

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 urine from your bladder) inserted. Your doctor now wants the 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 nurse caring for you.

What happens before the catheter is removed?

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

The nurse may test your urine 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 nurse has explained what will happen during the TWOC and you are happy to go ahead, the nurse will remove your catheter. This may feel a little strange, but it should not hurt. It will take about 5 seconds.

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 pass urine which will mean you have to stay in hospital for longer. You will need to pass urine into a jug / bedpan and let your nurse know when you have done so, so that she / he can measure it.

You can go for a drink away from the ward if you wish, but you will need to come back if you feel the need to pass urine. The nurse will measure and record the volumes that you have passed. The nurse may want to scan your bladder to see if you have any urine left in (residual urine) and to make sure you are emptying fully.

We would like you to pass three volumes of 150mls 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 urines to make one big one.

If you aren't passing urine properly and you go home before you should, there is a possibility that you may need to return to A&E 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 a few 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 nurse if you:

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

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

You should also tell your nurse if you:

- Have not passed urine 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.

The nurse may need to scan your bladder and if you aren't emptying your bladder properly, she / he may need to insert another catheter into your bladder. If this does happen, try not to worry. There are a number of reasons why people cannot pass urine. The nurse 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.

If you would like any information regarding access to the West Suffolk Hospital and its facilities, please visit the website for AccessAble (the new name for DisabledGo)

<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>

