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# ***Trial without catheter***

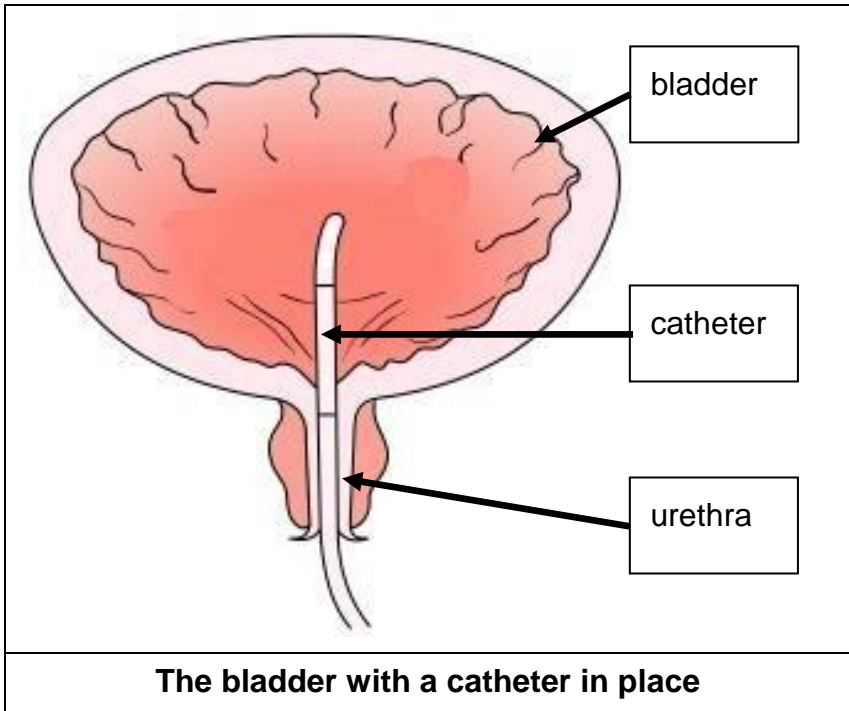
***Information for patients and carers***

**NHS Grampian Bladder and Bowel Specialist Service**



### ***What is a trial without catheter?***

A trial without catheter is when a catheter (hollow tube) which has been inserted along your urethra (water pipe) is removed from the bladder for a trial period. This is done to find out if you can pass urine on your own.



## ***How is my catheter removed?***

This is done by removing water from a small port on the side of the catheter allowing the balloon (which kept your catheter in place) to deflate.

Once the water has drained, the catheter can be removed slowly from the bladder. This may be uncomfortable but not painful.

A nurse removes your catheter. Usually this is done between 9am and 10am to allow time for us to fully assess how you're getting on.

## ***What will happen once the catheter has been removed?***

We'll encourage you to fill your bladder slowly by drinking sufficient fluid. This normally means drinking a glass or cupful of liquid every hour.

We'll ask you to keep a note of how much fluid you've taken and to measure the amount of urine you've passed. You can take fluids such as water, juice, milk, tea or coffee. However, fluids that contain caffeine such as tea/coffee or some fizzy juices may cause you to go to the toilet more often.

We have another leaflet called "How to keep your bladder healthy" (ID no 0007) Just ask if you'd like a copy.

## ***Do I have to stay in hospital during this time?***

Not necessarily. You can leave the clinic/ward area but stay in the hospital grounds. This means you can return at any time if you're in any discomfort or find that you can't pass water.

If you live within six miles of the hospital, you may be able to return home after the catheter has been removed. You should make sure that you can get back to the ward/clinic if you have any difficulties.

## ***What happens next?***

Three or four hours after the catheter has been removed, a nurse (either in the ward or over the telephone) will discuss your fluid intake and the amount of urine you have passed.

At this time, the nurse may wish to scan your bladder to make sure it's emptying properly.

However, if you've any discomfort or can't pass urine before this time, you must contact your nurse right away.

### ***What happens if I can't pass urine?***

If you can't pass urine, a new catheter may be inserted or you may be shown how to carry out intermittent self-catheterisation (where you insert the catheter yourself when you need to empty your bladder).

If you need to have a new catheter, we'll refer you referred to your consultant or specialist nurse for further advice and to discuss the best way forward for you.

If you choose to have self-catheterisation, your specialist nurse will provide you with everything you need for this and will monitor your progress and follow up outpatient appointments.

### ***What if I need my catheter removed at home?***

If you are at home and after discussion with your doctor and nurse, it's decided your catheter needs removed, this will be done as described on pages 1, 2 and 3.

### ***Points to note***

- Drink 1½ to 2 litres (3 to 4 pints) of fluid each day.
- Drinking too much or too little can cause bladder problems
- When using the toilet, relax and take time to empty your bladder completely without straining.
- Avoid constipation as this can cause extra pressure on your bladder.

### ***Who can I contact for more information?***

<b>Healthcare professional details</b>	
<b>Name:</b>	
<b>Job title:</b>	
<b>Phone number:</b>	

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Feedback from the public helped us to develop this leaflet.  
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