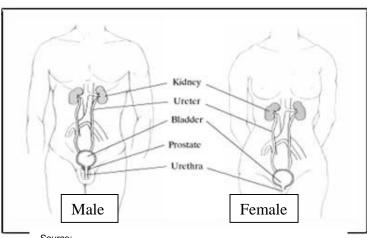


Danbury Hospital Patient Education Sheet

What is an Indwelling or Foley Catheter?



http://kidney.niddk.nih.gov/kudiseases/pubs/cystoscopy/index.htm

What is an indwelling or Foley catheter?

An indwelling, or Foley catheter is a thin, flexible drainage tube that drains your urine when you are unable to empty your bladder independently. Your doctor or nurse will insert the tube through the urethra, which empties urine from your urinary bladder to the outside of the body. Once inserted, a small balloon that is inside the catheter is then inflated to anchor the catheter in place. The catheter is attached to a drainage bag, which collects the urine.

Why do I need an indwelling catheter?

There are certain medical conditions that may require the insertion of an indwelling catheter. Examples include:

- Urine retention, or the inability to empty the urinary bladder, which cannot be managed otherwise
- Patients who are terminally ill or severely ill
- Patients with deep wounds on the lower trunk of the body
- During and/or after surgery to provide accurate tracking of fluid intake and output.
- Urinary incontinence in homebound patients who cannot self toilet and who the caregiver cannot manage.

How long will I have the catheter?

Your doctor will determine how long the urinary catheter will remain in place depending upon your individual situation. If the catheter is left in for an extended time period, your doctor may recommend having it changed every 6 to 8 weeks.

Once discharged, what should I report to my doctor?

Urine is normally sterile as it passes through the kidneys and bladder. Urine that passes through the urethra and out of the body contains low levels of bacteria. One of the complications you may be prone to with an indwelling catheter is urinary tract infections. You should report the following symptoms to your doctor or health care provider:

- Fever, chills
- Urine has a strong or foul smell
- Urine is cloudy or thick
- Nausea, vomiting
- New pain in abdomen, pelvis, legs, back
- Blood in or around the tubing or in the drainage bag
- No urine in the drainage bag for 4 or more hours
- Feeling of fullness in pelvis or abdomen
- Insertion site is irritated, swollen, red, tender
- Urine leakage around the catheter or from the tubing or bag

Once discharged, are there changes in my daily routine to consider while the catheter is in place?

There are some special considerations in your daily care while you have the catheter in place to maintain comfort and to help prevent urinary tract infections.

- Always wash your hands with soap and running water before and after touching the catheter or doing your daily catheter care
- Keep the skin around your catheter and the tubing clean.
- Avoid pulling or tugging on your catheter or applying tension to the catheter. This will cause irritation where the tube enters your body and it could dislodge the balloon inside the bladder.

- Avoid kinking the catheter under your leg. This will block the flow of urine.
- Always keep the drainage bag below the level of your bladder to prevent urine from flowing back into the bladder.
- Wear cotton underwear to allow good air flow and to keep the area dry.
- Drink plenty of healthy fluids to stay well hydrated. Unless you are on a fluid restriction, it is helpful to drink 6 to 8 glasses of liquid a day, such as water, juices, and milk.
- Avoid constipation.
- You may shower with the catheter in place unless your doctor has advised otherwise

Sources:

National Library of Medicine/MedlinePlus www.nlm.nih.gov Retrieved 01/06

WebMD @ www.webmd.com Retrieved 01/06.

06/2007