Top 10 Things to Remember About your New Best Friend (Foley Catheter)

1. Draining the catheter is easy! By now you probably know to open the valve at the bottom of the collection bag when it fills to release urine into the toilet or sink. Changing from the night bag to the leg bag is easy as well. One simply pulls away the clear plastic tubing from the catheter end (while holding on to the catheter so it doesn’t pull) (sometimes it takes a little jiggling and patience). This pulls the old tubing out and new tubing is ready to be inserted. Rinse bag with diluted bleach (1 part bleach for 10 parts water and store in a dry place).

2. Protect your catheter. You need it. Note the picture above. The balloon at the top stays inside keeps it from falling out in the drawing above. Try to avoid situations where it can get caught on the gearshift, the bedpost, or the corner of the door. If the balloon pulls out while inflated this can spell bad news in lots of ways.

3. We like to see the catheter bag below the level of your bladder. We do not want bacteria from the collection bag backwashing back into the bladder. Make sure there are no kinks in the tubing. For your comfort, antibiotic ointment or Vaseline at the point where the catheter exits the body in male patients oftentimes helps the discomfort from small movements of the catheter.

4. Realize no catheter will collect 100% of the urine. Urine will always, and I mean always, leak around the catheter and get your underwear wet. Expect to have urinary leakage while you have a catheter in place. Most people wear absorptive protection (yes guys, even maxipads) in their undergarments while they have a catheter in.

5. Blood in the urine is absolutely normal with a catheter in place. Expect to see blood intermittently in your urine when you have a catheter. Remember the internal balloon. This balloon rubs on the inside of the bladder softly and causes non-dangerous expected bleeding. As long as the catheter is draining there is no cause for alarm. If a clot catheter back-up you need to come to the clinic or the ER for
irrigation. The amount of blood in the urine with a catheter looks to be more than it is. Blood in the urine is like food coloring. So even a couple of drops of blood can make the entire thing look very red. Your body is constantly making new blood which is almost always enough to make up for the small amount that is lost. However if you feel that your heart is racing or that you are busy and have been having a copious amount blood in your urine with clots for several weeks you may be anemic. Discuss these symptoms with your provider or seek medical attention if your urine all-of-a-sudden looks like red wine or you don’t feel right. This occurs in less than 1% of patients with catheters.

6. Infections can be a problem with catheters. If you have had a catheter for more than a week you might need antibiotics with your catheter removal. Please do not hesitate to discuss antibiotics with your provider when your catheter is removed. Signs of infection include persistent burning with urination, urinary frequency, and fever.

7. Bladder spasms are extremely common with catheters. The only thing the bladder knows how to do when it is irritated is contract. The bladder is trying to contract to push the catheter out. A bladder spasm is a deep pressure or pain that can be quite severe above the pubic bone. They spasms generally go away once the catheter is removed in most situations. There is a medication that can remove bladder spasms. Most of these medications cause dry mouth and cannot be taken if you have glaucoma.

8. The clinic number is 720-848-0170. Call and leave a message for the nurse handling phone calls in clinic or email your provider through MyHealthConnection if you need medication for infection or bladder spasms. Call the help desk for problems with MyHealthConnection (720-848-0000). The doctor on call for Urology can be reached by calling 720-848-0000 and asking to talk to the physician on call for Urology.

9. Realize that catheters will not change long term avoiding patterns. The catheter doesn't generally damage any internal structures in the long run. The catheter is merely a temporary drain. You will get back to normal – assuming surgery didn’t change things. You can’t control the flow of urine through the catheter, so we generally don’t recommend trying. However, if your catheter was put in because your bladder or prostate was taken out, you might want to practice tightening your sphincter muscle with it in place. This strengthens it faster as an isometric exercise. Kegel exercises, as a general room are quick contractions of the urinary sphincter 10 times each hour.

10. There is a small chance you won’t be able to eliminate urine if the bladder is dysfunctional or if your outlet is still swollen when the catheter is removed. If you are at home, you may try sitting in a warm tub and see if the urine will release. Stop drinking fluids any fluids if you
feel that you cannot empty your bladder and head back to clinic if it is between 8-430 (call first! 720-848-0170) or to your nearest emergency room if you are in severe pain or it is after hours.