

ED/COMMUNITY REFERRAL - CATHETERISED PATIENTS

Date of Attendance: _____

Patient Details including Address (affix label)	GP Surgery (affix label)
Contact Telephone: _____	

Clinical Presentation Detail

Catheterisation Details (Affix label from catheter packaging)	Residual volume drained _____ Catheterisation - Easy / Difficult (circle as appropriate) If difficult consider admission Catheter inserted by: _____
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Ongoing Care
All patients for trial without catheter in 2 weeks unless stated otherwise
All patients need soon D.N visit for catheter supplies
1. Three leg bags and three overnight bags provided <input type="checkbox"/>
2. Verbal written communication on catheter care provided <input type="checkbox"/>
3. D.N. faxed <input type="checkbox"/>
4. Urology Secretary - Send paperwork to Room E49, Level E <input type="checkbox"/>
5. Urology Out Patient appointment arranged YES/NO
To be prescribed Tamsulosin 400µg - one daily. Patient to be advised to remain on this until review by Consultant Urologist. Current medications have been reviewed and no contra indications. Admit if new renal function abnormal or evidence of sepsis.
ED Nurse _____ Date _____

Answers to Possible Problems

You may feel you need to pass urine. This is due to a little bladder irritation and should subside.

You may also feel bladder spasm/cramps for similar reason. This may lead to a little leakage of urine past the catheter. This is not an emergency if urine continues to drain into your catheter bag.

If you notice some blood in the catheter bag, don't panic. Initially increase the amount of fluid you are drinking. If bleeding does not settle then seek medical advice.

If no urine draining-

- Ensure no kinks in tubing
- Check drainage bag below bladder
- Check drainage bag connected right way up
- Ensure you are drinking enough fluids
- You may be constipated

Seek help if-

- You have prolonged pain
- Urine has not drained for 2 – 3 hours
- Blood in urine has not cleared after drinking extra fluid
- Urine is cloudy, smelly or feels it is burning and does not improve after drinking extra fluid
- Catheter falls out
- Urine is continually leaking around catheter

What Happens Next

You should be contacted over the next 24-48 hours by the community nursing team attached to your GP surgery. They will ensure you have no problems with your catheter and provide the means for you to obtain more catheter bags. Arrangements will then be made with the community nurse to remove the catheter for what is known as a "trial without catheter". This trial without catheter should be done at least 2 weeks after the catheter insertion. During this trial if you are again unable to pass urine the community nurse will insert a new catheter. If there was any difficulty experienced inserting the catheter in the Emergency Department, you will be referred to the urology out-patient clinic for review and further management. The catheter you leave the Emergency Department with is for short term use only and you must ensure it is in place no longer than a maximum of 4 weeks.

If you have been told you require urology follow up an outpatient appointment will be sent out to your home address. If you experience any problems when at home with your catheter seek help from the community nurse or GP in the first instance.