

# Clean Intermittent Catheterization for Women After Surgery

## What is clean intermittent catheterization (CIC)?

Clean intermittent catheterization (CIC) is a way to empty your bladder. You can do CIC yourself by inserting a small tube (a **catheter**) into your urethra. Doing CIC is sometimes called “self-catheterization” or “self-cathing.” Here are some other terms to know:

- **Voiding** means urinating (peeing).
- **Post-void residual (PVR)** is the urine that might remain in your bladder after you urinate (void). Self-catheterizing can drain this residual.

## Why do I need CIC?

After surgery, it's common to have trouble emptying your bladder. CIC lets you drain your bladder completely. Keep track of the amount of urine you get from voiding and from self-cathing. Use the **PVR Tracker** on [page 3](#) of this handout.

## Will I always need to do CIC?

As you heal, you can expect the amount of urine you void to increase, and the amount from self-cathing to decrease.

## How often do I need to do CIC?

It depends. You'll urinate as you would normally—whenever you feel the urge—and follow with CIC if you feel you haven't emptied your bladder completely. For most women, this means self-cathing about every 3 or 4 hours.

## What do I need to do next?

- 1 Review the information in this fact sheet.
- 2 Become familiar with the clean intermittent catheterization (CIC) steps on [page 2](#) and how to use the post-void residual (PVR) tracker on [page 3](#).
- 3 Ask your healthcare provider about any questions you have. Use [page 4](#) to write down your questions and record any notes.

## What medicines do I need?

During the days when you're self-cathing and recovering from surgery, you may need to take medicine. One common medicine is an antibiotic to help prevent infection. **Be sure to follow your doctor's advice for taking medicine during recovery.**

## How do I do CIC?

A nurse will teach you CIC before you go home from the hospital. You'll have a chance to practice and ask questions. At home, you can refer to the instructions on [page 2](#) of this handout.

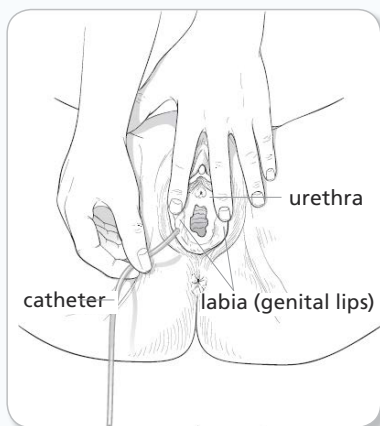
**Note:** Remember that self-cathing is a skill like any other. As you gain experience, you'll feel less awkward.

## CIC steps

If your doctor has asked you to track your residuals, **first urinate into a measuring container. Record the amount of urine you voided on the chart on [page 3](#).** Then follow these steps for CIC:

- 1 Gather your supplies and put them where you can reach them without losing your balance.** Most (or all) of these supplies will be in the kit you were given at the hospital. Here's what you need:
  - Catheter
  - Water-soluble lubricant (such as KY Jelly; do not use Vaseline)
  - Cleaning wipes (baby wipes are fine)
  - Measuring container to collect and measure the urine
  - Storage bag to store equipment in between catheterization times
- 2 Wash your hands well with soap and water.** You don't need to wear gloves (though medical staff do). If you want to wear gloves, use non-latex gloves.
- 3 Position yourself as comfortably as possible.** You can sit on the toilet with your legs spread apart or stand next to a toilet with one leg up on it.
- 4 Cover two inches of the end of the catheter with the lubricant.** Put the other end of the catheter into the collection container.
- 5 Clean your genitals.** Separate your labia and wipe from front to back with a cleaning wipe.
- 6 Hold the labia apart with your non-dominant hand.** (Your non-dominant hand is the one you don't use to write.)
- 7 Continue to hold the labia apart and grasp the catheter with your other hand as you would a pencil.** Your fingers should be about 3 inches from the tip of the catheter.
- 8 Slowly slide the lubricated end of the catheter up into your urethra about 3 inches.** (If resistance is felt, apply firm, gentle, and steady pressure to the pelvic floor muscles. The muscles should then begin to relax and allow the catheter to pass.) Urine should start to flow. Press down on your stomach muscles to help empty the bladder. Leave the catheter in place until urine flow stops.
- 9 When urine stops flowing, slowly start to take the catheter out, twisting it gently as it comes out.** Usually, more urine will flow as you do this. Stop each time more urine flows so that your bladder empties completely.
- 10 After you take the catheter all the way out, wash and store it.** First, wash the catheter with soap and water, then rinse it so that water runs all the way through. Shake the catheter to remove water on the inside. Use a clean towel to dry the outside. Finally, store the catheter in a clean, dry plastic bag.

If your doctor has asked you to measure post-void residuals, measure the urine in the collection container and write it down on the PVR Tracker on the next page.



Steps 6 and 7: Getting ready to insert the catheter



Steps 8 and 9: Draining the bladder through the catheter

## PVR Tracker

Use the chart below to track the amount of urine you get from voiding and from self-cathing (doing CIC). The amount you get from self-cathing is your post-void residual, or PVR.

It's common to have trouble emptying your bladder completely after a surgery. However, as you recover you can expect your voiding amounts to increase, and your PVR amounts to decrease. Tracking your PVRs is a good way to gauge this progress and let your doctor know how your bladder is functioning.

### Instructions for using the Tracker chart:

- Urinate (void) when you have the urge and collect the urine in the measuring container. On the chart below, write down the amount of urine you collected in the "Void amount" box. Pour the urine into the toilet.
- If you feel you haven't completely emptied your bladder after voiding, do CIC. Write down the amount of urine you got from self-cathing in the "PVR amount" box on the appropriate line.
- Call your doctor's office 2 or 3 days after discharge to report the PVR amounts on the Tracker chart.

Doctor's phone number: \_\_\_\_\_

Date	Time	Void amount (from urinating)	PVR amount (from the catheter)

Date	Time	Void amount (from urinating)	PVR amount (from the catheter)

## Questions for my doctor

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