

**Patient Name** (affix patient sticker)

**Patient ID number** (NHS or Hospital no.)

# Your Catheter Journal

Information & advice for patients and care record for healthcare professionals

## Infection Prevention & Control Service

### Information for patients and carers:

#### How to use the catheter journal:

The aim of this booklet is so you can keep a record of any care you receive for your catheter, even if you only have it for a short period of time.

We would like to encourage you to record any issues you have with your catheter, for example if it does not drain properly or your doctor has diagnosed a urine infection. You can find a section for your comments towards the back of this booklet (look for patient comments).

You should take this booklet with you to any appointments that you may have with a doctor or nurse. If you have any questions or would like further information, please speak to the doctor or nurse who is involved with your catheter care.



#### How to look after your catheter

- You should keep well hydrated and drink plenty of fluids.
- Ensure you empty your bowels regularly.
- You, your carers, or healthcare professional should always wash hands thoroughly before they touch any part of your catheter.
- Make sure your catheter is draining well and that you have no 'kinks' in the tubing.
- Ensure your drainage bag is below the level of your bladder.
- Your catheter should be secure as any pulling on the catheter or catheter tubing can cause irritation and increase your risk of getting a urine infection.
- Empty your bag into a clean jug, urinal or toilet.
- The tap on the bottom of the drainage bag should be cleaned with an antiseptic wipe before and after your catheter is emptied. Use soap and water when you are at home.
- Clean around your catheter daily with soap and water. Men should make sure that they wash underneath their foreskin.
- Ensure that you have always got adequate supplies of drainage bags, leg bags, over night bags and any other items you need for your catheter.
- Do not touch or disconnect your catheter unnecessarily.
- Do not use oil based creams or talcum powder around the catheter area.

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### Symptoms to report

If you experience any of the following, please contact your GP, District Nurse, Practice Nurse or any other healthcare professional involved in the care of your catheter (this list is not exhaustive):

- Bleeding from your catheter or blood in your urine.
- If your urine stops draining from the catheter.
- If you are constipated.
- Your catheter falls out.
- If you develop a fever (high temperature) and/or rigors (shaking linked to a fever).
- New onset of pain in or around your groin or tummy.
- If you have any concerns about your catheter.

### Information for healthcare professional:

The catheter journal should be used to facilitate effective communication between the healthcare professionals within both Primary & Secondary care, who are involved in caring for the patient's urinary catheter.

The patient should be encouraged to take this document with them when they access any healthcare services.

Please complete the catheter journal each time you make a catheter intervention e.g. catheter change, if a Catheter Specimen of Urine (CSU) is taken including the CSU result and any action was required and note any problems with the catheter such as blocking or encrustation.

Please remember to review the patient before proceeding with the catheter change to establish if the catheter is still required and if a trial without catheter (TWOC) is indicated.

### MRSA Screening

Patients should have an MRSA screen taken within the last seven days prior to routine catheterisation. MRSA stands for Meticillin resistant Staphylococcus aureus. It is a type of Staphylococcus aureus bacteria (germ) that is resistant to certain antibiotics so MRSA infections can be quite difficult to treat. The screen should include a swab of the patient's nose and groin as well as a CSU taken from the catheter sampling port.

If the patient is found to be MRSA positive from any site then five days of topical MRSA treatment is advised. This will need to be prescribed by the patient's GP or Doctor caring for the patient. If the CSU is positive for MRSA then antibiotic treatment is only indicated if the patient is symptomatic of a Catheter Associated Urinary Tract Infection (CAUTI), this should be discussed with the patient's doctor and antibiotics should be given as indicated by the specimen's antibiotic sensitivities.

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(tick appropriate box(s))

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	Catheter valve: <input type="checkbox"/> Yes <input type="checkbox"/> No	Overnight bag: <input type="checkbox"/> Yes <input type="checkbox"/> No						
<b>(D) Please identify catheter related action taken on this contact</b> (there may be more than action) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> To initiate catheter care plan  <input type="checkbox"/> Patient education  <input type="checkbox"/> Routine catheter change  <input type="checkbox"/> TWOC         </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Administration of bladder maintenance solution  <input type="checkbox"/> Catheter Blockage  <input type="checkbox"/> Catheter bypassing         </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Urgent catheter change  <input type="checkbox"/> MRSA screen  <input type="checkbox"/> CSU  <input type="checkbox"/> Other (provide details):         </td> </tr> </table>			<input type="checkbox"/> To initiate catheter care plan <input type="checkbox"/> Patient education <input type="checkbox"/> Routine catheter change <input type="checkbox"/> TWOC	<input type="checkbox"/> Administration of bladder maintenance solution <input type="checkbox"/> Catheter Blockage <input type="checkbox"/> Catheter bypassing	<input type="checkbox"/> Urgent catheter change <input type="checkbox"/> MRSA screen <input type="checkbox"/> CSU <input type="checkbox"/> Other (provide details):			
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# Your Catheter Journal

Information & advice for patients and care record for healthcare professionals

## Infection Prevention & Control Service

<p><b>(E) Catheter details (size, material, batch number).</b></p> <p style="text-align: center;"><b>Affix catheter sticker below</b></p> <p>Date: ..... /..... /..... Time: ..... : .....</p> <p>Date for next catheter change: ..... /..... /.....</p>	<p><b>(F) Is the patient known to be MRSA positive:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES and the patient was positive for MRSA colonisation, was decolonisation prescribed (provide details):</p>		
<p><b>(G) Is the patient known or suspected to have a CAUTI:</b></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Was antibiotic therapy indicated: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Name of antibiotic (if applicable):</p> <p>Causative organism if known e.g. Ecoli:</p>	<p><b>(I) Care setting where intervention given</b> (provide details):</p> <p><input type="checkbox"/> Hospital .....</p> <p><input type="checkbox"/> Intermediate care .....</p> <p><input type="checkbox"/> Nursing or residential home .....</p> <p><input type="checkbox"/> Patients own home .....</p> <p><input type="checkbox"/> Other .....</p>		
<p><b>Comments:</b></p>			
<p>CARE PERFORMED BY</p>		<p>DESIGNATION</p>	
<p>DATE</p>		<p>TIME</p>	



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<p><b>(E) Catheter details (size, material, batch number).</b></p> <p style="text-align: center;"><b>Affix catheter sticker below</b></p> <p>Date: ..... /..... /..... Time: ..... : .....</p> <p>Date for next catheter change: ..... /..... /.....</p>	<p><b>(F) Is the patient known to be MRSA positive:</b> <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No</p> <p>If YES and the patient was positive for MRSA colonisation, was decolonisation prescribed (provide details):</p>		
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<p><b>Comments:</b></p>			
<p>CARE PERFORMED BY</p>		<p>DESIGNATION</p>	
<p>DATE</p>		<p>TIME</p>	

# Your Catheter Journal

Information & advice for patients and care record for healthcare professionals

## Infection Prevention & Control Service

### Patient Comments

Please add any comments about your catheter that you feel are important to you and the team involved in caring for your catheter. For example "my catheter seems to be leaking urine" or "the colour of my urine looks darker today". \*Remember to contact the doctor or nurse involved in your catheter care if you are worried about your catheter in any way\*.

Date & time	Your comments

# Your Catheter Journal

Information & advice for patients and care record for healthcare professionals

## Infection Prevention & Control Service

Date & time	Your comments



# Your Catheter Journal

Information & advice for patients and care record for healthcare professionals

## Infection Prevention & Control Service

### Further Information:

#### National Health Service

Urinary catheter

<https://www.nhs.uk/conditions/urinary-catheters/>

#### National Health Service

MRSA

<https://www.nhs.uk/conditions/mrsa/>

#### Bladder & Bowel UK

Supporting people with bladder and bowel problems

Tel: 0161 214 4591

<https://www.bbuk.org.uk/>

#### Healthtalk

Living with a urinary catheter

<https://healthtalk.org/living-urinary-catheter/overview>

(All websites accessed 20 May 2021).

### Sources used for the information in this leaflet:

National Institute for Health and Care Excellence (2014) *Infection prevention and control quality statement 4: urinary catheters*. [QS61]. Available at: <https://www.nice.org.uk/guidance/qs61/chapter/quality-statement-4-urinary-catheters> (Accessed 20 May 2021).

Loveday, H. P., Wilson, J. A., Pratt, R. J., et al. (2014). epic3: national evidence-based guidelines for preventing healthcare-associated infections in NHS hospitals in England. *Journal of Hospital Infection*, 86, S1-S70.

If you would like to suggest any amendments or improvements to this leaflet please contact the communications department on 0121 507 5303 or email: [swb-tr.swbh-gm-patient-information@nhs.net](mailto:swb-tr.swbh-gm-patient-information@nhs.net)



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