

Foley Catheter Care & Maintenance

Patient Education Guide



“WHAT IS A FOLEY CATHETER?”

Because of your medical problem, your body is having trouble completely emptying your bladder of urine. This is why your healthcare provider has prescribed a Foley catheter. The Foley catheter will act as a drain to empty your bladder.

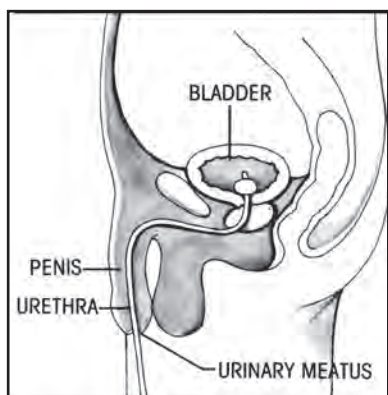
A Foley catheter is a thin, hollow tube made of soft, flexible material. It is passed through the urethra into the bladder.

The catheter is held in place by a small water-filled balloon which is inflated in the bladder to keep the catheter from falling out while you go about your normal activities.

Urine will automatically drain out of your bladder into the bag which is attached to the catheter.

A catheter drainage system consists of:

- 1. A Foley catheter*
- 2. A urinary drainage bag*



Catheter placement in a male



Catheter placement in a female

“WHAT SHOULD I DO IF I THINK I HAVE A PROBLEM?”

Talk to your healthcare provider whenever you have a question or think you may have a problem. Here are some things you can do on your own.

LEAKAGE

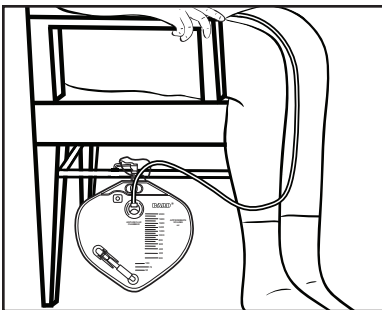
Occasional leakage is not unusual. If it is persistent or in large amounts, call your healthcare provider.

Call your healthcare provider immediately if you notice:

- Strong odor or cloudy urine
- Blood in urine
- Chills, fever above 99.4 degrees
- Lower back pain
- Abnormal leakage around the catheter
- Swelling at catheter insertion site, especially in men
- Disorientation or change in mental status

NO URINE IN BAG

- Change your body position
- Check for kinks or loops in the catheter and tubing
- Make sure the bag is lower than your abdomen so urine flows freely by gravity
- DO NOT clamp the catheter or tubing
- DO NOT irrigate the catheter unless instructed by your healthcare provider
- Call your healthcare provider immediately if the above steps do not restore proper urine flow



Avoid kinks and loops in the catheter or tubing



Call your healthcare provider about large amounts of leakage or when you cannot restore urine flow

“HOW DO I CARE FOR MY FOLEY CATHETER”

It is important to follow a few simple guidelines to avoid possible complications with your Foley catheter.

1. Maintain a Closed Drainage System

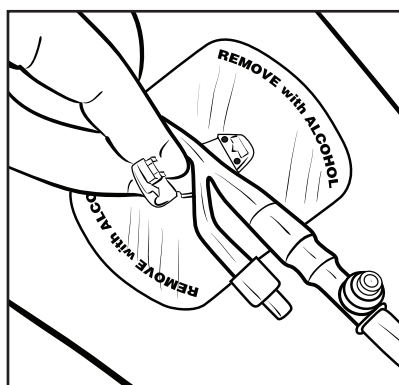
Maintaining a “closed” drainage system reduces the number of bacteria that enter the catheter system to cause an infection.

In order to maintain a closed drainage system:

- DO NOT remove the catheter unless instructed by your healthcare provider.
- DO NOT handle the catheter, tubing, or drainage bag without first washing your hands with soap and water.
- DO NOT break the connection from the catheter and the tubing.
- If a disconnection accidentally occurs, clean both ends with an alcohol pad, reconnect immediately, and call your healthcare provider.



Tamper evident seal helps prevent disconnection of the catheter from the tubing.



Proper catheter anchoring.

2. Use a Foley stabilization device

Foley catheters are often subject to inadvertent pulling forces that can lead to discomfort. A Foley stabilization device is designed to minimize catheter movement and accidental dislodgement, thereby maximizing comfort.

3. Maintain a Steady Urine Flow

- Keep the drainage bag below the level of your lower abdomen at all times, to keep urine flowing freely by gravity.
- Make sure there are no kinks or loops in the catheter or tubing which might restrict urine flow.
- Empty the drainage bag every four to eight hours, or if it becomes filled before then.
- DO NOT let the drain tube touch the container the urine is draining into, when emptying the bag.



Proper emptying of urinary drainage bag into pail.

4. Practice Good Hygiene

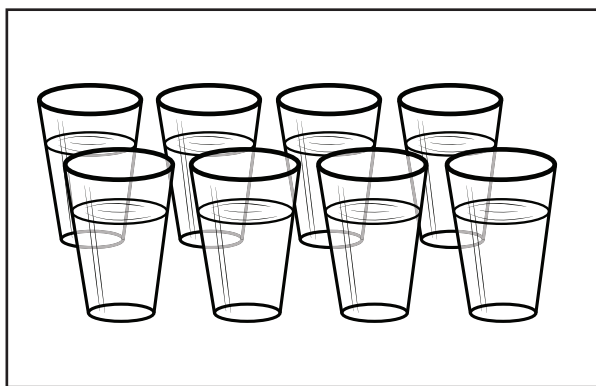
Wash hands with soap and water before and after touching the catheter or drainage bag. Wash skin around the catheter with soap and water daily and after each bowel movement. This will help reduce the risk of infection.

“HOW CAN I PREVENT PROBLEMS WITH MY FOLEY CATHETER?”

The Foley catheter is a necessary aid for managing your urinary drainage. With proper management and care, most potential problems with your Foley catheter can be avoided.

1. Drink Plenty Of Fluids

Unless your doctor has prescribed otherwise, drink at least eight to ten 8 ounce glasses of liquids daily. This helps reduce buildup of deposits that may block the catheter from draining properly.



Good fluid intake is important.

2. Maintain Steady Urine Flow

Keeping the drain bag below bladder level at all times and free of kinks and loops allows urine to drain in a “downhill” direction.

Urine backing up or stagnating in the tube or bag can lead to infection.

Empty your drainage bag every 4-8 hours or more frequently if it becomes filled before then.

3. Practice Good Hygiene

Wash hands with soap and water before and after touching the catheter or drainage bag. Wash skin around the catheter with soap and water daily and after each bowel movement. This will help reduce the risk of infection.

4. Maintain a Closed Drainage System

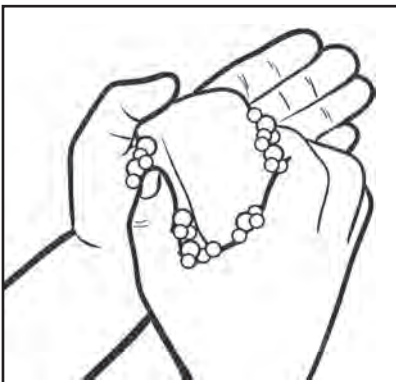
Maintaining a “closed” drainage system reduces the number of bacteria that enter the catheter system to cause an infection.

In order to maintain a closed drainage system:

- DO NOT remove the catheter unless instructed by your healthcare provider.
- DO NOT handle the catheter, tubing, or drainage bag without first washing your hands with soap and water.
- DO NOT break the connection from the catheter and the tubing.
- If a disconnection accidentally occurs, clean both ends with an alcohol pad, reconnect immediately, and call your healthcare provider.

5. Talk to Your Healthcare provider

Your healthcare provider will use the smallest catheter and balloon possible. A larger catheter may cause problems and will not drain urine any faster.



Wash hands with soap and water before and after touching the catheter or drainage bag

“HOW DO I APPLY, MAINTAIN AND REMOVE A STATLOCK® FOLEY STABILIZATION DEVICE?”

Application Technique

Prep

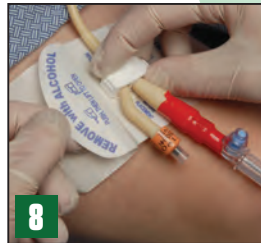
1. Place Foley catheter into retainer. Directional arrow should point towards catheter tip, and the balloon inflation arm should be next to the clamp hinge.
2. Close lid by placing your fingers under the pad and pressing the grip markers at the end of the clamp with your thumb, being careful to avoid pinching the catheter.
3. Identify proper securement site by gently laying the StatLock® Stabilization Device straight on the front of the thigh, then back up one inch towards the insertion site.* Make sure leg is fully extended.
 - Gently place the StatLock® Stabilization Device off to the side, away from the selected securement site.
4. Cleanse and degrease securement site with alcohol. Let skin dry. Be sure to clean area larger than securement site.
5. Apply skin protectant using both pads, in direction of hair growth, to area larger than securement site. Allow to dry completely (10-15 seconds).
6. Using permanent marker, write initials and date of application on StatLock® anchor pad.

NOTE: Always secure catheter into the StatLock® Stabilization Device retainer BEFORE applying adhesive pad on skin.



Place and Peel

- Align the StatLock® Stabilization Device over securement site, leaving one inch of catheter slack between insertion site and the StatLock® Stabilization Device retainer.* Make sure leg is fully extended.
- While holding the retainer to keep the pad in place, peel away paper backing, one side at a time, and place tension-free on skin.



Removal Technique

Disengage

- Open retainer by pressing release button with thumb, then gently lift to open.
- Remove Foley catheter.

Dissolve

- Wipe the edge of the pad using at least 5-6 alcohol pads until a corner lifts.

Then continue to stroke undersurface of pad, in a back-and-forth motion, by squeezing the alcohol out to dissolve the adhesive pad away from the skin.

Do not pull or force pad to remove.



Foley Catheter Care & Maintenance

Patient Education Guide



C. R. Bard, Inc.
8195 Industrial Boulevard
Covington, Georgia 30014
800.526.4455 Fax: 800.852.1339
www.bardmedical.com

Bard and StatLock are registered trademarks of C. R. Bard, Inc.

©Copyright 2013 C. R. Bard, Inc. All rights reserved.
1310-61 R11/13 XXX PXX/13 XM