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Instruction Guide to Sterile Self-Catheterization for Women Using the Cure Catheter[®] Closed System

This educational material is provided by Cure Medical in an effort to answer questions and address possible concerns about the intermittent catheterization process. By following the steps for sterile self-intermittent catheterization, it is possible to quickly master the technique and make the process part of your daily routine for bladder management and urinary tract health.

Cure Medical wishes to thank Anne Boisclair-Fahey, DNP, RN, CPNP for writing this educational material. She is a nurse practitioner in pediatric urology at the University of Minnesota.

This instruction guide is not a substitute for medical advice from your healthcare provider.



The Urinary System

The urinary system contains two kidneys, two ureters, the bladder and the urethra. The kidneys filter the blood and produce urine. The urine travels from the kidneys down the ureters and into the bladder, where it is stored until emptied during urination or catheterization. The urethra is the tube that empties the urine out of the body.

When the bladder is full, the brain sends a signal down the spinal cord to the bladder, causing it to empty. For people with spinal cord issues, the signal from the bladder to the brain gets interrupted, making them unable to empty their bladder.



When people are unable to empty their bladder on their own, they are at risk for urinary tract infections, as well as incontinence or involuntary loss of urine. When urine stays in the bladder and is not emptied, bacteria can grow, causing infections which can lead to illness. Research has shown that self-intermittent catheterization helps reduce urinary tract infections, control urinary leakage (incontinence) and prevent urinary tract damage.

Introduction to Self-Intermittent Catheterization

Self-intermittent catheterization is the periodic emptying of the bladder by the insertion of a hollow plastic tube (catheter) into the urethra, past the sphincter muscle and into the bladder. Urine then passes out of the bladder through the catheter. Self-intermittent catheterization is used when a person is unable to empty her bladder herself. Medical conditions that often require self-intermittent catheterization include spinal cord injuries, spina bifida or multiple sclerosis, just to name a few. Self-intermittent catheterization must be done at regular intervals each day to keep the bladder healthy.

What is Sterile Self-Intermittent Catheterization?

Self-intermittent catheterization is normally performed as a clean technique, meaning gloves are not used, and the catheter can be held with bare, clean hands. However, **your healthcare provider has recommended sterile self-intermittent catheterization** to help empty your bladder, keep your urinary system healthy and reduce urinary tract infections. The key to sterile self-intermittent catheterization is avoiding contact with the catheter; therefore, **gloves must be worn and the catheter should go directly from the sterile package into the body without touching any surface**.



How Often Should I Catheterize?

Your healthcare provider will let you know how often you will need to perform sterile self-intermittent catheterization and the size of the catheter you will need. Normally, sterile self-intermittent catheterization is performed every four hours starting when you wake up in the morning and continues every four hours until bedtime. Some people catheterize on a more frequent schedule. Most people who catheterize do not need catheterization at night. Your healthcare provider will let you know if you need catheterization at night.

Where Do I Get Catheters?

You will be taught sterile self-intermittent catheterization by your healthcare provider who will decide the size and style of catheter that you will need. Your healthcare provider will provide a prescription for the catheter supplies. The prescription will be sent to a medical supply company that will provide you with the supplies.

Sterile Self-Intermittent Catheterization Instructions for Women

Most women who perform sterile self-intermittent catheterization sit on the toilet, a chair or wheelchair when they insert the catheter into the urethra. Other women may perform it lying down with pillows behind their backs. Do what is most comfortable for you. Initially you may want to use a mirror to help visualize the urethral opening where the catheter is inserted. The mirror can be placed on a low stool in front of the toilet seat. It may take time for you to locate the proper opening. Eventually most women learn to catheterize by touch and feel.

1. Inspect Cure Catheter[®] Closed System before use. If catheter or package is damaged do not use.



The sterile, unisex Cure Catheter[®] Closed System is not made with DEHP, BPA, or natural rubber latex. It features polished eyelets on a straight, pre-lubricated catheter tip with integrated 1500ml collection bag.

- 2. Wash hands thoroughly with soap and water or an antibacterial hand cleaner.
- 3. Open the Cure Catheter® Closed System kit.



Sterile Self-Intermittent Catheterization Instructions for Women continued

- 4. Position yourself comfortably. Arrange clothing out of the way. If sitting in a chair or wheelchair, spread your legs apart and place the underpad on the chair. If lying down, bend knees and place your heels together in a "frog-like" position (shown) on the underpad provided in the kit.
- 5. **Put on the gloves** provided in the kit. Open the povidone-iodine swabsticks or BZK wipe provided in the catheter kit.



- 6. Using the non-dominant hand, separate the labia with the thumb and forefinger to locate the urethra.
- 7. With the labia separated, wash the urethral area from front to back thoroughly with a povidone-iodine swabstick or the BZK wipe. **Never go back and forth over the urethral opening.** Repeat washing from front to back with the other two swabsticks or two different areas of the BZK wipe. Discard the swabsticks or wipe when you are finished.
- 8. Remove the cap from the introducer tip and slide the catheter to within 1/8" (2 mm) of the top of the silicon tip. **DO NOT slide the catheter past the introducer tip yet**.
- 9. With the non-dominant hand hold inner labia apart, use the dominant hand to insert the introducer tip into the urethra. Secure it in place with thumb and forefinger of the non-dominant hand. Use the dominant hand to grasp the catheter through the bag close to the base of the introducer shaft.
- 10. Slowly push the catheter through the introducer tip and into the urethra. Continue to slide it through the urethra about 2 inches until the catheter reaches the bladder and urine begins to flow.





Sterile Self-Intermittent Catheterization Instructions for Women continued

- 11. When urine stops flowing, slowly rotate the catheter through the bag between your fingers while withdrawing the catheter. If urine starts to flow again when withdrawing the catheter, stop each time it flows and let the urine drain. Continue to slowly withdraw the catheter until the bladder is empty and the catheter is removed.
- 12. To empty the bag, hold it upright and put your thumb in the hole provided at the top of the bag *(shown right)*. Grasp the tab and tear downwards at the perforation located above "To Empty Tear Here". Pour out the urine through the opening into the toilet. Dispose of the bag properly.





Your Sterile Self-Intermittent Catheterization Specifications:

- Cure Catheter[®] Closed System size:
 8 FR 10 FR 12 FR 14 FR 16 FR
- Catheterize _____times a day or every _____hours.
- Catheterization required at night: Yes or No

Healthcare provider contact information:

Name

Telephone Number

Healthcare product supplier contact information:

Name

Telephone Number