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導尿管照護與注意事項

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Catheter Care and Notices

I. The Purpose of Cleaning the Catheter: 清潔尿管的目的：

In order to reduce urinary tract infection. 爲了減少泌尿道感染。

II. When to Clean the Catheter? 何時執行清潔尿管？

1. At leastonce a day. 每日至少一次。
2. Afterdefecation. 大便後。
3. When there are more secretions, it is allowed to increase the times of cleaning.分泌物較多時，可增加清潔次數。

III. What Are the Cleaning SuppliesandMethod? 清潔用物準備及方法？

Please purchase the following items at Hi-Life on the 1st floor.
(以下用物請至1樓萊爾富購買)

1. Rinser (filled with warm water of 41-43 ℃) 沖洗器(內裝溫水41-43℃)（不燙手）。
2. Paper cup (filled with warm water) 紙杯(內裝溫開水)。
3. Large cotton stick 大棉枝。
4. A potty or diaper (care pad) 便盆或尿布(看護墊)。
5. Neutral soap or no-rinse skin cleanser 中性肥皂或免沖水皮膚清潔劑。
6. Paper tape 紙膠。
7. Toilet paper or towels 衛生紙或毛巾。

Rinsing Steps for Male Patients 男病人沖洗步驟

1. Put on gloves. 戴上手套。
2. Wet the cotton swab using the rinse bottle (or with the addition of neutral soap). 棉枝以沖洗瓶沾濕(或加中性肥皂) 。
3. Gently push the prepuce back to expose the glans with one hand. 一手輕輕將包皮往後推，露出龜頭。
4. Cleanse the glans from top to bottom using the wet cotton swab with the other hand. Take another cotton swab to dry the glans and push back the prepuce. Subsequently, rinse the penis, scrotums, and anus in sequence. 一手拿沾濕棉枝，由上而下清洗龜頭一圈，清洗後取一支棉枝擦乾，並將包皮推回。接著清洗順序: 陰莖→陰囊→肛門。
5. Finally, dry the perineum and rump with cottonsticks, toilet paper or towel. 最後，用棉枝、衛生紙或毛巾擦乾會 陰部周圍及臀部。

Note: Use the rinse pot to clean from the top to the bottom.
注意:沖洗壺由上往下清洗

PerinealRinsing Steps forFemale Patients 女病人會陰沖洗步驟

1. Take the rinser on one hand. 一手拿沖洗器。
2. Take acotton stickon the other hand. 另一手拿棉枝。
3. Cleaning order: 沖洗順序:

① 1stcotton stick: from the urethra to the anus. 第一支棉枝:由尿道口至肛門
② 2ndcotton stick: distal labia minora 第二支棉枝:遠側小陰唇
③ 3rdcotton stick: proximal labia minora 第三支棉枝:近側小陰唇
④ 4thcotton stick: distal labia majora 第四支棉枝:遠側大陰唇
⑤ 5thcotton stick: proximal labia majora 第五支棉枝:近側大陰唇
⑥ 6thcotton stick: dry from the urethra to the anus
第六枝棉枝:擦乾尿道口至肛門
⑦ 7thcotton stick: dry around the labia minora 第七枝棉枝:擦乾左右小陰唇
⑧ 8thcotton stick: dry around the labia majora 第八枝棉枝:擦乾左右大陰唇

注意:沖洗壺由上往下清洗

When cleaning, remember to use each cotton stickfrom the top to the bottom, do not wipe back and forth nor use it again. 切記每一支棉枝由上往下擦拭，不可上下來回擦拭或重覆使用。

4. Finally, wipe the perineum and the rump with toilet paper or towel. 最後，用衛生紙或毛巾擦乾會陰部周圍及臀部。

Urinary catheter treatment: 尿管處理方法:

Soak the cotton stick with the warm water in the paper cup, and do circular wipe from the urethra to the catheter (about 5-7 cm). The cotton stick may not be wiped back and forth nor be used again.
以棉枝沾紙杯內溫開水，由尿道口往尿管處做環形擦拭(約5-7公分)，棉枝不可來回擦拭與重覆使用。

Do circular wipe from the urethra to the catheter (about 5-7 cm).
由尿道口往尿管處(約5-7公分)做環形擦拭。

IV. Catheter Fixation Method： 導尿管固定方法：

Step①Affix and fix the catheterto the skin with adhesive tape as a Ω shape.

步驟①以膠布採Ω型將尿管黏貼固定於皮膚上。

Step②And then affix it as "I" shape

步驟②再以”工”字形貼牢。

■ Catheter fixation method for male patients 男病人尿管固定法：

① Pubic symphysis fixation method 恥骨聯合上固定法。

② Lower abdomen fixationmethod 下腹部固定法。

■ Catheter fixation method for female patients: The inside of the thigh
女病人尿管固定法：大腿內側。

Note: The catheter between the urethra and the thighs shall be long enough to avoid pulling the catheter when moving.

注意：尿道口與大腿間之導尿管須有足夠長度，避免活動時拉扯到導尿管。

V. Daily Notices: 日常注意事項：

1. Wash your hands before cleaning the catheter to avoid causing the patient's infection. 清潔尿管前請先洗淨您的雙手，以免造成患者的感染。
2. Indwelling catheter is inserted into the patient's bladder, and the water ball is fixed *in the bladder*, so it shall be cleaned every day to prevent inflammation of the urethra and bladder. 留置導尿管是插到病人的膀胱，以水球固定於膀胱內，所以必須每天確實清潔，可預防尿道及膀胱發炎。
3. After each defecation of the patient, we shall use the toilet paper to wipe from the perineum to the anus,anddo the perineal rinsing to avoid infection.患者每次解完大便後，衛生紙應由會陰部往肛門處擦拭，並做會陰沖洗可避免感染發生。
4. For the patients with indwelling catheter, in the absence of special water limit, the patient shall besure to drink plenty of water (2000-3000c.c./day) to avoid urinary tract infections and ureteral obstruction and the amount of urine every day shall at least be maintained more than 2000 c.c.
   留置尿管的患者，為避免泌尿道感染及尿管阻塞，在無特殊限水的情況下，務必多喝開水，每天*2000~3000*cc以上，使排尿量每天至少維持在2000cc以上。
5. *Avoid pressing, twisting*the catheter, and squeezethe catheter often to preventobstruction. 尿管應避免受壓、扭曲，並應常擠捏尿管，以免阻塞。
6. When helping patients turn over or when patients are restless, please Notice *the catheter not to be pulled.*
   協助患者翻身時或患者躁動時，應注意防止尿管被拉扯到。
7. The urine in the urine bag shall not be too much,do not exceed *1/2*of the urine bag.It shall be emptied *at least 3 to 4 times a day.*
   尿袋中的積尿不可太多，不要超過尿袋的*1/2*，一天至少倒*3~4*次。

8. When the urine bag joint is disconnected, please inform the medical staff immediately. 採尿袋接頭脫落時，請立刻告知醫護人員處理。
9. It is fine to drink liquid with high content of rich Vit.C (i.g.Cranberry juice and so on) becauseacidic urine may reduce the incidence of urinary tract infection.
攝取豐富*Vit.C*含量高之液體，如蔓越莓汁等，因為酸性尿液可減少泌尿道感染的發生。

***Management of catheter occlusion and malposition* 尿管阻塞及脫落之處理方法:**

1. Please inform the medical staff immediately for catheter occlusion. Do not attempt to clear iton your own. 若尿管阻塞無法解決時，勿自行處理，請立即通知醫護人員。
2. Please inform the medical staff immediately for catheter malposition. Do not attempt to fix it on your own.
若尿管滑脫時，勿自行推回，請立即通知醫護人員處理。

The Proper Location to Place the Urine Bag 採尿袋正確放置位置

1. When getting out of bed or the wheelchair, the urine bag shall be lower than the Bladder to avoid the urine reflux.
下床或坐輪椅時，應低於膀胱以下，以免尿液逆流。
2. When lying on the bed, the urine bag shall be fixed on the hook on the side of bed, and it shall be at least 3-5 cm from the ground.
平躺時，應固定於床邊的掛勾上，至少離地3-5公分。

Urine Bag Notices採尿袋注意事項

1. Do not placed the urine bagon the ground.不可放置地上。
2. When getting out of bed, the urine bag shall not be higher than the bladder.下床時，採尿袋不可高過於膀胱。
3. When sitting in a wheelchair, the urine bag shall not be higher than the bladder.坐輪椅時，採尿袋不可高過於膀胱。
4. When pouring out the urine, the urinecontainer shall not be exposed with theurine bagoutlet. 倒尿時，盛尿容器不可與尿袋出口接觸。
After pouring urine, rinse the urine container and wash your hands.
倒尿後，請沖洗盛尿容器，並洗手。

Q&A 常見問與答：

Question(1): What should I do if *there is no urine flowing out from the catheter?*

問題(一)當發現尿管沒有尿液流出時，應如何處理？

Ans:First, check the patient's bladder to see if it is very bulgy, and then check whether the catheter is folded or pressed;finally, squeeze the catheter to keep it smooth.If it is still not improved, please inform the medical staff immediately.

答：先檢查患者的膀胱是否很脹，再檢查尿管是否摺到或被壓迫到；最後壓擠尿管，以保持尿管通暢，若仍未改善，請立即通知醫護人員處理。

Question (2): What shall I do if *the catheter is are inadvertently removed or slipped out*?

問題(二)若尿管不慎被拔除或滑出時，應如何處理？

Ans:Pack a diaper temporarily, and *drink at least 100 c.c. water or more per hour*.Observe the patient's self-micturition (with or without burning sensation). If the patient does not micturate for*6 to 8 hours*, please inform the medical staff.

答：可先暫時包尿片，且每小時至少飲水*100*cc以上，觀察患者自行解尿情形(有無燒灼感)，若*6~8*小時仍未解尿，請告知醫護人員處理。

Question(3):Shall the catheter be replaced often?

問題(三)導尿管需常更換嗎？

Ans:General catheters and silicone foley are not required to replace regularly. If urine turbidity or sediment in the catheter is found, please informthe medical staff to replace a new catheter. However, the indwelling time of the catheter shall not exceed 30 days.

答：一般導尿管與矽膠留置導尿管（Silicon Foley）均無需定期更換，若發現尿液混濁或尿管中有沉澱物時，請通知醫護人員，重新更換尿管。但導尿管留置時間最多不可超過30天。

Question(4):Whyurinaryexudation sometimes occurs?

問題(四)為何尿道口有時會出現滲尿情形？

Ans:Maybe it is because *the urinary obstruction or the wrong size of the catheter.*At this time, please inform the medical staff.

答：可能因尿管阻塞或尿管大小不合，此時，請告知醫護人員處理。

Question (5): When can the catheter be removed?

問題(五)導尿管何時才能拔除？

Ans:The need of indwelling catheter shall be estimated by the physicians. Early removal of the catheter will help reduce the incidence of urinary tract infection.

答：需經醫師評估導尿管留置的需求，早期移除導尿管，將有助於減少泌尿道感染的發生。

Question(6): What are the signs of urinary tract infections? How do we deal with it?

問題(六)泌尿道感染的徵兆有哪些？應如何處理？

Ans:The patient may have chills,the body temperature may rise,the upper part of the waist/pubic symphysis may hurt,and they may have hematuria,cloudy urine,smelly urine,burning sensation during urination,frequency urine, oliguria and other symptoms,it shallimmediately notify the medical staff.

答：可能有畏寒、體溫升高、腰/恥骨聯合上方疼痛、血尿、濁尿、有異味、排尿時灼熱感、頻尿、少尿等徵兆，此時應立即通知醫護人員處理。

Question (7): Why hematuria occurs?

問題(七)為何會出現血尿情形？

Ans:When replacing the catheter oraccidentally pulling the catheter, there may be bleeding.If there is no drinking water restrictions,it is allowed to drink more water, and observe closely, and notify medical staff.

答：更換尿管或不小心拉到尿管時，可能有出血現象，如沒有飲水限制，可多補充水分，並密切觀察及通知醫護人員處理。

Self-assessment (True or False)

自我評量（是非題）

( )1.When rinsing the catheter,it shall be wiped from the top to the bottom, one cotton stickfor one side.It is not allowed to wipe back and forth or be used again.
沖洗尿管方法應由上往下擦拭，棉枝一邊用一支，不可來回擦拭或重覆使用。

( )2.When getting off the bed or sitting on a wheelchair,the urine bag shall be higher than the bladder.
下床或坐輪椅時，採尿袋應高於膀胱。

( )3.It is necessary to clean the catheter at least once a day.
每日至少要執行清潔尿管一次。

1.(O) 2.(X) 3.(O)

參考資料：彰基護理部(2025)．導尿管照護與注意事項【中英對照版】(第五版)．衛教單張。

Changhua Christian Hospital Nursing Department (2025)·Catheter Care and Precautions [Chinese-English Bilingual Version] (Fifth Edition)·Health Education Leaflet.