



Looking after your child's urethral catheter

This leaflet gives information for parents / carers whose child is being discharged home with a catheter.

How does the urinary system work:

The urinary system consists of the kidneys, the bladder, the ureters and the urethra. The kidneys filter the blood to remove waste products and form urine. The urine flows from the kidneys, down through the ureters to the bladder. From here it passes through another tube called the urethra to the outside when urinating.

What is a urethral catheter and why does my child need one:

A urethral catheter is used to drain urine from the bladder.

The catheter is inserted into the bladder through the urethra. It is often used after operations to the urinary system as it allows them to rest while they are healing. In most cases, the urethral catheter is only needed on a temporary basis until the urinary system has recovered from the operation.

Equipment:

The drainage system consists of the catheter (thin, plastic tube) and a collecting bag. You may need some tape and new collection bags. We will supply you with everything you need before you go home.

Care of the catheter:

You do not need to do anything to the catheter apart from keeping it clean on the outside by carefully washing your child and the catheter tube if required. Ensure that you dry your child gently and thoroughly to prevent soreness.

The catheter will remain in place until your child comes back to the hospital to have it removed.

Keep the catheter taped securely to your child's abdomen (tummy) so it does not get tangled in clothing. Replace the tape if it becomes loose or dirty.

Keep the catheter as straight as possible - if it kinks, this will stop the urine flowing properly into the collection bag. Check the catheter regularly throughout the day for this. It may be necessary to re-tape the catheter.

Keep the collection bag below waist level but off the floor in case it gets trodden on. If your child is taken out in a pushchair it often helps to put the collection bag into a carrier bag. This can be placed into the bottom of the pushchair or hung on the side, ensuring the catheter bag is not trailing on the floor.

Leg straps can also be provided which attach the catheter to your child's leg under their clothing allowing mobility.



If there are any dressings in place, please leave these until your next hospital appointment unless instructed otherwise. Should the dressings require replacing please contact the Children's Assessment Unit or Buxton Ward for advice.

If your child is still in nappies, a nappy with a hole in the front may be more comfortable. This with also prevent the dressing and catheter being squashed. You will be shown how to do this prior to discharge.

Your child should avoid riding a bicycle or any other straddling toy as the catheter may become tangled.

Please encourage your child to drink plenty of fluids as this will keep the urine flowing, reduce any discomfort and reduce the risk of an infection developing.

Empty the collection bag at least 3-4 hourly in the day so you can observe that the catheter is draining adequately.

Emptying the collection bag:

- Wash your hands
- Stand or sit your child near the toilet
- Open the valve at the bottom of the bag
- Empty the bag into the toilet
- Close the valve.

Changing the collection bag:

You should do this once a week, or if the bag becomes disconnected. You will need a new collection bag.

- Wash your hands
- Bend the catheter over to stop urine leaking
- Remove the bag from the catheter
- Attach a new collecting bag
- Straighten the catheter

What if your child experiences problems:

Bladder spasms:

Bladder spasms feel like abdominal cramps to your child and are quite common when you have a catheter in your bladder. The pain is caused by the bladder trying to squeeze out the balloon. Your child should have been given medication to help prevent this.

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Leakage around the catheter:

This is called by-passing. It is sometimes the result of bladder spasms or can take place when you open your bowels. If it does happen, please check that the urine is still draining into the catheter bag. If it is not, you will need to contact the hospital as soon as possible.



Blood or debris in the urine:

This is common with a catheter. It is only of concern if you see large clots or solid pieces of debris passing down the catheter. If this happens, please contact the hospital for advice as this may cause a blockage.

Signs that the catheter is not draining:

- No urine or very little urine has drained over a period of time, although your child is drinking.
- Your child complains of stomachache, is unable to sit still or they pull their legs up crying.
- You notice urine on the dressing, or your child appears to be passing urine around the catheter.

You should call the ward if:

- Your child's urine becomes infected signs of infection include darker than usual, smelly or cloudy urine. Continue to encourage your child to drink fluids.
- Your child has a sudden bout of pain which does not improve after analgesia has been administered.
- Urine is not draining into the bag.
- Urine is leaking into your child's pants or nappy rather than the collection bag.
- The catheter falls out.

If you are unsure about any of the information in this leaflet, please contact the **Children's Assessment Unit on 01603 289774** or **Buxton Ward on 01603 286321** for advice.



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