

Parents' guide to intermittent self-catheterization - Girls

What is intermittent catheterization?

Intermittent catheterization is a way to completely empty the bladder throughout the day and is an option for people with medical conditions that prevent them from draining the bladder on their own. To perform intermittent catheterization, a catheter (hollow plastic tube) is inserted into the urethra (opening where urine comes out of the body), past the urinary



sphincter muscles and into the bladder. Once the catheter is in the bladder, urine will flow out, and the bladder will empty. Intermittent catheterization mimics how the bladder normally functions and must be done on a regular schedule as prescribed by your healthcare provider. Letting the bladder fill and then empty completely throughout the day increases the child's chances of maintaining a healthy urinary tract system. An overfilled bladder may stretch, which can sometimes contribute to urinary tract infections, urine leakage, and kidney damage.

Why should my child catheterize?

Children may need to perform self-catheterization for a number of reasons, which can include:

- Spinal cord injury
- Certain neurological conditions including spina bifida
- · A complication following a surgical procedure
- · Side effect of medication
- Problems with urinary retention (being unable to empty the bladder completely)
- Urinary incontinence (urine leakage or inability to control when urination occurs)

Intermittent catheterization has several health benefits compared with other bladder management options. Completely emptying the bladder several times a day through intermittent catheterization prevents urine from sitting in the bladder for prolonged periods of time and should help your child stay dry. Allowing the bladder to refill after voiding also keeps the bladder wall active, which is another benefit of intermittent catheterization. Studies show that intermittent catheter users experienced lower infection rates compared with foley or indwelling catheter users and was linked to improved independence¹.

How often should my child catheterize?

Frequency of catheterization will be prescribed by your healthcare provider. For schoolage children, it is very important that the prescribed catheterization schedule be continued throughout the school day. The school nurse should be informed about your child's bladder management schedule so that assistance is available if necessary. Intermittent catheterization supplies, like hand sanitizer, moist towelettes, or a leg mirror, along with a change of clothing, should be kept at school.

Medications

There are two types of medication that are sometimes prescribed to help stay dry between catheterizations. The first kind of medication helps hold in urine by tightening the bladder neck. The second kind of medication prevents bladder spasms and contractions to help prevent leakage between catheterizations. It is important that these medications be taken as prescribed. Any questions regarding medications should be discussed with your healthcare provider.

Can my child self-catheterize?

If your child has good dexterity, coordination, and an understanding of the procedure, she may be ready to self-catheterize. Children as young as four years old have been taught self-catheterization. It is important to note that readiness is determined by the child and should not be forced too early. Your child will be evaluated by a healthcare professional, and if your child is ready to learn the procedure, your healthcare provider can help you and your child learn intermittent catheterization.

It may take time for you or your child to locate the urethra. It is important to educate them about the female anatomy before starting catheterization so that they understand why and how they need to catheterize. Trial and error, as well as your guidance, can be helpful until they become accustomed to it. It is often helpful for girls to use a leg mirror to aid proper catheter placement, and with practice, they may be able to memorize the urethra location for easier insertion.

It will take practice for you or your child to learn how to catheterize. However, it is important to remember that you are not alone. While it may take practice, many children learn how to self-catheterize, which can help them feel more confident and independent.



Caring for a child with spina bifida?

Scan the QR code with your smartphone camera to hear inspiring stories, advice, and encouragement from other families affected by spina bifida and neurogenic bladder and bowel, or visit coloplastcareus.buzzsprout.com

Intermittent catheterization instructions for girls

Please refer to product labeling for complete product instructions for use, contraindications, warnings, precautions and adverse events.

Step 1

Examine catheter before use. Do not use product if device or packaging is damaged. Don't touch any part of the catheter that enters the body since this can contaminate the catheter.

Step 2

Wash hands with soap and water, or use an alcohol-based hand sanitizer.



Step 3

With the guidance of your healthcare provider, determine which catheterization position will be best (sitting or lying down). Position the child as comfortably as possible, either lying down with knees bent in a "frog-like" position, or sitting with legs spread apart.

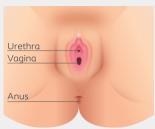
Step 4

If using a SpeediCath® hydrophilic-coated catheter, no additional lubricant is needed. If using an uncoated catheter, a water-soluble lubricant is recommended. If using an uncoated product, lubricate the entire length of the catheter and avoid touching any part of the catheter that enters the body (to reduce transferring bacteria).

Step 5

Separate the labia with the non-dominant thumb and forefinger and locate the urethra. Many catheter users initially struggle finding the urethra, but understanding female anatomy can guide locating it. Following the diagram to the right, females





have three openings including the anus, vagina, and urethra. The rectum leads from the large intestine and passes stool out of the body. Moving up towards the head, the vaginal opening comes next. Above the vaginal opening is the urethra, the passageway from the bladder to the outside of the body. Take time to get to know female anatomy and help the child (if ready) become familiar with their anatomy. A leg mirror can help the child better visualize the catheterization procedure and find the urethra.

Step 6

With one hand, continue to separate the labia and wash thoroughly with a moist towelette, swab or baby wipe. Be sure to wash from front to back and never go back and forth across the urethral opening. Use each towelette, swab, or wipe only once, since reusing them can spread germs.

Step 7

Insert the catheter gently into the urethra until urine begins to flow, then insert the catheter a little farther (approximately ½ inch). If the child is able to sit on a toilet, urine may be drained into the toilet. If the child is lying down, urine may be drained into a collection device.



Begin to withdraw the catheter slowly while slightly rotating it. Stop briefly each time more urine drains out.



Throw away the catheter after using it and wash your hands.





For video guidance, watch instructional SpeediCath® videos at: **BladderGuides.ColoplastCare.us**



Scan the QR code with your phone's camera for instructional how-to-use videos for children

These are general guidelines meant to help you with typical questions. Each person's situation is unique, and risks, outcomes, experience, and results may vary. You should follow the specific instructions by your healthcare team for you and the product you are using.

Coloplast does not practice medicine. The recommendations and information in this material are not medical advice. Contact your healthcare professional for personal medical advice or diagnosis.

SpeediCath® catheters are prescribed for use by pediatric patients (neonates to age 21) and adults who require bladder drainage due to chronic urine retention or post void residual volume (PVR). Before use, carefully read all of the instructions. Call your doctor if you think you have a UTI or can't pass the catheter into the bladder. For more information regarding risks, potential complications and product support, call Coloplast Corp. at 1-866-226-6362 and/or consult the company website at www.coloplast.us.

IF YOU THINK YOU HAVE A MEDICAL EMERGENCY, CALL 911.

Ostomy Care / Continence Care / Wound & Skin Care / Interventional Urology

