

FACTSHEET

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Indwelling Urinary Catheter (IDC)

What is an Indwelling Urinary Catheter (IDC)?

An indwelling urinary catheter is a thin, flexible and sterile tube that is used to drain urine. It is inserted through the urethra (where the urine comes out) into the bladder (where the urine is stored). While insertion can be uncomfortable, it is generally not painful. Indwelling catheters may have a balloon to keep them positioned in the bladder.



In older children, once the catheter is inserted, the balloon is inflated with water to keep it in position inside the bladder. The catheter is then connected to a urine draining bag and taped to your child's groin, abdomen or upper thigh.

For children in nappies, the catheter can also be taped to your child's abdomen and the urine drains into your child's nappy. For this drainage method, double nappies may be needed.

Double Nappies

Your child may need to wear double nappies. The first nappy will collect your child's faeces. The second will collect the urine. The catheter end should be placed out the side of the first nappy and into the second as shown in the image below. This will allow drainage of urine while keeping both the catheter and surgical site separate and clean. The first nappy should be checked regularly for faeces and cleaned with warm soapy water, if soiled.



Why does your child need an IDC?

- To relieve a build-up of urine in the bladder (retention)
- If your child is having surgery that will prevent them from using the toilet
- To keep urine away from a surgical wound

Urinary catheters in children

A trained nurse/medical professional will explain the procedure to the child and parent/guardian.

After cleaning the area, the catheter is lubricated and for males, the area is numbed using a local anesthetic. The tube is inserted through the urethra into the bladder until urine is seen to drain out of the tube.

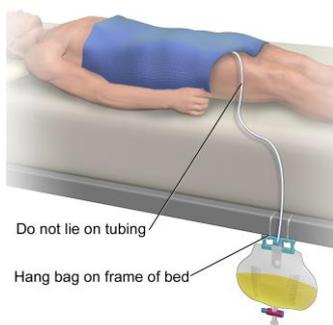
How is an IDC removed?

In most cases, an IDC is only needed on a temporarily. The risk of getting a urinary tract infection (UTI) can be reduced by leaving a catheter in for the least amount of time. Most often, catheters will be removed 24-48 hours after insertion, unless it is needed longer.

After cleaning the area, nursing staff will remove the tapes, deflate the balloon that is in the bladder (if applicable) and then gently pull the catheter out. If there is any resistance, nursing staff will stop the procedure and inform doctors. The child will need to urinate within 8-10 hours after the catheter is removed. If this does not happen, an IDC may need to be re-inserted.

Care of the catheter

- Always wash your hands before and after touching the catheter.
- Ask your nurse for help or the items needed to wash your child.
- Clean around the urethra (where the catheter leaves the body) with warm, soapy water. If your child is well enough, encourage them to have a shower.
- To help the urine drain out of the catheter, it is important to keep the catheter below the level of the bladder.
- Be aware of where the catheter and drainage are when your child is moving in bed or walking around.
- If urine is not draining into the bag/nappy, this could mean there is a block or kink in the catheter tubing. If urine is leaking onto your child's clothing or into the first nappy, this could also be caused by a block or a deflated balloon. If you notice either of these happening, let your nurse know.
- Encourage your child to drink plenty of fluids. This helps to keep urine flowing and can reduce the risk of getting an infection.
- Ask the doctors when you can expect removal of the catheter.



What to look out for with IDC:

- Your child's temperature will be checked regularly for fevers greater than 38.5°C. A nurse will also look for redness, swelling or discharge at IDC insertion site or any changes in urine colour, smell or consistency. These could indicate a UTI or allergic reaction to latex or taped used with the catheter.
- Sudden onset of pain could be a sign of infection or bladder spasm.
- Bleeding from the urethra may indicate trauma from catheter insertion or accidental removal.

Remember:

- The least amount of time a catheter is in reduces the risk of developing a UTI.
- If your child has a fever, reaction or urine changes, it may be a sign of infection.
- Keep the area clean from faeces and wash perianal area, at least daily, with warm soapy water.
- Monitor the drainage of urine. Make sure there are no kinks in the catheter tubing and that the tubing is not caught when your child is moving around.
- Seek assistance from your nurse or doctor, if you have any concerns.