Male Catheterisation and Removal Procedure

(Continence Manual)

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1. **AIM**

To provide staff with best practice guidelines for performing male catheterisation.

2. **SCOPE**

This procedure applies to all clinical staff, whether in a direct or indirect patient care role.

Adherence to the procedure is the responsibility of all Trust staff, including agency, locum and bank staff.

3. **LINK TO OVERARCHING POLICY**

3.1 Continence Manual

https://www.rdash.nhs.uk/27299/continence-policy/

3.2 **LINKS TO RELEVANT POLICIES/PROCEDURES**

Continence Manual | RDaSH NHS Foundation Trust

Infection Prevention and Control Manual | RDaSH NHS Foundation Trust

4. **PROCEDURE**

4.1 **Catheterisation**

Catheters should only be used after all alternatives have been considered. When catheterisation is being discussed as a treatment option/intervention, intermittent catheterisation should always be considered for incomplete emptying as a first option rather than indwelling catheterisation, providing this is safe and acceptable alternative for the individual and carer(s). It is therefore essential that a urethral catheterisation assessment is performed before carrying out the catheter procedure. Reason for catheterisation must be clearly documented within the Catheter Integrated Pathway of Care (IPOC) within SystmOne and Catheter Passport. Please refer to appendix 8 for urethral catheterisation assessment guidance.

4.2 **Catheterisation Associated Risks**

Using any form of catheterisation has associated risks. Therefore it is essential that a risk assessment is an integral part of catheter care. Please refer to Appendix 9 for risk assessment
4.3  **Catheter Choice**

Please refer to Appendix 10 for choice of Catheter and equipment. Male patients must only be catheterised with a standard length.

The choice of catheter and equipment used must be clearly documented within the catheter IPOC within SystmOne and catheter passport.

4.4  **First Time Male Catheterisation**

First time male catheterisation can only be performed in the community setting by the Unplanned Care Team for **acute** retention only. However for End of Life patients if the registered nurse is competent in male catheterisation and they have attended the catheter study day and have completed the relevant scope package, they may perform catheterisation.

A first time male catheterisation is classed as someone who has never been catheterised before or has not had a catheter in place for 2 years.

A registered nurse within the Unplanned Care Team may carry out first time male catheterisation for acute retention when they have completed the Management of Acute Painful Retention In Men (MAPRIM) training, completed the relevant competency package and attended the Catheter Study Day training provided by the Specialist Continence Service. Please refer to Appendix 11 Management of Acute/Chronic Retention in Males 1\textsuperscript{st} Time Male Catheterisation Pathway (MAPRIM Pathway).

4.5  **Male Re-catheterisation**

A registered nurse may carry out uncomplicated male re-catheterisation when they have completed the catheterisation CAST competency package and attended Catheter Study Day training provided by the Specialist Continence Service.

4.6  **Catheter Clinic**

Non- house bound patients with catheters can be referred to the Specialist Continence catheter clinic for routine catheter change.

4.7  **Catheter Change**

Catheter change should be a planned event according to the type of catheter selected and the patient’s previous history where a catheter is already in situ. Monitoring catheter change history can establish a pattern for any recurrent problems such as encrustation leading to blockage, and can allow changes to be planned prior to problems developing.

4.8  **How to perform Male Catheterisation**

Please follow link to the Royal Marsden
After catheterisation it is essential that the health care professional performing the catheterisation ensures that the foreskin is replaced, this is to prevent paraphimosis occurring (the foreskin becomes trapped behind the glans penis and cannot be reduced). If this condition persists for several hours or there is a lack of blood flow it must be classed as a medical emergency. Please refer to the Trouble Shooting with Catheters Procedure; Continence Manual Advise the patient/carer to use alternate legs when attaching the catheter bags each day to reduce the risk of developing a split in their meatus.

Nurses should ensure that the patient is aware of basic catheter care and how to order catheter equipment.

4.9 How To Remove a Catheter

Please follow link to the Royal Marsden Urinary catheter removal - Royal Marsden Manual

4.10 Documentation

The Catheter Integrated Pathway of Care (IPOC) found within SystmOne provides a framework for best practice and follows RCN Guidelines for nurses on catheter care (2019). The IPOC supports the assessment process and should be followed by the Healthcare Practitioner to meet all the clinical and legal requirements for record keeping.

Each individual patient or carer should be given a ‘My Catheter’ Passport document. This document provides the patient with written information about their catheter management (please see Appendix 17).

There are 2 distinct sections within the Passport – Patient and Clinical. The Patient Section supports effective care of the catheter in order to reduce the risk of infection and the Clinical Section includes essential information around the catheterisation itself and should contain the plan of care; reason for catheterisation and plans for trial without catheter. There is also a Catheter Maintenance Section which can be completed by the Health Care Professional, carer or patient themselves.

5. APPENDICES

Appendices are published on the Continence Manual’s webpage where they can be accessed, downloaded.

Appendix 8 Urethral Catheterisation Assessment Guidance
Appendix 9 Risk Assessment
Appendix 10 Choice of Catheter and Equipment
Appendix 11 Management of Acute Painful Retention In Men Pathway

Appendix 17 My Catheter Passport

6. Reference

Royal College of Nursing (2019) Catheter Care RCN Guidance for Health Care Professionals. London Catheter Care | Royal College of Nursing