OPTIMAL PROTECTION FOR THE PATIENT

About 90% of all urinary tract infections are caused by urinary drainage. The risk of bacteriuria or urinary tract infection for patients with a transurethral Foley catheter increases by 3 to 10% every day during indwelling time. Apart from the health risks for the patient himself, such infections also present a big economic problem. Each transurethral application can lead to contamination with microbes. It is therefore important that catheterization is carried out under aseptic conditions, i.e. all measures applied during this procedure must be of sterile nature.

STERILE CONTENTS:
1 x water-proof sterile paper cloth, approx. 76 x 46 cm
1 x kidney tray
1 x pair of vinyl gloves XL
1 x PE glove XL
1 x plastic tray with 6 gauze swabs
2 x gauze compresses 8 x 7.5 cm
1 x water-proof drape with slit, approx. 76 x 46 cm
1 x plastic tweezers
1 x sachet with 5 g water-soluble lubricant

Read up on the broad range of Rusch products for urology and endourology. Rusch offers a variety of products which help to reduce the risk of infections.

Aquaflate Glycerine
Silicone Foleys with pre-filled syringe to fill the balloon
Rusch S-Bag
Closed urine drainage system
Rusch U-Bag
Closed urine drainage system with chamber for hourly measurement

www.teleflexmedical.com
GERMANY • Teleflex Medical GmbH
P.O. Box 11 10 • 71385 Kernen
Phone +49 (0)7151 40 6 0 • Fax +49 (0)7151 40 6 150
info.de@teleflexmedical.com
UNITED KINGDOM • Teleflex Medical • High Wycombe • Bucks. HP12 3ST
Phone +44 (0)1494 53 22 61 • Fax +44 (0)1494 52 44 50
info.uk@teleflexmedical.com
www.rusch.de • www.teleflex.com
**APPLICATION:**

**STEP 1: PREPARATION**

1. Open the set; the outer peel-back can be kept and used as refuse bag. Spread out the inner packaging to serve as a sterile work surface.
2. Put on the vinyl gloves, then the PE glove.
3. The helping second person can make sure that all additional material used is sterile and can douse the 6 gauze swabs in the small plastic tray with disinfectant for the mucosa. If necessary, the Foley catheter can be connected to the closed urine collector before application.

**STEP 2: DRAPE WITH SLIT**

1. Using aseptic technique, the drape with slit is now placed on the patient with the foil side down. In the case of women, the slit should point to their feet, and with men it should point to their head.
2. The kidney tray is now placed between the legs of women, and on the legs of men.

**STEP 3: DISINFECTION**

Disinfection of the outer genitals.
Use every swab only once!

**PROCEDURE WITH WOMEN**
(after hygiene of the intimate areas if necessary):
1 and 2. swab: disinfection of labium majus (labia I. and r.)
Always from front to back!

3. and 4. swab: disinfection of nymphae (labia l. and r.)
Always from front to back!

5. swab: disinfection of urethra

6. swab: cover the vaginal entrance if necessary

**STEP 4: CATHETERIZATION**

1. After disinfection, take off the PE glove.
Make sure that the two other gloves remain sterile.

2. Wet the catheter tip sufficiently with the water-soluble lubricant.

3. Carefully insert the catheter with your hand or with the plastic tweezers into the urethra until urine starts flowing.

4. In the case of indwelling Foley catheters, advance the catheter until the balloon is safely positioned in the bladder. Fill the balloon with the maximum volume indicated on the catheter funnel and pull the catheter back until slight resistance can be felt. We recommend to fill the balloons with sterile water. Balloons of silicone Foley should preferably be filled with a sterile 10% glycerine solution.

If an indwelling Foley catheter is used and it has not yet been connected to a sterile closed urine collector, this must be done now.

With men, the foreskin must be repositioned after catheterization.

**STEP 4: COMPLETION**

- Dry the genital area if necessary.
- Fasten the urine collector to the bed, always below the bladder level.
- Dispose of all materials in an environmentally suitable manner.
- Carry out final hand disinfection!

**WHAT YOU NEED FOR BLADDER CATHETERIZATION:**

- Hand disinfection solution
- Disinfectant for mucosa
- Sanitary products (water, washcloth, soap, towel)
- Clean surface (e.g. side table)
- Bladder catheterization set, with lubricant if necessary
- Bladder catheter
- Syringe with sterile solution to fill the balloon, in case an indwelling Foley catheter is placed
- Closed urine collector, in case an indwelling Foley catheter is placed
- Refuse bag

**NOTE:**
All materials needed for bladder catheterization must be prepared using aseptic techniques. With the help of a second person preparation and application are made easier.

**RECOMMENDATIONS:**
After informing the patient about the forthcoming bladder catheterization, hygiene of the intimate areas should be carried out. The patient is then placed in flat dorsal position. Ask women to tuck up their legs and place their feet in a straddled position. Place a cloth under the patient’s buttocks. Finally, disinfect your hands.

**PROCEDURE WITH MEN**
(after hygiene of the intimate areas if necessary):
Pull back prepuce (foreskin). Disinfect glans penis all around, from urethra to the body, using all 6 swabs.

---

1. and 2. swab: disinfection of labium majus (labia I. and r.)
Always from front to back!

3. and 4. swab: disinfection of nymphae (labia l. and r.)
Always from front to back!

5. swab: disinfection of urethra

6. swab: cover the vaginal entrance if necessary