help.

QUESTIONS

Can I travel overseas? Ask your GP for a letter stating that you are carrying the catheters to manage a medical problem.

Which type of catheter should I choose? There are many different types of catheter and your nurse specialist will show you a selection from those that are suitable for you. Together you will be able to choose one that suits you best.

Does ISC hurt? If you have sensation, it may feel strange at first, but ISC should not be painful. For some the urethra is more sensitive when first learning, but ask for advice if this does not settle with time.

Will I always have to catheterise from now on? This will depend on the underlying reasons for catheterisation. Sometimes ISC is a temporary measure until your bladder regains its normal function. You should report any changes in drainage volumes or pattern of passing urine to your nurse specialist who will review the clinical need for continuing ISC, or altering the frequency.

What should I do if I forget to catheterise? You should catheterise as soon as you remember. Then continue as normal at the regular intervals you have been advised. Remember that you must completely empty your bladder to remove any residual urine and reduce the risk of infection.

What happens if I do not catheterise as often as I was told to? If you miss catheterisation once or twice don't worry, but if this happens often it can cause urinary tract infection and urinary leakage. If the pressure in your bladder becomes too high there is a risk that your urine may back up to your kidneys, which can cause serious injury.

OUTPUT CHART

Each day record the time and amount of urine you

WEEK 1

Time	P/C	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							

WEEK 2

Time	P/C	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							

P = Urine was passed normally
C = Urine was passed via catheter

(4 WEEKS)

voided normally or via a catheter (measured in ml/cc).

WEEK 3

Time	P/C	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							

WEEK 4

Time	P/C	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							

P = Urine was passed normally
C = Urine was passed via catheter

HOW TO OBTAIN SUPPLIES

Your nurse specialist will provide you with your first supply and will tell you to obtain a prescription from your GP for further supplies. Ask your nurse specialist to write down the description and codes of the catheter selected for you in the front of this booklet. The order numbers shown here will help to identify the correct size.

CATHETER DESCRIPTION	FP10 CODE	PIP CODE
HydroSil male 10Ch	63610	301-4396
HydroSil male 12Ch	63612	301-4404
HydroSil male 14Ch	63614	301-4412
HydroSil male 16Ch	63616	301-4420

Supplies can be obtained from your chemist or from the Script-*easy* confidential dispensing service operated by Rochester Medical Ltd. Script-*easy* offers you a discreet and convenient way to obtain supplies quickly and easily. There is no additional cost for this service to either you or your GP. Just call, and your Script-*easy* customer service adviser will obtain your prescription from your GP and send out your catheters without delay.

Script-*easy*®

CONFIDENTIAL PRESCRIPTION DISPENSING SERVICE

FAST, RELIABLE DELIVERY OF HYDROSIL MALE CATHETERS

Script-*easy*® is a convenient and confidential way to obtain all your prescription products (not medicines). Our friendly and well trained staff will ensure you receive the correct product and you can be assured of a fast, reliable response to your monthly prescriptions.

Script-*easy* is convenient for you. Just call the Freephone helpline to arrange for next day delivery with no bulky packages to carry home.

Best of all, this service is complimentary, there is no charge to you and it is approved by the NHS.

Call now to enrol with Script-*easy* and obtain your complimentary carry pouch, wet wipes and hand sanitiser spray with your first prescription.

FREEPHONE HELPLINE 0800 0121699

Script-easy is a service of Rochester Medical, makers of HydroSil male catheters for ISC

SCRIPT-EASY FAX FORM

Fax number 01903 875085
Tel number 0800 0121699

Script-easy
CONFIDENTIAL PRESCRIPTION DISPENSING SERVICE

DATE	NURSE	TITLE

HOSPITAL/HEALTH CENTRE NAME	WORK ADDRESS
TELEPHONE NO.	POSTCODE

PATIENT NAME	HOME/DELIVERY ADDRESS
DATE OF BIRTH	
TELEPHONE NO.	POSTCODE

GP NAME	GP ADDRESS
TELEPHONE NO.	POSTCODE

ITEMS REQUIRED/DESCRIPTION	CODE NO.	PACK SIZE	NO. OF BOXES
1 HydroSil male 10Ch	63610	30	
2 HydroSil male 12Ch	63612	30	
3 HydroSil male 14Ch	63614	30	
3 HydroSil male 16Ch	63616	30	
5			

DATE ORDER DUE	EXEMPTION STATUS
FAX NO.	FAX BACK/RING BACK MON TUE WED THU FRI

ANY ADDITIONAL INFORMATION

10 COMMERCE WAY LANCING, WEST SUSSEX BN15 8TA PHONE: 0800 0121699 FAX: 01903 875085

MORE CONVENIENT
MORE COMFORTABLE

HydroSil® male

Male Hydrophilic Intermittent Catheter

USEFUL HELPLINES

Rochester Medical Ltd	0800 0322755 (Freephone)
Script-*easy* Confidential Prescription Service	0800 0121699 (Freephone)
Incontact	0870 770 3246
PromoCon	0161 834 2001
The Spinal Injuries Association	0800 980 0501 (Freephone)
The Disabled Living Foundation	0845 130 9177
The Royal Society for Disability & Rehabilitation (RADAR)	0207 250 3222
The Continence Foundation	0845 345 0165
The Multiple Sclerosis Society	0208 438 0700
The Association for Spina B ifida & Hydrocephalus (ASBAH)	0173 355 5988

For further information or assistance contact your health care professional.

ADDITIONAL RESOURCES

IMPORTANT PHONE NUMBERS

Script-*easy* Freephone Order Line 0800 0121699

Script-*easy* Fax Line 01903 875085

GP Phone Number _____

GP Office Address _____

NOTES

DISTRIBUTED BY
Rochester Medical Ltd
10 Commerce Way
Lancing, West Sussex BN15 8TA

Freephone: 0800 0322755
Phone: +44 (0)1903 875055
Fax: +44 (0)1903 875085

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Rochester Medical Corporation, Stewartville, MN 55976 USA

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