

INFORMATION LEAFLETS FOR PARENTS / CARERS OF A CHILD WITH A SUPRAPUBIC CATHETER



SUPRAPUBIC CATHETER

A hollow tube placed in the bladder through the tummy wall (below the belly button) to drain urine. They are usually held in place by a small balloon of water which prevents it from slipping out. It will also be secured to your abdomen with tape. Your Doctor / Nurse will decide how long it needs to stay in for. It may be put in place for a number of reasons, mainly after an operation or if your bladder is not emptying properly. Some people only require an indwelling catheter overnight. The reason for your catheter will be explained to you by your Doctor / Nurse.

CATHETER SITE CARE

- Your Nurse will show you how to clean and manage the site.
- The site is generally left exposed. On occasion a dressing may be required.
- The skin at the site can become slightly pink/red in colour which is a normal reaction.
- Clean with gauze and warm water to remove any crusting.
- You can apply vaseline with a cotton bud to soften any crust to remove it easily.
- Shower as normal using a mild body wash.
- After the shower dry your leg bag and change your straps. Change your tapes if they are loose.
- Avoid the bath. You can “stand and splash” in a shallow bath if showering is not possible.

CATHETER CARE

- Your catheter will be secured to your abdomen with elastoplast tape or a special grip-lok velcro holder.
- NEVER tape the catheter to the leg as this will cause tension on the catheter when you walk.
- Elastoplast must be changed when it gets wet or loosens. Secure the tape around the circumference of the catheter and onto the skin. The nurse will demonstrate this for you.
- A grip-lok will dry after a shower and remain stuck for up to 2 weeks. Ensure your catheter is secured under the velcro flap.
- Your catheter can drain 2 ways: leg bag or flipflo catheter valve. Your Doctor / Nurse will choose the best option for you.

DRAINAGE

Free drainage into a collection bag (leg bag), which is attached to your leg with 2 velcro straps. There is a tap on the end for you to empty the bag regularly during the day.

- Always ensure your straps are tight enough and empty the bag when it is roughly half full to prevent it getting too heavy and causing tension on the catheter.

A flipflo valve, may be used during the day. It fits into the end of the catheter and can be opened regularly to empty the bladder. This method allows for normal bladder cycling (filling/emptying).

- At night you will connect a larger bag to the leg bag/flipflo to drain overnight while you sleep.
- Leg bag / Flipflo are changed weekly.
- Overnight bags are changed every night.

CHANGING A LEG BAG (*empty before changing*)

- Gather your equipment and wash your hands.
- Clean the connection with an alcohol wipe.
- Gently maneuver the bag from the catheter opening, kink the catheter to prevent urine spillage.
- Connect the new bag ensuring it fits snugly into the catheter.



CONNECTING OVERNIGHT BAG

- Gather your equipment and wash your hands.
- Clean the rubber bung of the leg bag / flipflo with an alcowipe.
- Remove the cap from the night bag and insert into the rubber bung.
- **OPEN THE TAP** to allow flow.
- In the morning, close the tap, remove the bag, empty contents into the toilet and discard the bag in the bin.

POTENTIAL COMPLICATIONS

- **Urinary Tract Infection** - signs and symptoms may include temperature/tummy or back pain/cloudy or foul smelling urine/generally unwell/vomiting. Your child may require an antibiotic. Please contact the hospital or your GP.
- **Catheter Site Infection** – signs and symptoms may include increasing redness, pain, tenderness or pus at the catheter site. Your child may require an antibiotic. Please contact the hospital or your GP.
- **Blood in urine** - friction from the catheter rubbing the inside of the bladder can cause pink/rose colour urine. Encourage plenty of water based fluids. If bleeding is excessive or fresh, please contact the hospital or your GP.
- **Pain / Spasm** - due to the catheter tip irritating the trigone, which is the sensitive area at the base of the bladder. Spasm often presents as a sharp gripping pain, which your child may feel in their bottom or penis. Encourage fluids. Contact the hospital or your GP as your child may require medication to help relax the bladder. This medication is often prescribed on discharge.

