

Trial without catheter (TWOC) – for adults 18 years and over

This document provides information about having your catheter removed from your bladder as a trial. It covers:

- Why are catheters inserted: explains what a trial without a catheter is
- Where will this procedure take place
- How will the catheter be removed
- How long will the process take
- What happens once the catheter is removed
- How to measure your fluid intake and output
- What will happen after the scan
- What happens if you can't pass urine

Why are catheters inserted?

You may have had a catheter inserted for one of the following reasons.

- As a planned event after an operation
- You were suddenly unable to pass urine (acute retention of urine)
- You were found to have an overfilled bladder (chronic retention of urine) when you were seen in an outpatient clinic.

A trial without catheter (TWOC) involves removing the catheter from your bladder to see if you can pass urine without it.

Where will this procedure take place?

Catheters are usually removed in the ward area if you are an inpatient, at your home by the community team, or in a urology department as an outpatient or spinal outpatient, so the nurses can monitor your condition closely. They will examine you regularly, measure any urine you pass, and scan your bladder to see how much urine you leave behind after you urinate. This is called a post void scan. The amount left behind is called the residual urine.

How will the catheter be removed?

Antibiotics are not usually needed before your catheter is removed, but if your team feel it necessary, you may be given an antibiotic around the time of removal. A nurse will let down the small balloon that holds the tube (catheter) in place and pull the catheter out through your urethra (urine duct). Men sometimes find this quite uncomfortable.

How long will the process take?

You will normally need to stay for most of the day if you are an outpatient, or at least until you have passed urine satisfactorily. We monitor your progress using a bladder scanner. A nurse will scan your bladder intermittently after you have passed urine. If you begin to feel uncomfortable or cannot pass urine, please tell the nurses so that they can do an early scan.

What will happen once the catheter has been removed?

Once the catheter has been removed, it is important that you drink enough fluid to fill your bladder to see whether you are able to pass urine. You may not have much control over your bladder at first, as the bladder needs to readjust itself once the catheter has been removed. You may not be able to pass urine immediately, it can sometimes take a few hours. If you feel uncomfortable, please inform the nurse.

We will encourage you to fill your bladder slowly by drinking. Ideally, you should drink a glass or two every hour, so your bladder fills slowly. This will encourage you to pass urine.

Measuring your fluid intake and output

This is necessary to see if you can empty your bladder after the catheter is removed. Keep a record of what you drink and how much urine you pass on the chart provided. You need to drink approximately 200mls an hour for the first six hours. Use a plastic jug to measure your urine and keep it close by in case you need to pass urine quickly.

Once your catheter has been removed, you may feel or see the following:

- A need to get to the toilet quickly and pass urine frequently.
- A stinging sensation when you pass urine. This usually subsides after a few times of passing urine.
- A small amount of blood in the urine. This should subside after a few hours.
- A feeling that you need to pass urine, as though you have not finished.
- You may need to wear pads in your underwear to get you over this initial period, as you may have some dribbling. These symptoms should subside after 48 hours. If your symptoms persist, please contact your nurse or community nurse.

What will happen after the scan?

If you can pass urine, empty your bladder, there is less than 100mls residual and you are comfortable, we will let you go home and arrange any appropriate follow up. As an inpatient, we will scan you daily for a week after you pass urine and record it on a sheet provided.

What happens if I can't pass urine?

If you are unable to pass urine, or you still have urine in your bladder after going to the toilet and it is more than 100mls, a new catheter may be inserted. Alternatively, with your agreement, we may introduce you to intermittent self-catheterisation (passing a thin tube into your urinary tract or bladder). If you do need a further catheter, we will refer you back to your consultant for further advice. If you start intermittent self-catheterisation, a specialist nurse will provide you with everything you need for this and will monitor your progress on the ward or in the community or outpatient clinic.

Usual Contacts

National Spinal Injuries Centre

Telephone (Spinal Outpatients): 01296 315828 (Therapy)

01296 315829 (Nursing)

01296 315809 (Bladder & Bowel Nurses)

Spinal Injuries Association www.spinal.co.uk

Freephone Advice Line: 0800 980 0501

Please remember that this leaflet is intended as general information only. We aim to make the information as up to date and accurate as possible, but please note that it is subject to change. Please therefore always check specific advice on any concerns you may have with your doctor.

How can I help reduce healthcare associated infections?

Keeping your hands clean is an effective way of preventing the spread of infections. Please follow our infection prevention and control guidelines when visiting our healthcare sites. Further information is on our website.

Patient Advice Sheet

If you would like a copy of this information on audiotape, in large print or translated, please call the Patient Advice Liaison Service on 01296 831120 or email bht.pals@nhs.net