



SPINAL INJURIES UNIT

Ph: 3176 2215
Fax: 3176 7462

OUTPATIENT DEPARTMENT

Ph: 3176 2641
Fax: 3176 5644

Postal and Location

Princess Alexandra Hospital
Ipswich Rd
Woolloongabba QLD 4102
AUSTRALIA

TRANSITIONAL REHABILITATION PROGRAM

Ph: 3176 9508
Fax: 3176 9514

Email

trp@health.qld.gov.au

Postal

PO Box 6053
Buranda, QLD, 4102

Location

3rd Floor, Buranda Village
Cnr Cornwall St & Ipswich Rd
Buranda, QLD, 4102
AUSTRALIA

SPINAL OUTREACH TEAM

Ph: 3176 9507
Freecall 1800 624 832
(for regional clients)
Fax : 3176 9514

Email

spot@health.qld.gov.au

Postal

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Buranda, Q, 4102

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Bladder Washouts

With Intermittent Clean Self-Catheterisation

What is a Bladder Washout?

Bladder irrigation is a procedure that allows you to “flush” the bladder with clean water to remove any residue or debris. This is achieved by attaching a syringe to the end of the catheter, injecting clean water and then withdrawing it. If you experience any pain during the procedure you should stop immediately. **This procedure is only recommended for people who have a urinary diversion and need to irrigate the bladder.**

Equipment required

- A clean catheter pack or two kidney dishes
- Catheter with funnel tip
- A 50ml catheter tip syringe
- 500ml bottled sterile water or boiled water **cooled back down to room temperature**
- Nelaton catheter
- Freezer bag
- Warm soapy water

Cleaning Equipment required for kidney dishes

- Milton- dilute as per instructions
- Soapy water
- Airtight container

Cleaning Process

- Prepare the Milton solution
- Clean kidney dishes in warm soapy water
- Rinse equipment
- Place equipment into Milton solution for at least 15 minutes
- Remove and place items into an airtight container
- The container that you use to store your equipment should be scalded with boiling water once a week

Performing the irrigation

- Gather equipment and place on a clean table
- Wash your genital area and/or around catheter site with warm soapy water and dry thoroughly
- Wash hands with soap and dry well
- Place water into one of the kidney dishes
- Check syringe carefully and make sure there are no cracks and that it is in good working condition
- Insert catheter and empty bladder as per procedure [ICSC Male](#) [ICSC Female](#)
- Rest the end of the catheter in the clean empty kidney dish
- Draw up 50ml of water, expel the air and attach to the catheter
- Inject it carefully and slowly
- Remove syringe, clamp catheter with your thumb and forefinger and refill syringe with another 50ml
- Inject carefully
- Repeat procedure again, you now have 150ml in your bladder. (Volumes instilled may vary with bladder capacity)
- Gently pull back plunger of syringe and withdraw 50ml



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Fact Sheet

- Take note if there is any sediment or debris
- Clamp catheter again with your fingers (leaving 100ml in your bladder), remove syringe and empty it into the second kidney dish
- Refill your syringe and repeat the process until the fluid you withdraw is free of sediment
- Remove catheter and wash your hands
- Empty irrigation solution into toilet and clean your equipment

Possible Problems

- If you are unable to irrigate through your catheter do not force it, change catheter and try again. If the problem persists please see your local doctor, hospital or nurse

Infection

- If you notice your urine to be cloudy, smelly, stinging, burning and/or bloody please contact your local doctor, hospital or nurse. See website [Urinary Tract Infections and Treatment](#)

General Care

- Practice good genital hygiene

For Further Information

- National Continence Helpline - 1800 33 00 66
The National Continence Helpline is staffed by a team of continence nurse advisors who can provide information, education and advice to Australians with or caring for someone with bladder or bowel control problems.
- Visit <http://www.bladderbowel.gov.au/>
- Contact the Queensland Spinal Cord Injuries Service

The information provided is a guide for information purposes only and does not replace or remove clinical judgement and professional care and duty necessary for each specific patient case.

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