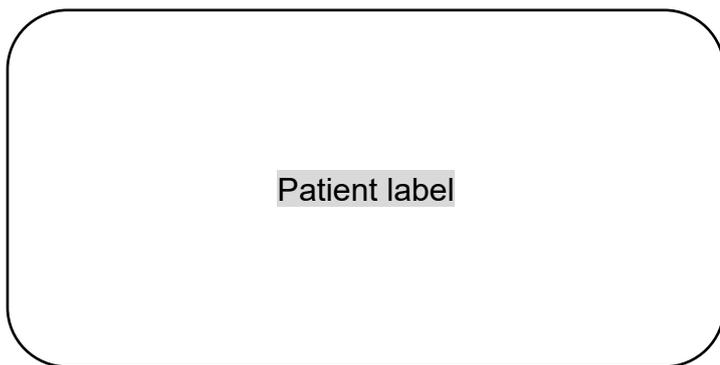


# Home catheter removal

## Self-removal of urinary catheter after prostate surgery

Your surgeon has recommended that you remove your urinary catheter at home. You should have been shown how to do this before your discharge. This leaflet will be a reminder and guide you through the process.

Removing a urinary catheter at home is a straightforward procedure if done carefully and with proper hygiene. Following the steps outlined in this leaflet will help ensure a safe removal process. If you encounter any problems or have concerns during or after the removal, contact the urology nurse practitioner for guidance (see useful contact details on page 5).



**Date and time to remove the catheter:** \_\_\_\_\_

**Catheter balloon volume:** \_\_\_\_\_ mls

## What is a urinary catheter?

A urinary catheter is a thin tube that is inserted into the bladder through the penis to drain urine when you are unable to urinate naturally and to aid recovery after HoLEP (**Figure 1**).

## Is it safe to remove my catheter at home?

It is safe to remove your catheter at home if you feel confident to do so and have discussed the process with your clinician. Please ensure that you understand the instructions given to you, have the manual dexterity to remove the catheter, have access to a telephone and are able to reach the hospital promptly in the unlikely event that there is a complication arising from the process.

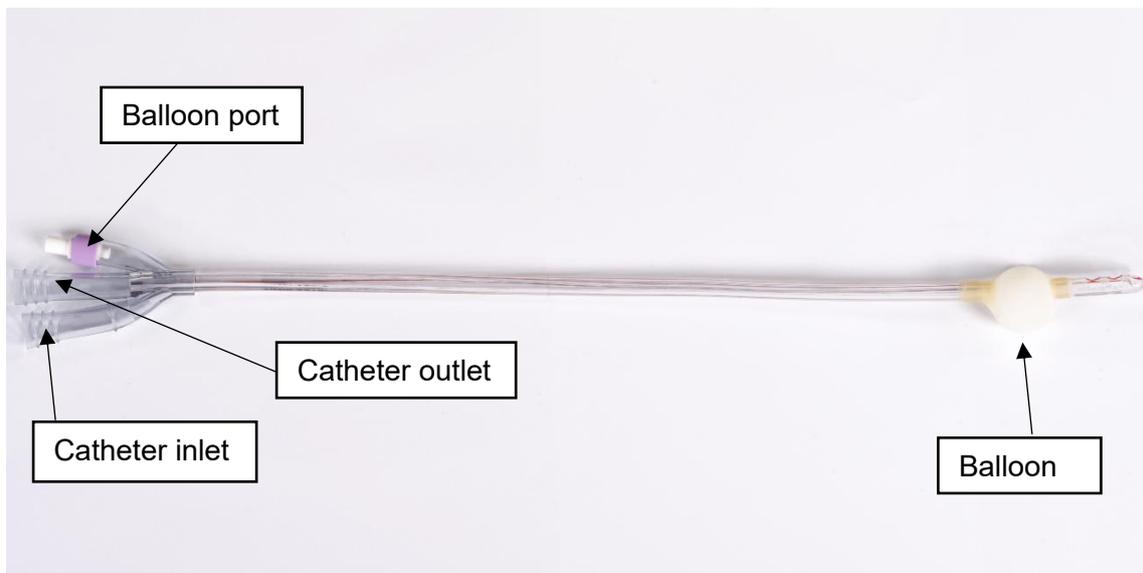
## Is there an alternative to removing the catheter by yourself?

If you do not feel able to or do not wish to remove the catheter by yourself, an outpatient clinic appointment can be arranged for you to attend Lister Hospital for the catheter to be removed by one of the urology nurse practitioners.

## When to remove the catheter?

Your surgeon will inform you when it is appropriate to remove your catheter and this should also be stated on the front page of this leaflet. This is typically after the catheter has been in place for a specific amount of time, or once you no longer need it. Removing the catheter too early or too late can cause discomfort or complications.

Prior to removing your catheter, please ensure you have recently opened your bowels as constipation increases the risks of you not being able to pass urine normally. Please also make sure you are well hydrated in the few days before catheter removal.



**Figure 1** - Urinary catheter and its components

# How do I remove my catheter?

## Before you begin

1. **Wash your hands** thoroughly with soap and water.
2. **Gather all the necessary supplies:**
  - Disposable gloves (optional).
  - A clean towel or pad (to catch any residual urine).
  - A syringe (provided to you prior to discharge).
3. **Make sure you are in a comfortable, private space**, preferably with a clear area to sit or lie down. It may be good to have a mirror if you are unsure about the placement of the catheter and its connections.

## Step-by-step instructions for catheter removal

1. **Prepare the area:**
  - Lay down a clean towel or pad underneath you to catch any potential urine leakage.
  - If you feel comfortable doing so, you may want to sit on the toilet or in a relaxed position.
2. **Locate the catheter:**
  - The catheter is secured with the end at the opening of your urethra. It is held in place inside the bladder with a small balloon filled with sterile water (**Figure 2**). Externally it may be secured to the side of your thigh.
  - You should see a small connection point where the catheter tubing connects to a drainage bag.



**Figure 2** - Catheter with balloon inflated within a model bladder

3. **Deflate the balloon:**
  - Before you deflate the balloon, disconnect the drainage bag and any securing device on the leg so the catheter is free from any attachment. You do not need to remove the green spigot at the end of the irrigation inlet.
  - To deflate the balloon, find the small balloon port at the end of the catheter (**Figure 3**). This is typically a small, rubber valve at the opposite side to where the green spigot is. Often there is a colour marking, such as purple, yellow or red.



**Figure 3** - Attach syringe firmly in the balloon port to start deflating the catheter balloon.

- Insert the supplied syringe firmly into the balloon port and gently pull back on the plunger to remove the water in the balloon. Once the syringe is full, discard the water into a container to enable you to measure the total amount of water aspirated (removed).

**Repeat this step until no further water can be removed from the balloon.**

- The amount aspirated should be roughly the same as the amount stated on the first page of this leaflet (see catheter balloon volume).

#### 4. **Remove the catheter:**

- Gently grasp the catheter where it exits your penis.
- Slowly and steadily pull the catheter out in a straight line. You may feel some slight resistance or discomfort, but it should not be painful. You should not need to tug hard.
- If you feel significant resistance or pain, stop and contact your healthcare provider for advice before continuing.
- **Under no circumstance should you reinflate the balloon during the removal process.**

#### 5. **After removal:**

- Once the catheter is completely removed, pat the area dry with a clean towel.
- Dispose of the catheter and gloves in a sealed bag.
- Wash your hands thoroughly after handling the catheter.

## **Post-removal care**

- **Fluid intake** - Stay well hydrated by drinking a glass of water every 1-2hrs.
- **Urinary function** - You should be able to pass urine after 1-3hrs following the removal of catheter, depending on your fluid intake. It is normal to experience some discomfort or stinging when passing urine after the catheter is removed. If you have trouble urinating or if you are unable to urinate within a few hours, please contact your healthcare provider for advice.

- **Fluid chart** - Fill in the fluid chart attached (appendix 1), starting from when the catheter was removed. You will be contacted and asked to report values you have recorded on the fluid chart, to make sure that you are passing urine adequately.
- **Pelvic floor exercise** - It is common after HoLEP to experience urinary leakage after the catheter is removed. This is often temporary. To help with the recovery, it is important that you start performing pelvic floor exercise as instructed by your surgeon.
- **Monitor for adverse events** - If you develop a fever, contact your healthcare provider immediately. It is normal to see some blood in the urine for up to a few weeks after surgery, and as long as you are not passing large clots and your urine is rose in colour or lighter, this is not a cause for concern.

## When to contact your healthcare provider?

You will be contacted by one of the urology nurse practitioners later in the day to check that you have removed the catheter and have urinated. If there is any urgent issue, you should contact us using the contact details below. **Do not wait for the check up call if there is an urgent issue.**

You should reach out to the urology nurse practitioner if you experience any of the following after removing your catheter:

- Severe pain or discomfort.
- Inability to pass urine.
- Persistent bleeding or unusual discharge.
- Fever or signs of infection.
- Any other concerns that make you feel unsure about the process.

## Useful contact details

### East and North Hertfordshire Teaching NHS Trust:

- Website [www.enherts-tr.nhs.uk](http://www.enherts-tr.nhs.uk)
- Telephone 01438 314333

### Urology Nurse Practitioners:

- Telephone 01438 284356 and 01992 823035

### Recovery Nurses, Treatment Centre:

Telephone 01438 288130

## Leaflet information

**You can request this information in a different format or another language; please speak to your doctor or nurse.**

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