



Intermittent Self-Catheterization for Females

What is Intermittent Self-catheterization?

Intermittent self-catheterization or “ISC” is a way to empty your bladder using a catheter. You will perform this at regular intervals as instructed by your doctor.

Why do I need to do self-catheterization or ISC?

You need to do ISC because your bladder does not empty completely or it does not empty at all. Some people need to perform ISC for a short time, for example right after bladder surgery. Some conditions may require ISC for a longer period of time. Performing ISC will help you keep your bladder empty and decrease the chances of bladder infection. Some people do ISR instead of wearing a continuously draining catheter.

How often does ISC need to be done?

Your health care provider will let you know how often you need to do ISC. Some people may need to catheterize 2 – 4 times a day and other will need to catheterize as often as every 4-6 hours. It may be that when it is time to empty your bladder, you will have a feeling of fullness or you may feel the need to urinate but are unable to. There are some patients who know they need to empty their bladder by feeling restless, sweating, chills or may get a headache. Generally, you will need to catheterize often enough to keep the amount of urine drained below 10-14 ounces.

It is important that you establish a routine. You may receive a “bladder diary” on which you will keep track of the time you void or catheterize and how many

ounces of urine has drained with either voiding or catheterizing. After you establish a good routine it is no longer necessary to measure your urine. This could take several weeks or several months. Everyone is different

What supplies will I need?

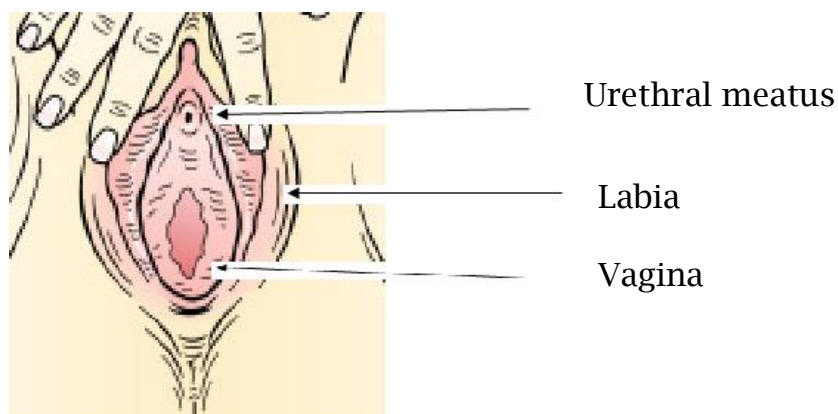
- A catheter that will be prescribed by your doctor.
- A clean dry storage container to store the catheter if it is being reused.
- Water-soluble lubricating jelly such as K-Y Jelly. Do not use petroleum jelly such as Vaseline.
- Moist towelette or a washcloth to clean the perineum.
- Liquid antibacterial soap without moisturizer or perfume, and water.
- A toilet, urinal or basin for draining and measuring the urine.
- A mirror (optional) to locate the meatus.
- A clean surface on which to place supplies.

Terms to know:

Urethral meatus: the opening to the urethra which leads to the bladder.

Perineum: the whole area around the urethral meatus and vagina.

Labia: the folds of skin around the urethral meatus and vagina.



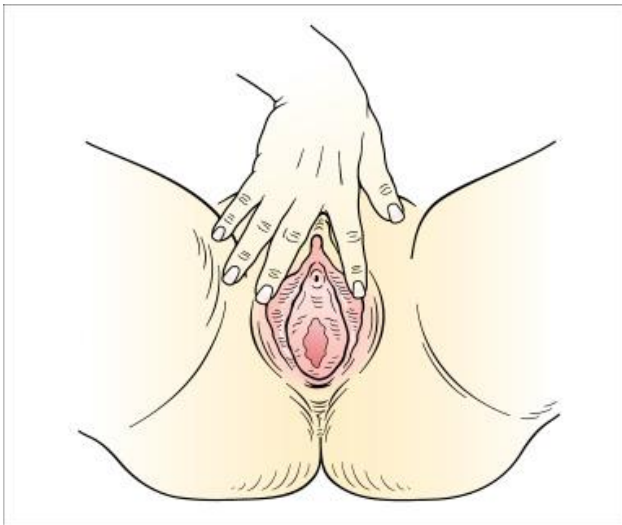
How do I catheterize myself?

Getting started:

1. Wash your hands with warm water and soap and dry with a clean towel.
2. Place your supplies on a clean surface within reach.
3. Open the catheter package and lubricate the tip of the catheter with the water soluble jelly.
4. Position yourself so that your knees are apart, leaning back slightly for the urethra and meatus to be accessible. You may also stand facing the toilet with one foot resting on the toilet seat.
5. Clean the perineum from front to back using the antibacterial soap on a washcloth, or with a towelette.

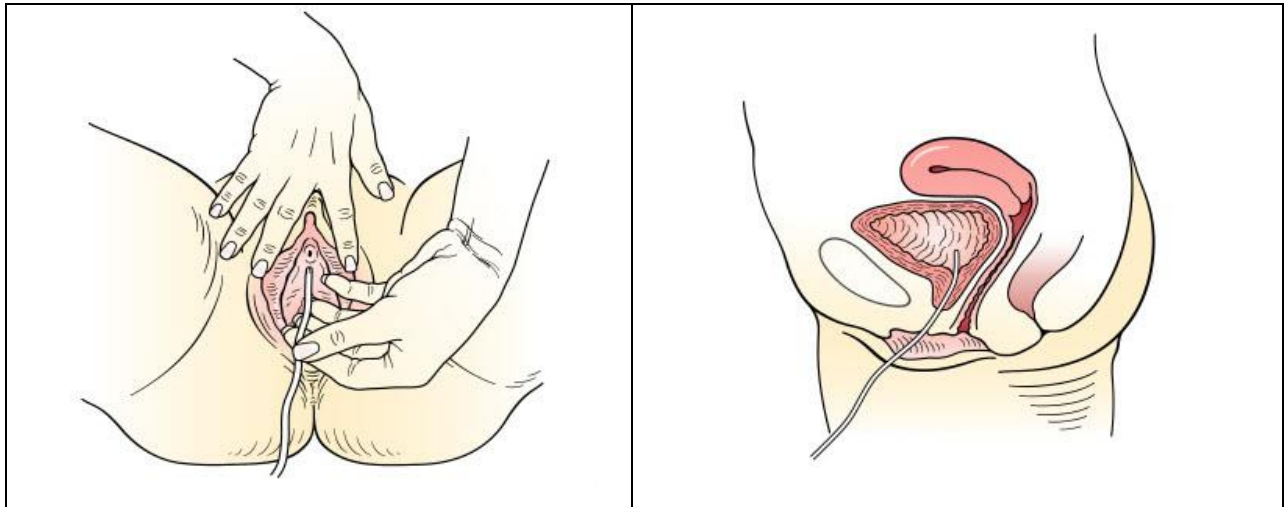
Steps to follow for catheterization:

1. Using your non-dominant hand spread the labia apart.



2. To locate the urethra, you can either use the mirror, or you can find it by feeling with your fingertip.
 - a. If you are using the mirror, place the mirror between your thighs and adjust as needed so you can see.

- b. If you are not using the mirror, hold the labia apart with your first finger and ring finger. Find the meatus with the middle finger of the same hand.
3. Using your other hand, slowly and gently insert the catheter in an upward direction.



4. Once you see the urine flow, insert the catheter one more inch.
5. Keep the catheter in your bladder until the urine stops flowing. The urine container should be lower than the bladder to facilitate drainage.
6. Once the urine flow stops, gradually remove the catheter. Stop each time you see more urine flow so you can completely empty the bladder.
7. For single use catheter, you can discard the catheter. If it is not a single use catheter, place the catheter in a clean dry storage container and clean it when you get home. You will be given instructions on proper care and storage of catheters.
8. Wipe the perineum from front to back to clean excess lubricant.
9. When completely finished, wash your hands with soap and water.

Important things to Remember

- When you are leaving home take several catheters with you, so you will have one available if you need to catheterize more than once.
- Be sure to catheterize as directed by your doctor
- Always wash your hands before and after self-catheterization.
- If your routine is to catheterize every three to four hours, make sure your first time is first thing in the morning and your last time is just before you go to bed.
- If you go to bed early, you should catheterize once during the night if the volume in the morning is consistently greater than 14 ounces.
- Drinking enough fluids is important for bladder health. Do not drink less fluid to decrease the need for self-catheterization.
- Call your doctor if you have trouble passing the catheter into your bladder.
- Do not press down on the bladder to empty it. The bladder will drain by gravity. Hard pressure on the bladder may push urine back into the kidneys.

Who do I contact if need more information?

If you have any questions, please contact the University of Michigan, Department of Urology at 734-936-7030 during working hours (8:00 am - 5:00 pm). After business hours or on weekends, please call 734-936-6267 and ask to speak with the Urology Resident on Call.

What do I need to watch for?

Call your doctor if you have any of the following signs and symptoms that may indicate an infection:

- Foul smelling urine
- Cloudy urine

- Change in color of urine
- Low-grade fever
- Unusual dribbling of urine

If you have any of the above symptoms notify your doctor and increase your fluid intake. If you increase your fluid intake, remember you will need to increase the number of times you catheterize yourself as well.

In people with high spinal cord injury, a bladder that is too full can also cause an extremely high blood pressure and headache and can lead to severe complications. If you have a high spinal cord injury and get a severe headache, empty your bladder immediately.

For urgent or emergent situations 24 hours a day, page the Urology Resident on call at (734) 936-6267. They will contact the doctor for you.

If you go to the ER, please ask the ER doctor to contact the University of Michigan urology resident on call for assistance.

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