

Indwelling Urinary Catheter Care Instruction

(存留導尿管之衛教指導)

■ Purpose

An indwelling urinary catheter is a tube inserted through the urethra into the bladder to continuously drain urine into a collection bag. It is commonly used for patients with urinary retention, post-surgical care, or those who are bedridden long-term. Proper catheter care is essential to prevent infections and other complications.

■ Cleaning Method

- Clean the urethral opening at least once daily, covering an area about 15 cm around the anus.
- Use warm water and a mild, neutral soap; showering is also acceptable.
- For males: Retract the foreskin to clean thoroughly, and be sure to return it to its original position afterward.
- For females: Clean from the urethral opening toward the anus (front to back). If there is discharge or after a bowel movement, clean again promptly.



■ Infection Prevention

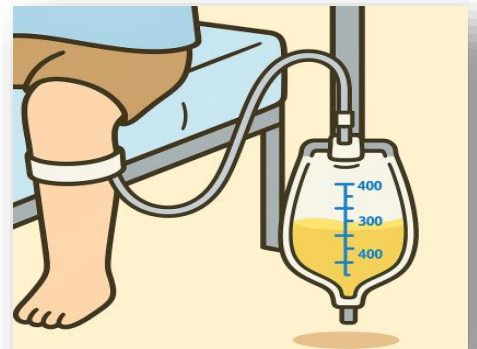
- Always wash your hands before and after touching the catheter or urine bag.
- Keep the perineal and anal areas clean and dry.
- Unless otherwise restricted, encourage fluid intake—aim for 2000 mL of water per day.

■ Urine Bag Management

- Maintain a closed system between the catheter and the urine bag; do not disconnect it yourself.
- Secure the urine bag to the leg or bedside, always keeping it below the level of the bladder and off the floor.
- When assisting with patient movement, ensure the urine bag remains below bladder level and does not touch the ground.
- Avoid kinks in the catheter and rotate the fixation site daily to prevent skin pressure injuries.
- For males: secure to the lower abdomen or inner thigh.
- For females: secure to the inner thigh.
- Empty the urine bag regularly—typically every 3–4 hours or when it reaches half full.



- When draining the urine, avoid touching the drainage outlet to the urinal or any contaminated surface.
- During patient transfers, you may temporarily fold the catheter to prevent backflow; restore proper flow afterward.
- The healthcare team will assess the patient's condition in real time to determine the appropriate timing for catheter removal.
- For long-term use, the catheter should be replaced regularly: every 2 weeks for standard material, and every 1 month for silicone catheters.



Keep the urine bag below bladder level and off the floor

■ Warning Signs and When to Seek Medical Help

- Monitor urine color and consistency. Watch for cloudiness or sediment.
- Check catheter function to ensure it is draining properly. If blockage occurs, the catheter may need to be replaced. If the catheter falls out and the patient cannot urinate, seek medical help immediately.
- Watch for signs of urinary tract infection such as fever, chills, urethral pain, increased discharge from the urethral opening, or cloudy urine. Seek medical attention promptly if these occur.



■ Quick Review

Question 1: () Wait until the urine bag is full before emptying it, to avoid infection caused by frequent opening and closing.

Question 2: () Clean the urethral opening at least once a day, including the 15 cm area around the anus.

Question 3: () To avoid infection, do not let water touch the urethral opening.

Correct Answers:

Q1: X Q2:○ Q3: X

References

- da Silva, R. A., de Oliveira, A. C., & de Souza, L. M. (2023). Nursing protocols to reduce urinary tract infection caused by indwelling catheters: An integrative review. *Revista Brasileira de Enfermagem*, 76(1), e20220123. <https://doi.org/10.1590/0034-7167-2022-0123>
- Qin, X., Zhao, H., Qin, W., Qin, X., Shen, S., & Wang, H. (2024). Efficacy of expanded periurethral cleansing in reducing catheter-associated urinary tract infection in comatose patients: A randomized controlled clinical trial. *Critical Care*, 28, Article 162.

Inquiry Hotline: (02)2737-2181 ext. 1300

Prepared by: Nursing Department / 114.12.01

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