



CONTINENCE
CARE

UR013000 – UR013004 3-Way Silicone Foley Catheter

INSTRUCTION FOR USE

DESCRIPTION

m|devices 3-Way Foley Silicone Catheters are used to help remove tissue chips, blood clots and other debris from the bladder after surgery. Primarily used for drainage after bladder/prostate or upper urinary tract surgery to allow continuous irrigation capabilities.

FOR USE BY A QUALIFIED CLINICIAN. THE BELOW IS ONLY A SUGGESTION AND FACILITY PROTOCOL MUST BE FOLLOWED FOR ALL CLINICAL PROCEDURES WHERE THIS PRODUCT IS USED.

CAUTION

- DO NOT use with petroleum based ointments or lubricants.
- Use immediately after opening packaging. Discard catheter after use according to hospital protocol.
- DO NOT re-sterilise or reuse, single use only
- DO NOT use if packaging or product has been damaged or contaminated.
- DO NOT store at extreme temperatures and humidity, avoid direct sunlight.

STEPS

1. Select the smallest catheter size that will allow adequate access and drainage for the clinical indication.
2. Maintaining its sterility, the catheter is removed from packaging and plastic sleeve and is placed onto the open catheter insertion setup trolley or if used intraoperatively, is aseptically opened to the scrub nurse.
3. Lubricate the distal tip with a water based lubricant and insert 3-way Foley catheter as per facility/Hospital protocol using aseptic technique.
4. Once the catheter is in the correct position in the bladder indicated by urine flow, inflate the balloon with the indicated volume of sterile water as stated on the catheter.
5. Gently withdraw the catheter until resistance is felt.
6. Connect the catheter to the drainage bag and secure the catheter using a securement device.

STEPS FOR IRRIGATION

1. Hang irrigation solution 60cm to 1 meter above the bladder to promote gravitational flow.
2. Spike bag, prime tubing and close roller clamp keeping flexible tube in sterile sleeve.
3. Wash Hands and don sterile gloves.
4. Insert irrigation tubing into irrigation port of 3-way Foley Catheter.
5. Open roller regulator to start irrigation, regulate flow as required.
6. Monitor the irrigation bag and collection bag frequently.
7. If irrigation is discontinued, place a catheter spigot into the irrigation port using aseptic technique.

STEPS FOR REMOVAL OF CATHETER

1. Using a syringe attached to the non-return valve, allow syringe to independently withdraw the sterile water to deflate the balloon completely and then carefully pull the catheter out.

PRECAUTIONS

- Maximum indwelling time is 30 days
- Never clamp or block the catheter or drainage bag tubes whilst irrigation is flowing.
- Ensure the drainage bag is positioned below the level of the bladder and is off the floor.
- The security of all connections should be checked once catheter is connected to drainage bag and irrigation fluid and also monitored during use to prevent disconnection.
- Ensure the catheter is stored in the box and is not coiled or folded when stored.

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