

UROGYNECOLOGY ASSOCIATES OF PHILADELPHIA

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CLEAN INTERMITTENT SELF CATHETERIZATION

Intermittent catheterization involves the insertion of a hollow plastic tube (a catheter) through the opening in the urethra and into the bladder. Because the catheter is hollow, urine will flow through it and the bladder will be emptied of urine.

Self catheterization is commonly performed in women who have had surgery for prolapse or incontinence. For most patients, it is only necessary to perform catheterization for several days to several weeks, until the bladder has recovered from the surgery and is capable of emptying on its own again.

Learning how to insert the catheter yourself can be as easy as learning how to insert a tampon. Once you become comfortable with the anatomy of the vagina and urethra, inserting the catheter will become easy.

Always wash your hands with soap and water before beginning. You may also want to wash around the urethra with soap and water before starting. The catheter can also be washed with warm water and soap. You do not need to clean anything with special solutions or disinfectants before catheterizing.

A small female catheter is easiest to insert. One end of the catheter is smooth with small holes. This is the end that is inserted into the bladder, so try not to touch this end after you have cleaned it. Hold the catheter by the other end.

Start the procedure by positioning yourself comfortably - either on the toilet or the edge of a chair or bed. Sit with your legs spread apart. If you are right handed, spread the vaginal "lips" with your left hand. Hold the catheter with your right hand and insert the small end (with the holes in it) into the urethra. Once the catheter is in the urethra, push it another inch or two to make sure you are in the right space. Urine flow will start after a few seconds. Leave the catheter in place until your urine flow diminishes to a slow drip.

Some women find using a mirror helpful in locating the urethra at first. The most common mistake is putting the catheter into the vagina. If this happens, wash the catheter and try again. If you still have difficulty, try inserting the middle finger of your left hand into the opening of the vagina. The opening of the urethra should be just above the vaginal finger.

The catheter does not need to be sterilized or boiled. You may keep the catheter in a small glass of water with some liquid soap in it with the small end with the holes in it towards the bottom of the glass. After using the catheter, hold it by the opposite end and rinse with soap and water. Make sure that you rinse the soap off well before using.

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You may carry your catheter with you in a clean plastic container such as those used for toothbrushes. If you take care of your catheters correctly, each one should last several weeks.

You and your doctor will discuss how often you will need to catheterize yourself. If you are unable to pass any urine at all on your own, you may need to catheterize yourself at least six times a day. The goal is to keep the amount of urine left behind in your bladder under 500ccs, so that your bladder muscle does not get overstretched.

It may take a few attempts before you become proficient at self-catheterization. Remember that in general, performing self catheterization allows you to be more independent and mobile and is less uncomfortable and bothersome than having to use an indwelling foley for an extended period of time.