

Suprapubic and Mitrofanoff Catheter Care

Urinary catheters are tubes that drain urine from your child's bladder. There are many different types of urinary catheters. Your nurse will teach you how to care for these catheters. Here is information on how to care for a Suprapubic Catheter and Mitrofanoff catheter. Your child may have one of these tubes or both of these tubes.

What is a suprapubic (SP) catheter?

A suprapubic catheter, also called a "SP" catheter. This is a tube that carries your child's urine from the bladder to a bag for disposal. It comes out through a small hole in your child's abdomen. A SP catheter may be needed for:

- Leakage (urinary incontinence)
- Not being able to urinate (urinary retention)
- Surgery or another health problem

What is a Mitrofanoff catheter?

The Mitrofanoff (mye-TROFF-an-off) channel is a tube that connects the bladder to the outside of the abdomen. It is often made from your child's appendix. The opening of the channel is called the stoma. It is often placed in the folds of the belly button. This channel lets your child empty their bladder by placing a small plastic tube (catheter) through an opening in their abdomen.

After surgery, your child will have a catheter that remains in place until removed by the doctor at a clinic visit.

How do I care for the skin around the catheter(s)?

It is very important to take good care of your child's catheter. This includes the tube and drainage system. Keep all parts of the drainage tubing and urine collection bag very clean to prevent infection.

To clean the area where the catheter enters your child's body:

1. Wash your hands with soap and water. You do not need to wear gloves.
2. Wash the catheter where it leaves the body daily with mild soap and warm water. This can also be done in the shower. Do not pull on the catheter.
3. Inspect your child's skin around the catheter at least once a day. A small amount of redness and clear drainage is normal.
4. Rinse the skin and catheter with warm water. Pat dry with a towel.
5. If there is dried blood or mucous on the catheter that does not come off with soap and water, use hydrogen peroxide to gently wipe the catheter with a cotton ball or gauze pad.
6. You may place a dressing over the catheter site if you wish. It is not needed, but some people feel more comfortable doing so.
7. Keep the catheter secured to your child's belly. Use tape, Tegaderm, or a catheter holder as directed by your provider. This prevents it from being pulled out.
8. Wash your hands with soap and water when finished.

To Learn More

- Urology Scheduling 206-987-2509
- Paging Operator 206-987-2131
- Ask your child's healthcare provider
- seattlechildrens.org

Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.

How do I care for the drainage bag(s)?

- You may be given 2 types of drainage bags. A smaller leg bag can be used during the day and a larger collection bag for night.
- Keep the drainage system below the level of the bladder so the urine does not back up.
- Keep the drainage bag off the floor.
- The bag should be emptied when it is about $\frac{3}{4}$ full or at least every 8 hours.
- A leg bag allows your child to wear regular clothes and be free to play or work during the day. Remember that because it is small, it will need to be emptied often. Use a larger drainage bag for overnight.
- Be sure there are no kinks or sharp bends in the tubing. This can prevent urine draining from the bladder to the bag.

How do I change the drainage bag?

If you will be changing drainage bags while at home, we will teach you how to follow these steps:

1. Wash your hands with soap and water.
2. Disconnect the tubing from the catheter.
3. Insert the new drainage bag tubing into the catheter.
4. If you are going to reuse the bag, cover the connection site with a clean cap or sterile gauze. The bag must be kept in a clean place.
5. Change the drainage bag once a week or sooner if it becomes dirty or smelly.

How do I clean the drainage bag?

1. Make a bleach solution by mixing 4 parts water to 1 part bleach. For example, you can mix $\frac{1}{4}$ cup bleach with 4 cups of water.
2. Soak the bag for at least 2 hours in the solution.
3. Rinse with water.
4. Dry and store on a clean towel.
5. Replace the bag if there is a hole or if it is more than 30 days old.

How do I drain the catheter into a diaper?

If your child is not potty trained, your doctor might instruct you to drain the catheter into a “double diaper.” This keeps the catheter clean and allows it to continuously drain. We will show you how to do this. To double diaper:

- Your child will wear a normal sized diaper on the inside.
- Your child will wear a diaper one size larger on the outside.
- The catheter will drain into the outer diaper so the catheter does not get soiled if your child has a bowel movement.

Flushing and Irrigating Catheters

We will teach you which catheters to flush and irrigate. We will also tell you how much saline or sterile water (volume) to use for each catheter.

How do I flush the catheter?

Flushing the catheter means to put saline or sterile water into the bladder through the catheter with a syringe. This helps clear the catheter of any obstruction and allows the catheter to drain more easily.

Your child's nurse will show you how to flush the catheter, and soon you will be able to do this on your own.

To flush the catheter:

1. Always wash your hands with soap and water before and after touching the catheter.
2. Disconnect the catheter from the drainage bag.
3. Put a clean cap or sterile gauze over the open end of the drainage bag until you are ready to reconnect to the catheter.
4. Slowly push -in saline or sterile water with a clean syringe. Your provider will tell you what solution to use and how much to flush.
5. For directions to make saline or sterile water at home, read our handout "Making Sterile Distilled Water and Sterile Saline Solutions at Home" at seattlechildrens.org/pdf/PE610.pdf .
6. You may be asked to repeat this 2 or 3 times in a row and/or many times per day.

How do I irrigate the catheter ?

Irrigating a catheter means to flush saline or sterile water into the bladder through the catheter with a syringe and pull some fluid back out. This rinses the catheter and bladder and allows the catheter to drain more easily.

Your child's nurse will show you how to irrigate the catheter, and soon you will be able to do this on your own.

To irrigate the catheter:

1. Always wash your hands with soap and water before and after touching the catheter.
2. If you have multiple tubes or catheters in the bladder, make sure to clamp any tubes you are not currently irrigating. Otherwise you will not be able to pull the fluid back when you are finished.
3. Disconnect the catheter from the drainage bag.
4. Put a clean cap or sterile gauze over the open end of the drainage bag until ready to reconnect to the catheter.
5. Slowly push in saline or sterile water with a clean syringe. Your provider will tell you what solution to use and how much to use. Pull back slowly until you meet resistance. You will see urine and often mucous in the syringe.
6. For directions to make saline or sterile water at home, read our handout "Making Sterile Distilled Water and Sterile Saline Solutions at Home" at seattlechildrens.org/pdf/PE610.pdf .
7. You may be asked to repeat this 2 or 3 times in a row and/or several times per day. The goal is to remove mucous from the bladder to prevent the catheter from clogging.

Catheter Flush and Irrigation Volumes:

Type of catheter	Flush volume, solution and frequency	Irrigation volume, solution and frequency
Mitrofanoff		
SP		
Other tubes		

Suprapubic Catheter:

How do I change the SP catheter? For directions on how to change the catheter at home, read our handout “Changing Your Suprapubic Catheter” at seattlechildrens.org/pdf/PE2041.pdf .

What happens after the SP catheter is removed? The small hole where the catheter comes out should close within 48 hours. You can put a gauze pad over it if urine leaks during this time. Replace the gauze if it is soiled. No baths or swimming for 48 hours after the catheter is removed, but it is OK to shower. Your provider will talk with you more about this at your postoperative appointment.

Mitrofanoff Catheter:

How do I perform clean intermittent catheterization (CIC) through a Mitrofanoff? For directions on how to perform CIC at home, read our handout “Clean Intermittent Catheterization through a Mitrofanoff Channel” at seattlechildrens.org/pdf/PE118c.pdf. You will practice this in clinic before surgery and when the catheter is removed post-operatively

How do I get the supplies I need?

We will give you 3 days of supplies when you go home from the hospital. To get more supplies:

- We will tell you what supplies you need and help you find a medical supply company that accepts your insurance.
- We will give you a prescription for the supplies.
- If you are running low on supplies, you will order them directly from your medical supply company.

When should I call the doctor?

Please call your child’s doctor if:

- The catheter comes out unexpectedly
- The catheter stops draining urine
- The SP or Mitrofanoff exit site is red or has smelly drainage
- A large amount of urine is leaking around the catheter (a small amount of leaking is normal)
- Your child has pain in their abdomen area or back, not relieved with medication
- Your child has nausea or vomiting
- Your child shows signs of a urinary tract infection, such as:
 - Fever of 101.5 degrees or chills
 - Irritability
 - Smelly, cloudy or bloody urine
 - Wetting accidents if otherwise potty trained
- Your child has not peed for 6 to 8 hours after the catheter was removed
- You are unable to insert a new catheter when changing it at home

Other notes for your child’s catheter care:
