

Patient information

Having your catheter removed: Trial without catheter (TWOC)

While in hospital, you have had a catheter (the thin, flexible tube used to drain wee from your bladder) inserted. It is now time for your catheter to be removed. The removal of your catheter is called a 'trial without catheter' or 'TWOC'. This information sheet has been given to you to help answer some of the questions you may have about your TWOC. If you have any further questions, please speak to the midwife caring for you.

What happens before the catheter is removed?

Before the midwife or care assistant removes your catheter, they will check that you have recently had your bowels opened. If you are constipated, it may mean that you have trouble passing wee (urine) easily. Sometimes a bowel full of poo (faeces) may push onto the bladder and make it difficult for the wee to come out. If you are constipated, you may be offered some medicine to get your bowels moving before the catheter is removed.

The midwife may test your wee for an infection. If you have an infection, you may be given some antibiotics. Please make sure that you complete the whole course of antibiotics so that the infection is properly treated. Having an infection shouldn't affect the removal of your catheter.

When is the catheter removed?

Once the midwife has explained what will happen during the TWOC and you are happy to go ahead, your catheter will be removed. This may feel a little strange, but it should not hurt. It will take about 5 seconds.

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What happens after my catheter is removed?

You will need to drink regularly - one glass of water/ cup of tea or coffee every hour, or 1.5 - 2 litres in 24 hours. You will be very tempted to drink as much as you can straight away so that you can go home. Please **do not** do this. Don't drink too much too quickly or gulp your drinks, or you will lower the chance of being able to wee which will mean you have to stay in hospital for longer. You will need to wee into a jug/ bedpan and let your midwife or care assistant know when you have done so, so that it can be measured.

You can still leave the ward if you wish (for example, if your baby is on the Neonatal Unit), but you will need to come back if you feel the need to wee. The midwife will measure and record the volumes that you have passed. It may be necessary to scan your bladder to see if you have any wee left in the bladder (residual urine) and to make sure you are emptying fully.

We would like you to pass two volumes of 200mls or more before you can go home. This is to make sure that your bladder is emptying properly. We won't add up lots of small samples to make one big one.

If you aren't passing wee (urine) properly and you go home before you should, there is a possibility that you may need to be re-admitted to hospital because your bladder isn't emptying properly. So as frustrating as it is, it is important to get it right before you leave the ward. Sometimes it can be several hours after you have had your catheter removed before you go home. We will let you go home when we feel it is safe.

Is there anything I need to look out for?

Please tell your midwife if you:

- Are going to the toilet a lot/ frequently
- Are only passing small amounts of wee each time you go to the toilet
- Have lower abdominal (tummy) pain
- Have difficulty starting the flow of wee
- Feel like you have not emptied your bladder fully after you've been to the toilet
- Feel pain when you pass wee.

These are all signs that you may not be passing wee and emptying your bladder normally (going into retention).

You should also tell your midwife if you:

• Have not passed wee 4 hours after your catheter has been removed

- Feel as though you want to go to the toilet but cannot
- Are getting uncomfortable because of this and feel a pain in your tummy.

You may need a scan of your bladder if you aren't emptying your bladder properly. If the scan shows there is wee left inside your bladder, you may also need to have another catheter inserted into your bladder. If this does happen, try not to worry. There are a number of reasons why people cannot pass wee. The midwife or doctor looking after you will explain why you may be having problems. The doctor will see you and decide if you need to go home with a catheter in for a week to rest your bladder, or whether to take it out again the next day so that you can try again.

What happens after I go home?

Once you are at home, you should drink 6-8 cups of fluid a day. You should continue to look out for signs of urinary retention (listed above). If you notice any of these signs, please contact your GP or go to your nearest emergency department.

If you are sent home with a catheter, you will be given an appointment to come back to the hospital so that your catheter can be removed again.

Clinical research

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email <u>info.gov@wsh.nsh.uk</u>. This will in no way affect the care or treatment you receive.

Accessibility

If you require this leaflet in a different format, please contact the patient advice and liaison service on 01284 712555 or email <u>PALS@wsh.nhs.uk</u>

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