

Suprapubic Urinary Catheter Care

Overview

A suprapubic (SP) catheter (soft, flexible tube) is placed directly into the bladder through the abdomen, right above your pubic bone. The catheter is placed by a doctor as an office or outpatient procedure. The catheter is attached to a drainage bag.

A suprapubic catheter may be recommended for people who need long term catheterization, had surgery that made a catheter necessary, or who have damage or blockage in the urethra (the tube that runs from the bladder to outside the body). The catheters usually are changed by qualified medical personnel. When your bladder had healed and you can urinate adequately, the tube is removed.

About the Catheter

The catheter must be connected to a drainage bag so urine can flow freely into the bag. It is important not to block the flow of urine, unless you are specifically asked to do so. For example, your doctor may ask you to block the flow of urine when they ask you to do a bladder function test.

The drainage bags are plastic. They vary in design but all of them have an adaptor so they can be connected to the catheter and, at the other end, a spigot to empty the bag. Some bags have long tubes so they can be attached to the bed or carried. Other bags are attached to your leg with straps.

Care of Your Catheter

The insertion site (opening on your abdomen) and the tube must be cleaned every day with soap and water and then covered with dry gauze. This is the area most likely to become irritated.

- Do not place Vaseline or any ointments around the catheter unless specifically instructed to do so by your doctor or nurse practitioner.
- **To decrease irritation:** Tape the catheter to your skin, so the tubing is not pulled tight. Tape is the best and least expensive way of securing the catheter. That way, if you accidentally move or tug on the catheter, it will pull on the tape, not on your skin or bladder. Tape the catheter so that it has a gentle curve as it goes towards the drainage bag.
- **To empty the bag:** Hold it over the toilet (or container) and open the spigot. Let the urine run out until the bag is empty, then close the spigot.
- **Rinse your drainage bags** with warm water and soap every day or two, depending on how dirty they are and how much odor is present. You can use a teaspoon of vinegar in the water to help reduce odor.

What are the
Possible
Complications?

Blockage: Urine should drain constantly into the bags. The more urine flowing, the lower the chances you will get a blockage. If you don't see any urine flowing for an hour or more and you feel the need to urinate, you may have a blockage. The most common cause is blood clots. If your tube becomes blocked, you will have to see your doctor or go to the emergency room so the catheter can be cleared out or replaced. **To help prevent blockage, drink 4-8 ounces of water every hour while you are awake.**

Bleeding: There may be a small amount of bleeding with any type of catheter, and this is nothing to be concerned about. If the bleeding makes it impossible to see through your urine, call your doctor.

Other risks: There is a low risk for infection of the urinary tract (or kidney), skin breakdown, septicemia (infection in the blood), urine leaking from around the catheter, and/or urinary stones. There is a risk bladder cancer may develop if an in-dwelling catheter is used long term (many years).

Bladder Testing

You may be asked to take a bladder function test before the SP tube is removed, to see if you can empty your bladder. If you can empty it completely (or almost completely), then the SP tube can be removed.

To Test Your Bladder

- ✓ Wash your hands and the catheter connections with soap and water.
- ✓ Block the SP tube so it won't drain. You can place a catheter plug in the end, bend the tube in half and use a rubber band to keep the tube bent, or clamp the tubing. **Note:** Place the end of the drainage tubing into a clean plastic bag.
- ✓ Once the SP tube is blocked, your bladder will begin to fill up. When you feel the urge, try to urinate. If you are successful, measure the amount of urine, called *voided urine*, and write it down, along with the time you urinated.
- ✓ After each time you urinate, unclamp the SP tube and allow it to drain, either into an empty drainage bag or jar. This is called *residual urine*. Measure this amount and write it down next to the *voided urine* amount.
- ✓ Keep track of all these measurements. Generally, when your *residual urine* is below 2 ounces, the SP tube can be removed, but every person is different. When you can urinate on your own, call us to arrange removing the tube.

NOTE: Do NOT go more than 6 hours without urinating. If you can't urinate on your own for 6 hours, unclamp the SP tube and let it drain. Measure and write down the amount of urine. If you have the urge to go, but can not, open the SP tube and let it drain out. In both of these situations, reconnect the tube to the drainage bag and try the test again on the next day. If you are still unable to urinate on your own the next day, let us know.

- ✓ At night, keep the tube unclamped so urine drains freely into the bag.

When to Call
the Doctor

Call your doctor right away if:

- you have a fever of **100.4°F** (38°C) or higher and/or chills
- pain in your abdomen (belly), back, or leg increases suddenly or gradually
- you have severe bladder pain, bleeding, or a pus-like discharge draining around the SP tube
- your tube does not drain

Home Care After
Your SP Tube is
Removed

Your bladder has been resting while your SP tube was draining. After you can urinate on your own and the catheter has been removed, you will still need to follow some simple instructions for 1-2 weeks to encourage healing and retrain your bladder. The usual feelings you had when your bladder was full may be decreased or absent, so you need to follow these instructions to prevent your bladder from getting too full.

- ✓ Try to empty your bladder every 2 hours for the next 1-2 weeks, even if you do not feel the need to urinate. Set your alarm to wake you every 2 hours during the night.
- ✓ Drink normal amounts of fluids. You do not have to drink or force extra fluids.
- ✓ Stop drinking fluids at least 2 hours before you go to bed.
- ✓ Limit fluids/foods that have caffeine in them (coffee, tea, chocolate, and certain types of soda) to 2 servings a day.
- ✓ Twice a day, clean the area around where the tube used to be. Take a cotton swab, cover it with gauze, and clean the area with normal saline.

Call us right away if you:

- lose the ability to urinate on your own
- have pain or burning when you urinate
- have an increase in redness, swelling, or drainage from the catheter site. (It is normal for small amounts of urine to drain from the site for the first few days after the tube is removed.)

My clinic's phone number: _____

Clinic hours are Monday to Friday, 8 a.m. – 5 p.m.

After hours: You can reach Roswell Park 24/7 at **716-845-2300** or toll free at **1-800-ROSWELL (1-800-767-9355)** and our Call Center and nurse triage will assist you.