Intermittent self catheterization (ISC) is a method of manually draining the urine from your bladder.

**About ISC**
There are many reasons the bladder may not empty completely during urination:
- Recent pelvic surgery is a very common reason.
- Different medical or neurologic problems can contribute to this, including bladder prolapse.
- The bladder muscle may not function effectively to push out all the urine.
- Tight pelvic floor muscles can prevent urine emptying.
- Urinary tract infections (UTI) and bladder stones may interfere with the bladder’s normal function.
- Failure to fully empty the bladder can result in accidental leakage of urine, infections or damage to the bladder wall.

ISC involves placing a small tube (catheter) in the bladder to empty out the urine. You do this process periodically, sometimes several times a day. By keeping to your schedule, you can reduce leakage, infections, and protect your bladder.

Though it sounds tricky, most women find ISC is easy to do. With practice, you’ll find it only takes a few minutes.
Intermittent Self Catheterization (ISC)

ISC Process
Your doctor or nurse will train you on the ISC process. Some women are advised to first try to urinate normally and then use a catheter to drain any remaining urine. Other women need to perform ISC to drain all the urine, because they are unable to urinate.

Most women perform ISC about every 4 to 6 hours and before going to sleep. How often you need to empty your bladder depends on how much you drink. If you use a diuretic or water pill, you will need to ISC more often. Drinking more fluids will not help your bladder empty better—you’ll just need to catheterize more often. You’ll be taught to log how much urine comes out through the catheter. Based on this information, your doctor or nurse may adjust your catheterization schedule.

There is a small risk of UTI associated with self-catheterization. Stay aware of how you feel and contact your medical provider if you are tired or not feeling well.

Symptoms of an UTI include:
• Fever and chills.
• Pain or burning when you urinate or catheterize.
• Pain in your back.
• Cloudy or bad-smelling urine.
• Blood in the urine.

Your bowel habits can affect the ISC process. Constipation can make it harder to completely empty your bladder. There are lifestyle changes and treatments that can help you overcome bowel problems.

Everyone’s urine has some bacteria in it. ISC can increase the levels of bacteria. Cleaning your hands and equipment carefully is important in preventing infections. Most women can safely reuse catheters. Find a place at home to keep your supplies and equipment safe and clean. When you travel, keep the supplies with you in a carry-on bag.

You’ll need to record everything you drink, how much you urinate, and the amount of urine that comes out the catheter. Figure out if you want to use a paper log or an “app” for this part of the process.

Learn The Terms

Intermittent self catheterization (ISC): Performing catheterization on yourself a few times a day to help drain the urine from the bladder.

Catheterization: The process of placing a small plastic tube (catheter) into the bladder to drain the urine.

Catheter: Plastic tube temporarily placed to drain urine from your bladder.

Constipation: Having a bowel movement fewer than three times a week, along with straining to produce a hard bowel movement.
Intermittent Self Catheterization (ISC)

**FLUID INTAKE AND VOIDING RECORD**

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Liquid Intake Type, Amount</th>
<th>Time</th>
<th>Urinating Output</th>
<th>Catheter Output</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 17</td>
<td>10am</td>
<td>Coffee, 240 ml</td>
<td>10am</td>
<td>100 ml</td>
<td>160 ml</td>
<td>Cloudy, pale yellow color</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Orange Juice, 120 ml</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Instructions: Record the date and time. During the day, record what and how much you drink. When you urinate, measure the volume of urine (void output). And, when you perform ISC, measure the drained catheter volume (catheter output). To be consistent, record volumes in milliliters (mL). One ounce = 30 milliliters. Bring your log with you to doctor visits.

**Six-Step ISC Process**

**Step 1: Wash Your Hands**
To help avoid infection, this is a very important step. Wash your hands with soap and water for two full minutes or use a hand sanitizer.

**Step 2: Get Set Up**
Gather your supplies:
- Disposable catheters and storage container with lid.
- Container for measuring urine.
- Sterile lubricant.
- Toilet paper or wipes.
- Hand mirror.

Set everything up on a clean surface that you can easily access during the ISC process.

**Step 3: Get In Position**
Whether standing or sitting, get in a comfortable position. If you are just learning, use a hand mirror to help see the urethral opening. Take a few deep breaths and relax your pelvic floor. With wet toilet paper or wipes, wipe from front to back in the genital area one time. Then, wash your hands again.

**Step 4: Catherize It**
Pick up the catheter without touching the end that goes into your bladder. Dip the tip into the sterile lubricant. Next, open your labia with one hand and gently insert the catheter into the urethra until urine comes out. If you have trouble, don’t force the catheter in. Take a moment, take some breaths and try to relax. Then try again. Change the angle you are inserting it gently if you need to. These things can help relax the pelvic muscles and let the catheter slide in smoothly.

Once the catheter is in, let the urine flow naturally. Do not press down with your abdominal muscles. When the urine stops flowing, slowly remove the catheter. Use the toilet paper to dry yourself and wash your hands.

**Step 5: Clean Up**
Taking the time to clean up ensures safe handling of your catheterizing equipment. To reduce the risk of infection, don’t let others touch the catheter or its storage container.
Intermittent Self Catheterization (ISC)

Wash the catheter with warm, soapy water. Check to see if the “eye” of the catheter on the tip is blocked. Then rinse the soap off the catheter with clean, running water. Shake it to remove any excess water. Store the catheter in a clean container with a tight lid. One day a week, take the time to also clean this storage container. Use warm soapy water and dry the container thoroughly before storing the catheter in it.

You can clean catheters and use each one for 2 to 4 weeks. However, if you have an infection, use a new catheter each time you perform ISC. Also, if the catheter is damaged or dirty, don’t wait to change it out. Break out a new one immediately. Call your doctor’s office if you need more supplies.

When to Call Your Doctor’s Office
Contact the doctor’s office if you are having problems performing ISC, pain, or bleeding. A small amount of blood is OK, but it should not be a lot. Let the doctor know if you think you have a UTI as you may need an antibiotic. Check in as directed over the phone about the amount you are urinating and catheterizing for. Some women will be able to stop catheterizing once the bladder resumes emptying on its own, such as after surgery.

Three Takeaways

1. ISC is a safe and effective way to empty the bladder that most women can learn.

2. Most women perform ISC about every six hours after trying to urinate and before going to sleep.

3. Contact the medical provider’s office if you have any concerns about your technique. Also, call the medical provider if you notice signs that might indicate UTI.