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Instruction Guide to Sterile Intermittent Catheterization For Parents of Boys Using the Cure Catheter® Closed System

This educational material is provided by Cure Medical in an effort to answer questions and address possible concerns about the sterile intermittent catheterization process. By following the basic steps for sterile intermittent catheterization, it is possible to quickly master the technique. As many parents have found, the process becomes a simple part of a daily routine for your child's bladder management and urinary tract health.

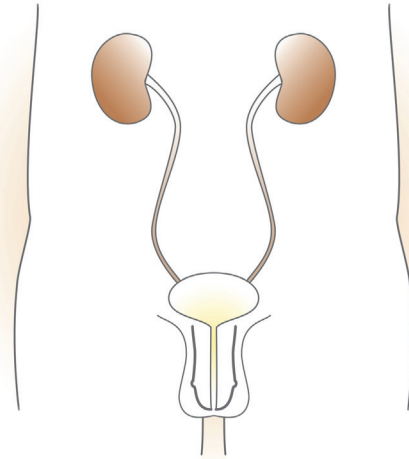
Cure Medical wishes to thank Anne Boisclair-Fahey, DNP, RN, CPNP for writing this educational material. She is a pediatric nurse practitioner in pediatric urology at the University of Minnesota.

This instruction guide is not a substitute for medical advice from your healthcare provider.

The Urinary System

The urinary system contains two kidneys, two ureters, the bladder and the urethra. The kidneys filter the blood and produce urine. The urine travels from the kidneys down the ureters and into the bladder, where it is stored until emptied during urination or catheterization. The urethra is the tube that empties the urine out of the body.

When the bladder is full, the brain sends a signal down the spinal cord to the bladder, causing it to empty. For children with spinal cord issues, the signal from the bladder to the brain gets interrupted, making them unable to empty their bladder.



When children are unable to empty their bladder on their own, they are at risk for urinary tract infections, as well as incontinence or involuntary loss of urine. When urine stays in the bladder and is not emptied, bacteria can grow, causing infections which can lead to illness. Research has shown that sterile intermittent catheterization helps reduce urinary tract infections, control urinary leakage (incontinence) and prevent urinary tract damage.

Introduction to Intermittent Catheterization

Intermittent catheterization is the periodic emptying of the bladder by the insertion of a hollow plastic tube (catheter) into the urethra, past the sphincter muscle and into the bladder. Urine then passes out of the bladder through the catheter. Intermittent catheterization is used when a person is unable to empty his bladder himself. Medical conditions that often require intermittent catheterization include spinal cord injuries, spina bifida or multiple sclerosis, just to name a few. Intermittent catheterization must be done at regular intervals each day to keep the bladder healthy.

What is Sterile Intermittent Catheterization?

Intermittent catheterization is normally performed as a clean technique, meaning gloves are not used, and the catheter can be held with bare, clean hands. However, **your child's healthcare provider has recommended sterile intermittent catheterization** to empty the bladder, keep your child's urinary system healthy and reduce urinary tract infections. The key to sterile intermittent catheterization is avoiding contact with the catheter; therefore, **gloves must be worn and the catheter should go directly from the sterile package into the body without touching any surface.**

How Often Should I Catheterize My Child?

Your healthcare provider will let you know how often you will need to perform sterile intermittent catheterization and the size of the catheter you will need. Normally, sterile intermittent catheterization is performed every four hours starting when your child wakes up in the morning and continues every four hours until bedtime. Some children are catheterized on a more frequent schedule. Most children do not need to be catheterized at night. Your child's healthcare provider will let you know if your child needs catheterization at night.

For school age children, it is important to maintain their catheterization schedule throughout the school day. The school nurse will be able to assist your child if necessary.

Can My Child Be Taught Sterile Self-Intermittent Catheterization?

If your child shows interest in learning the procedure and has good hand dexterity, flexibility and coordination, he may be able to learn to routinely perform sterile self-catheterization. Even though most children can easily learn the procedure, **it is very important that parents supervise their children's catheterizations to make sure they are adequately emptying their bladders and using the proper technique.** Research has shown that when children are completely left to catheterize themselves without supervision, some of the technical steps are often missed, resulting in urinary incontinence and urinary tract infections.

Sterile Intermittent Catheterization Instructions for Parents of Boys

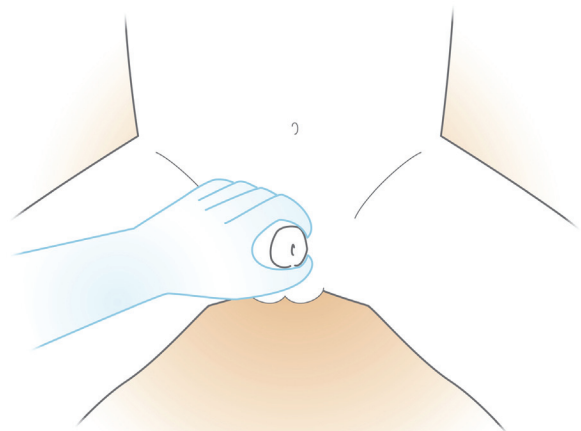
Depending on your child's age, sterile intermittent catheterization can be done sitting in a chair or wheelchair, lying down, standing or sitting on the toilet. Do what is most comfortable for your child.

1. Inspect Cure Catheter® Closed System before use. If catheter or package is damaged do not use.



The sterile, unisex Cure Catheter® Closed System is not made with DEHP, BPA, or natural rubber latex. It features polished eyelets on a straight, pre-lubricated catheter tip with integrated 1500ml collection bag.

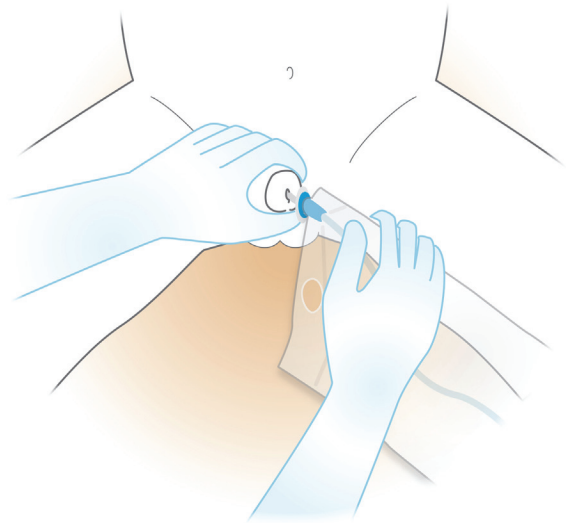
2. Wash hands thoroughly with soap and water or an antibacterial hand cleaner.
3. Open the Cure Catheter® Closed System kit.
4. Position your child comfortably on the toilet, sitting in a chair or wheelchair, or laying down on the underpad provided in the kit. Arrange clothing out of the way. If your child is sitting, spread his legs apart. If he is lying down, his knees can be straight or bent.
5. **Put on the gloves** provided in the kit. Open the povidone-iodine swabsticks or BZK wipe package provided in the catheter kit.
6. Remove the cap from the introducer tip and slide the catheter to within 1/8" (2 mm) of the top of the silicon tip. **DO NOT slide the catheter past the introducer tip yet.**
7. Hold the penis upright on the sides so that the urethra is not pinched (shown).



Sterile Intermittent Catheterization Instructions for Parents of Boys *continued*

8. Retract the foreskin if the penis is uncircumcised. Wash the glans penis from the urethral opening (tip) to the base of the glans with the Povidone-Iodine swabsticks or the BZK wipe that are provided in the kit. Wash with a circular motion from the tip outward. **DO NOT wash back and forth over the urethral opening.** Repeat the washing two more times with the other two swabsticks or two different areas of the wipe. Throw away swabsticks or the BZK wipe after use.

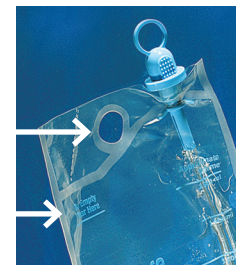
9. With your non-dominant hand, hold the penis at a 45 to 60-degree angle from the body. With the dominant hand insert the introducer tip into the urethra. Hold it securely in place with the thumb and forefinger of the non-dominant hand, while still grasping the base of the penis with the remaining fingers. Once you have steadied the penis and secured the introducer tip in place, use the dominant hand to grasp the catheter through the bag close to the base of the introducer shaft and slowly push it through the introducer tip and into the urethra. Gently slide the catheter until you meet resistance at the urethral sphincters. **DO NOT pull the catheter in and out when you meet**



resistance; just apply gentle but firm continuous pressure until the catheter advances into the bladder. Continue to slide the catheter through the urethra in short 2-3 inch movements until the catheter reaches the bladder and urine begins to flow.

10. When urine stops flowing, slowly rotate the catheter through the bag between your fingers while withdrawing the catheter. If urine starts to flow again when withdrawing the catheter, stop each time it flows and let the urine drain. Then continue to slowly withdraw the catheter until the bladder is empty, and the catheter is removed. If your son is uncircumcised, make sure you bring the foreskin back over the glans penis when you are finished.

11. To empty the bag, hold it upright and put your thumb in the hole provided at the top of the bag (*shown right*). Grasp the tab and tear downwards at the perforation located above “To Empty Tear Here”. Pour out the urine through the opening into the toilet. Dispose of the bag properly.





Your Child's Sterile Intermittent Catheterization Specifications:

- Cure Catheter® Closed System size:
 8 FR 10 FR 12 FR 14 FR 16 FR

- Cure Catheter® Closed System tip design:
 Straight Coude (if available in specified FR size) Either tip design is acceptable

- Catheterize _____ times a day or every _____ hours.

- Catheterization required at night: Yes or No

Healthcare provider contact information:

Name

Telephone Number

Healthcare product supplier contact information:

Name

Telephone Number