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Instruction Guide to Sterile Self-Intermittent Catheterization For Men Using the Cure Catheter® Closed System

This educational material is provided by Cure Medical in an effort to answer questions and address possible concerns about the intermittent catheterization process. By following the steps for sterile self-intermittent catheterization, it is possible to quickly master the technique and make the process part of your daily routine for bladder management and urinary tract health.

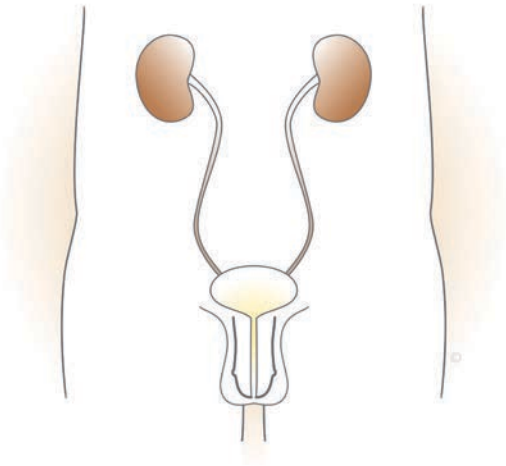
Cure Medical wishes to thank Anne Boisclair-Fahey, DNP, RN, CPNP for writing this educational material. Her experience as a Senior Director of Advanced Practice Providers (APPS) at Children's Minnesota hospital, combined with over 20 years of clinical expertise in pediatric urology as a pediatric nurse practitioner, make her contribution to this instruction guide invaluable.

This instruction guide is not a substitute for medical advice from your healthcare provider.

The Urinary System

The urinary system contains two kidneys, two ureters, the bladder and the urethra. The kidneys filter the blood and produce urine. The urine travels from the kidneys down the ureters and into the bladder, where it is stored until emptied during urination or catheterization. The urethra is the tube that empties the urine out of the body.

When the bladder is full, the brain sends a signal down the spinal cord to the bladder, causing it to empty. For people with spinal cord issues, the signal from the bladder to the brain gets interrupted, making them unable to empty their bladder.



When people are unable to empty their bladder on their own, they are at risk for urinary tract infections, as well as incontinence or involuntary loss of urine. When urine stays in the bladder and is not emptied, bacteria can grow, causing infections which can lead to illness. Research has shown that self-intermittent catheterization helps reduce urinary tract infections, control urinary leakage (incontinence) and prevent urinary tract damage.

Introduction to Self- Intermittent Catheterization

Self-intermittent catheterization is the periodic emptying of the bladder by the insertion of a hollow plastic tube (catheter) into the urethra, past the sphincter muscles and into the bladder. Urine then passes out of the bladder through the catheter. Self-intermittent catheterization is used when a person is unable to empty his bladder himself. Medical conditions that often require self-intermittent catheterization include spinal cord injuries, spina bifida or multiple sclerosis, just to name a few. Self-intermittent catheterization must be done at regular intervals each day to keep the bladder healthy.

What is Sterile Self-Intermittent Catheterization?

Self-intermittent catheterization is normally performed as a clean technique, meaning gloves are not used, and the catheter can be held with bare, clean hands. However, **your healthcare provider has recommended sterile self-intermittent catheterization** to help empty your bladder, keep your urinary system healthy and reduce urinary tract infections. The key to sterile self-intermittent catheterization is avoiding contact with the catheter; therefore, **gloves must be worn and the catheter should go directly from the sterile package into the body without touching any surface.**

How Often Should I Catheterize?

Your healthcare provider will let you know how often you will need to perform sterile self-intermittent catheterization and the size of the catheter you will need. Normally, sterile self-intermittent catheterization is performed every four hours starting when you wake up in the morning and continues every four hours until bedtime. Some people catheterize on a more frequent schedule. Most people who catheterize do not need catheterization at night. Your healthcare provider will let you know if you need catheterization at night.

Where Do I Get Catheters?

You will be taught sterile self-intermittent catheterization by your healthcare provider who will decide the size and style of catheter that you will need. Your healthcare provider will provide a prescription for the catheter supplies. The prescription will be sent to a medical supply company that will provide you with the supplies.

Sterile Self-Intermittent Catheterization Instructions for Men

Sterile self-intermittent catheterization can be performed while sitting, standing or lying down. Do what is most comfortable for you. If standing, stand in front of the toilet. If sitting, sit on the toilet with your legs apart or on a chair or wheelchair with the underpad on your lap.

1. Inspect Cure Catheter® Closed System before use. If catheter or package is damaged do not use.

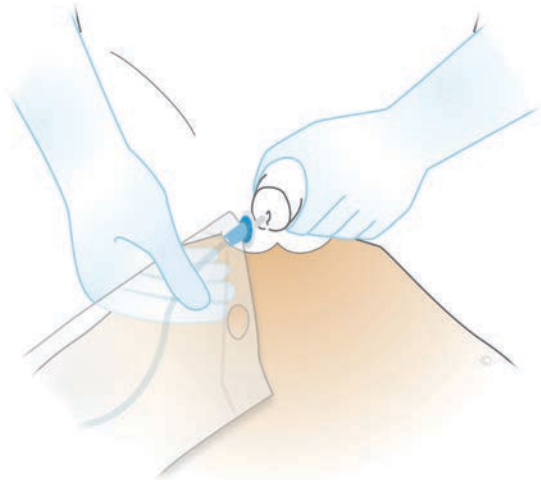


The sterile, unisex Cure Catheter® Closed System is not made with DEHP, BPA, or natural rubber latex. It features polished eyelets on a straight, pre-lubricated catheter tip with integrated 1500ml collection bag.

2. Wash hands thoroughly with soap and water or an antibacterial hand cleaner.
3. Open the Cure Catheter® Closed System kit.
4. Get in a comfortable position. Arrange clothing out of the way. If sitting on the toilet, spread your legs apart. If sitting on a chair or wheelchair, place the underpad in your lap with your legs apart. If lying down, use the underpad. Knees can be straight or bent.

Sterile Self-Intermittent Catheterization Instructions for Men *continued*

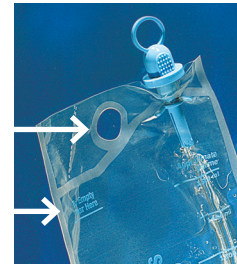
5. **Put on the gloves** provided in the kit. A BZK wipe and povidone-iodine swabsticks are included as well. If your medical provider advises using them, open the povidone-iodine swabsticks or BZK wipe package.
6. Remove the cap from the introducer tip and slide the catheter to within 1/8" (2 mm) of the top of the silicon tip. **DO NOT slide the catheter past the introducer tip yet.**
7. Hold the penis upright on the sides so that the urethra is not pinched.
8. Retract the foreskin if the penis is uncircumcised. Wash the glans penis from the urethral opening (tip) to the base of the glans as instructed by your medical provider. The povidone-iodine swabsticks or BZK wipe can be used if your medical provider advises. Wash with a circular motion from the tip outward. **Do not wash back and forth over the urethral opening.** Repeat the washing two more times with the other two swabsticks or two different areas of the wipe. Throw away swabsticks or the BZK wipe after use.
9. With your non-dominant hand, hold the penis at a 45 to 60-degree angle from the body. With the dominant hand insert the introducer tip into the urethra. Hold it securely in place with the thumb and forefinger of the non-dominant hand, while still grasping the base of the penis with the remaining fingers.
10. Once you have steadied the penis and secured the introducer tip in place, use the dominant hand to grasp the catheter through the bag close to the base of the introducer shaft and slowly push it through the introducer tip into the urethra.
11. Gently slide the catheter until you meet resistance at the urethral sphincters. **DO NOT pull the catheter in and out when you meet resistance;** just apply gentle but firm continuous pressure until the catheter advances into the bladder. Continue to slide the catheter through the urethra in short 2-3 inch movements until the catheter reaches the bladder and urine begins to flow.



Sterile Self-Intermittent Catheterization Instructions for Men *continued*

12. When urine stops flowing, slowly rotate the catheter through the bag between your fingers while withdrawing the catheter. If urine starts to flow again when withdrawing the catheter, stop each time it flows and let the urine drain. Continue to slowly withdraw the catheter until the bladder is empty and the catheter is removed. If you are uncircumcised, make sure you bring the foreskin back over the glans penis when you are finished.

13. To empty the bag, hold it upright and put your thumb in the hole provided at the top of the bag (*shown right*). Grasp the tab and tear downwards at the perforation located above “To Empty Tear Here”. Pour out the urine through the opening into the toilet. Dispose of the bag properly.





Your Sterile Self-Intermittent Catheterization Specifications:

- Cure Catheter® Closed System size:
 8 FR 10 FR 12 FR 14 FR 16 FR

- Cure Catheter® Closed System tip design:
 Straight Coude (if available in specified FR size) Either tip design is acceptable

- Catheterize _____ times a day or every _____ hours.

- Catheterization required at night: Yes or No

Healthcare provider contact information:

Name

Telephone Number

Healthcare product supplier contact information:

Name

Telephone Number



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Instruction Guide to Sterile Self-Catheterization for Women Using the Cure Catheter® Closed System

This educational material is provided by Cure Medical in an effort to answer questions and address possible concerns about the intermittent catheterization process. By following the steps for sterile self-intermittent catheterization, it is possible to quickly master the technique and make the process part of your daily routine for bladder management and urinary tract health.

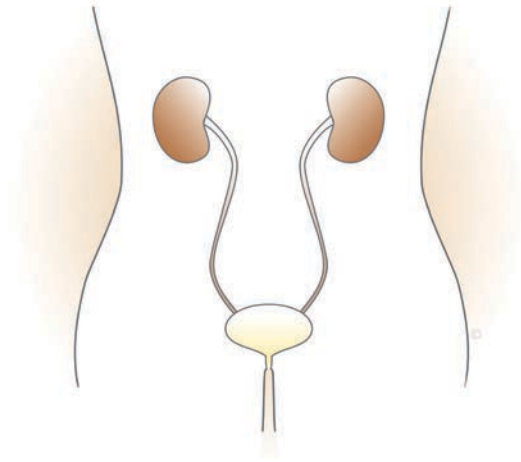
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This instruction guide is not a substitute for medical advice from your healthcare provider.

The Urinary System

The urinary system contains two kidneys, two ureters, the bladder and the urethra. The kidneys filter the blood and produce urine. The urine travels from the kidneys down the ureters and into the bladder, where it is stored until emptied during urination or catheterization. The urethra is the tube that empties the urine out of the body.

When the bladder is full, the brain sends a signal down the spinal cord to the bladder, causing it to empty. For people with spinal cord issues, the signal from the bladder to the brain gets interrupted, making them unable to empty their bladder.



When people are unable to empty their bladder on their own, they are at risk for urinary tract infections, as well as incontinence or involuntary loss of urine. When urine stays in the bladder and is not emptied, bacteria can grow, causing infections which can lead to illness. Research has shown that self-intermittent catheterization helps reduce urinary tract infections, control urinary leakage (incontinence) and prevent urinary tract damage.

Introduction to Self- Intermittent Catheterization

Self-intermittent catheterization is the periodic emptying of the bladder by the insertion of a hollow plastic tube (catheter) into the urethra, past the sphincter muscle and into the bladder. Urine then passes out of the bladder through the catheter. Self-intermittent catheterization is used when a person is unable to empty her bladder herself. Medical conditions that often require self-intermittent catheterization include spinal cord injuries, spina bifida or multiple sclerosis, just to name a few. Self-intermittent catheterization must be done at regular intervals each day to keep the bladder healthy.

What is Sterile Self-Intermittent Catheterization?

Self-intermittent catheterization is normally performed as a clean technique, meaning gloves are not used, and the catheter can be held with bare, clean hands. However, **your healthcare provider has recommended sterile self-intermittent catheterization** to help empty your bladder, keep your urinary system healthy and reduce urinary tract infections. The key to sterile self-intermittent catheterization is avoiding contact with the catheter; therefore, **gloves must be worn and the catheter should go directly from the sterile package into the body without touching any surface.**

How Often Should I Catheterize?

Your healthcare provider will let you know how often you will need to perform sterile self-intermittent catheterization and the size of the catheter you will need. Normally, sterile self-intermittent catheterization is performed every four hours starting when you wake up in the morning and continues every four hours until bedtime. Some people catheterize on a more frequent schedule. Most people who catheterize do not need catheterization at night. Your healthcare provider will let you know if you need catheterization at night.

Where Do I Get Catheters?

You will be taught sterile self-intermittent catheterization by your healthcare provider who will decide the size and style of catheter that you will need. Your healthcare provider will provide a prescription for the catheter supplies. The prescription will be sent to a medical supply company that will provide you with the supplies.

Sterile Self-Intermittent Catheterization Instructions for Women

Most women who perform sterile self-intermittent catheterization sit on the toilet, a chair or wheelchair when they insert the catheter into the urethra. Other women may perform it lying down with pillows behind their backs. Do what is most comfortable for you. Initially you may want to use a mirror to help visualize the urethral opening where the catheter is inserted. The mirror can be placed on a low stool in front of the toilet seat. It may take time for you to locate the proper opening. Eventually most women learn to catheterize by touch and feel.

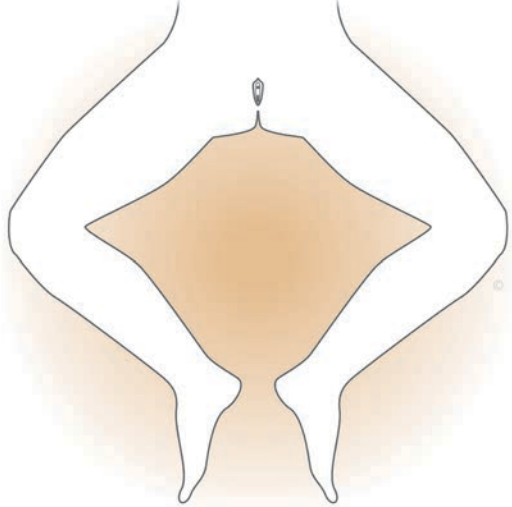
1. Inspect Cure Catheter® Closed System before use. If catheter or package is damaged do not use.



The sterile, unisex Cure Catheter® Closed System is not made with DEHP, BPA, or natural rubber latex. It features polished eyelets on a straight, pre-lubricated catheter tip with integrated 1500ml collection bag.

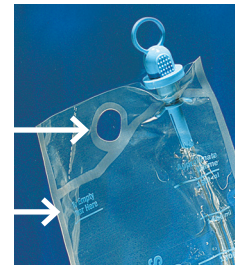
2. Wash hands thoroughly with soap and water or an antibacterial hand cleaner.
3. Open the Cure Catheter® Closed System kit.

Sterile Self-Intermittent Catheterization Instructions for Women continued

4. Position yourself comfortably. Arrange clothing out of the way. If sitting in a chair or wheelchair, spread your legs apart and place the underpad on the chair. If lying down, bend knees and place your heels together in a “frog-like” position (shown) on the underpad provided in the kit.
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- The diagram shows a top-down view of a person's lower body in a frog-like position. The person's legs are spread wide apart, and their feet are pointed towards the center. A large, light-brown, diamond-shaped underpad is placed on the floor between the person's feet. The underpad has a small, dark, teardrop-shaped opening at its top center, which is positioned directly in front of the person's urethra. The person's legs are outlined in black, and the underpad is a solid light-brown color.
5. **Put on the gloves** provided in the kit. A BZK wipe and povidine-iodine swabsticks are included as well. If your medical provider advises using them, open the povidone-iodine swabsticks or BZK wipe package.
 6. Using the non-dominant hand, separate the labia with the thumb and forefinger to locate the urethra.
 7. With the labia separated, wash the urethral area from front to back thoroughly as instructed by your medical provider. The povidone-iodine swabsticks or BZK wipe can be used to wash the urethral area thoroughly from front to back if your medical provider advises. **Never go back and forth over the urethral opening.** Repeat washing from front to back with the other 2 swabsticks or two different areas of the BZK wipe. Discard the swabsticks or wipe when you are finished.
 8. Remove the cap from the introducer tip and slide the catheter to within 1/8” (2 mm) of the top of the silicon tip. **DO NOT slide the catheter past the introducer tip yet.**
 9. With the non-dominant hand hold inner labia apart, use the dominant hand to insert the introducer tip into the urethra. Secure it in place with thumb and forefinger of the non-dominant hand. Use the dominant hand to grasp the catheter through the bag close to the base of the introducer shaft.

Sterile Self-Intermittent Catheterization Instructions for Women continued

10. Slowly push the catheter through the introducer tip and into the urethra. Continue to slide it through the urethra about 2 inches until the catheter reaches the bladder and urine begins to flow.
11. When urine stops flowing, slowly rotate the catheter through the bag between your fingers while withdrawing the catheter. If urine starts to flow again when withdrawing the catheter, stop each time it flows and let the urine drain. Continue to slowly withdraw the catheter until the bladder is empty and the catheter is removed.
12. To empty the bag, hold it upright and put your thumb in the hole provided at the top of the bag (*shown right*). Grasp the tab and tear downwards at the perforation located above “To Empty Tear Here”. Pour out the urine through the opening into the toilet. Dispose of the bag properly.





Your Sterile Self-Intermittent Catheterization Specifications:

- Cure Catheter® Closed System size:
 8 FR 10 FR 12 FR 14 FR 16 FR
- Catheterize _____times a day or every_____hours.
- Catheterization required at night: Yes or No

Healthcare provider contact information:

Name

Telephone Number

Healthcare product supplier contact information:

Name

Telephone Number



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Instruction Guide to Sterile Intermittent Catheterization For Parents of Girls Using the Cure Catheter® Closed System

This educational material is provided by Cure Medical in an effort to answer questions and address possible concerns about the sterile intermittent catheterization process. By following the basic steps for sterile intermittent catheterization, it is possible to quickly master the technique. As many parents have found, the process becomes a simple part of a daily routine for your child's bladder management and urinary tract health.

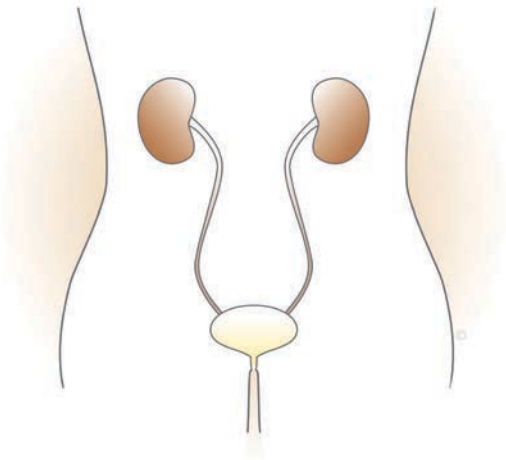
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This instruction guide is not a substitute for medical advice from your healthcare provider.

The Urinary System

The urinary system contains two kidneys, two ureters, the bladder and the urethra. The kidneys filter the blood and produce urine. The urine travels from the kidneys down the ureters and into the bladder, where it is stored until emptied during urination or catheterization. The urethra is the tube that empties the urine out of the body.

When the bladder is full, the brain sends a signal down the spinal cord to the bladder, causing it to empty. For children with spinal cord issues, the signal from the bladder to the brain gets interrupted, making them unable to empty their bladder.



When children are unable to empty their bladder on their own, they are at risk for urinary tract infections, as well as incontinence or involuntary loss of urine. When urine stays in the bladder and is not emptied, bacteria can grow, causing infections which can lead to illness. Research has shown that sterile intermittent catheterization helps reduce urinary tract infections, control urinary leakage (incontinence) and prevent urinary tract damage.

Introduction to Intermittent Catheterization

Intermittent catheterization is the periodic emptying of the bladder by the insertion of a hollow plastic tube (catheter) into the urethra, past the sphincter muscle and into the bladder. Urine then passes out of the bladder through the catheter. Intermittent catheterization is used when a person is unable to empty her bladder herself. Medical conditions that often require intermittent catheterization include spinal cord injuries, spina bifida or multiple sclerosis, just to name a few. Intermittent catheterization must be done at regular intervals each day to keep the bladder healthy.

What is Sterile Intermittent Catheterization?

Intermittent catheterization is normally performed as a clean technique, meaning gloves are not used, and the catheter can be held with bare, clean hands. However, **your child's healthcare provider has recommended sterile intermittent catheterization** to empty the bladder, keep your child's urinary system healthy and reduce urinary tract infections. The key to sterile intermittent catheterization is avoiding contact with the catheter; therefore, **gloves must be worn and the catheter should go directly from the sterile package into the body without touching any surface.**

How Often Should I Catheterize My Child?

Your healthcare provider will let you know how often you will need to perform sterile intermittent catheterization and the size of the catheter you will need. Normally, sterile intermittent catheterization is performed every four hours starting when your child wakes up in the morning and continues every four hours until bedtime. Some children are catheterized on a more frequent schedule. Most children do not need to be catheterized at night. Your child's healthcare provider will let you know if your child needs catheterization at night.

For school age children, **it is important to maintain their catheterization schedule throughout the school day**. The school nurse will be able to assist your child if necessary.

Can My Child Be Taught Sterile Self-Intermittent Catheterization?

If your child shows interest in learning the procedure and has good hand dexterity, flexibility and coordination, she may be able to learn to routinely perform sterile self-catheterization. Many girls have learned to catheterize themselves as early as five years of age. It is advised that girls use a mirror initially to help locate the opening and assist with proper catheterization. With parental support and encouragement, most girls will eventually perform sterile self-catheterization by touch and feel.

Even though most children can easily learn the procedure, **it is very important that parents supervise their children's catheterizations to make sure they are adequately emptying their bladders and using the proper technique**. Research has shown that when children are completely left to catheterize themselves without supervision, some of the technical steps are often missed, resulting in urinary incontinence and urinary tract infections.

Sterile Intermittent Catheterization Instructions for Parents of Girls

Depending on your child's age, catheterization can be done sitting in a chair or wheelchair, lying down or sitting on the toilet.

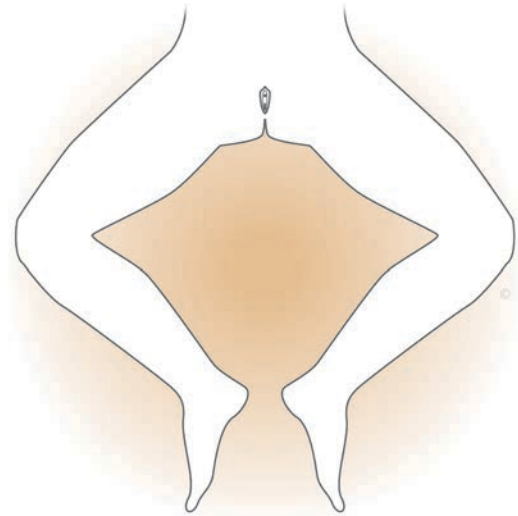
1. Inspect Cure Catheter® Closed System before use. If catheter or package is damaged do not use.



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2. Wash hands thoroughly with soap and water or an antibacterial hand cleaner.
3. Open the Cure Catheter® Closed System kit.

4. Position your child comfortably on the toilet, sitting in a chair or wheelchair, or laying down on the underpad provided in the kit. Arrange clothing out of the way. For younger girls, lying down with the knees bent in a “frog-like” position (shown) works well. Older girls can sit on the toilet or chair or wheelchair with their legs spread far apart.

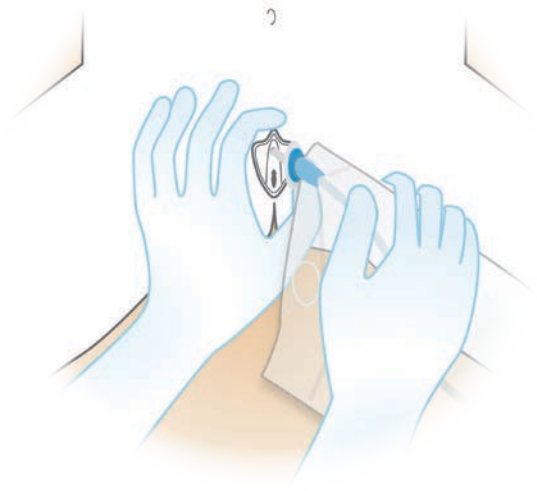


5. **Put on the gloves** provided in the kit. A BZK wipe and povidone-iodine swabsticks are included as well. If your child's medical provider advises using them, open the povidone-iodine swabsticks or BZK wipe package.
6. Using the non-dominant hand, separate the labia with the thumb and forefinger to locate the urethra.

Sterile Intermittent Catheterization Instructions for Parents of Girls *continued*

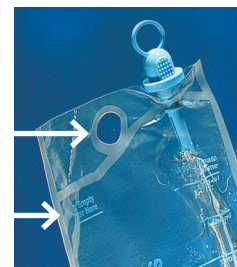
7. With the labia separated, wash the urethral area from front to back thoroughly as instructed by your child's medical provider. The povidone-iodine swabsticks or BZK wipe can be used to wash the urethral area thoroughly from front to back if your child's medical provider advises. **Never go back and forth over the urethral opening.** Repeat washing from front to back with the other two swabsticks or two different areas of the BZK wipe. Discard the swabsticks or wipe when finished.
8. Remove the cap from the introducer tip and slide the catheter to within 1/8" (2 mm) of the top of the silicon tip. **DO NOT slide the catheter past the introducer tip yet.**
9. With the non-dominant hand hold inner labia apart, use the dominant hand to insert the introducer tip into the urethra. Secure it in place with thumb and forefinger of the non-dominant hand. Use the dominant hand to grasp the catheter through the bag close to the base of the introducer shaft.

10. Slowly push the catheter through the introducer tip and into the urethra. Continue to slide it through the urethra about 2 inches until the catheter reaches the bladder and urine begins to flow.



11. When urine stops flowing, slowly rotate the catheter through the bag between your fingers while withdrawing the catheter. If urine starts to flow again when withdrawing the catheter, stop each time it flows and let the urine drain. Continue to slowly withdraw the catheter until the bladder is empty and the catheter is removed.

12. To empty the bag, hold it upright and put your thumb in the hole provided at the top of the bag (*shown right*). Grasp the tab and tear downwards at the perforation located above "To Empty Tear Here". Pour out the urine through the opening into the toilet. Dispose of the bag properly.





Your Child's Sterile Intermittent Catheterization Specifications:

- Cure Catheter® Closed System size:
 8 FR 10 FR 12 FR 14 FR 16 FR
- Catheterize _____times a day or every_____hours.
- Catheterization required at night: Yes or No

Healthcare provider contact information:

Name

Telephone Number

Healthcare product supplier contact information:

Name

Telephone Number



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Instruction Guide to Sterile Intermittent Catheterization For Parents of Boys Using the Cure Catheter® Closed System

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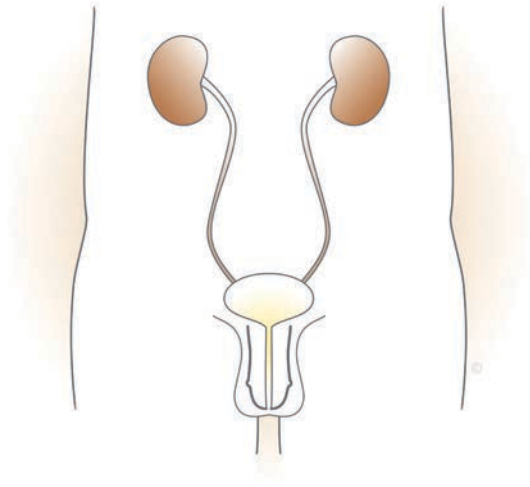
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The Urinary System

The urinary system contains two kidneys, two ureters, the bladder and the urethra. The kidneys filter the blood and produce urine. The urine travels from the kidneys down the ureters and into the bladder, where it is stored until emptied during urination or catheterization. The urethra is the tube that empties the urine out of the body.

When the bladder is full, the brain sends a signal down the spinal cord to the bladder, causing it to empty. For children with spinal cord issues, the signal from the bladder to the brain gets interrupted, making them unable to empty their bladder.

When children are unable to empty their bladder on their own, they are at risk for urinary tract infections, as well as incontinence or involuntary loss of urine. When urine stays in the bladder and is not emptied, bacteria can grow, causing infections which can lead to illness. Research has shown that sterile intermittent catheterization helps reduce urinary tract infections, control urinary leakage (incontinence) and prevent urinary tract damage.



Introduction to Intermittent Catheterization

Intermittent catheterization is the periodic emptying of the bladder by the insertion of a hollow plastic tube (catheter) into the urethra, past the sphincter muscle and into the bladder. Urine then passes out of the bladder through the catheter. Intermittent catheterization is used when a person is unable to empty his bladder himself. Medical conditions that often require intermittent catheterization include spinal cord injuries, spina bifida or multiple sclerosis, just to name a few. Intermittent catheterization must be done at regular intervals each day to keep the bladder healthy.

What is Sterile Intermittent Catheterization?

Intermittent catheterization is normally performed as a clean technique, meaning gloves are not used, and the catheter can be held with bare, clean hands. However, **your child's healthcare provider has recommended sterile intermittent catheterization** to empty the bladder, keep your child's urinary system healthy and reduce urinary tract infections. The key to sterile intermittent catheterization is avoiding contact with the catheter; therefore, **gloves must be worn and the catheter should go directly from the sterile package into the body without touching any surface.**

How Often Should I Catheterize My Child?

Your healthcare provider will let you know how often you will need to perform sterile intermittent catheterization and the size of the catheter you will need. Normally, sterile intermittent catheterization is performed every four hours starting when your child wakes up in the morning and continues every four hours until bedtime. Some children are catheterized on a more frequent schedule. Most children do not need to be catheterized at night. Your child's healthcare provider will let you know if your child needs catheterization at night.

For school age children, it is important to maintain their catheterization schedule throughout the school day. The school nurse will be able to assist your child if necessary.

Can My Child Be Taught Sterile Self-Intermittent Catheterization?

If your child shows interest in learning the procedure and has good hand dexterity, flexibility and coordination, he may be able to learn to routinely perform sterile self-catheterization. Even though most children can easily learn the procedure, **it is very important that parents supervise their children's catheterizations to make sure they are adequately emptying their bladders and using the proper technique.** Research has shown that when children are completely left to catheterize themselves without supervision, some of the technical steps are often missed, resulting in urinary incontinence and urinary tract infections.

Sterile Intermittent Catheterization Instructions for Parents of Boys

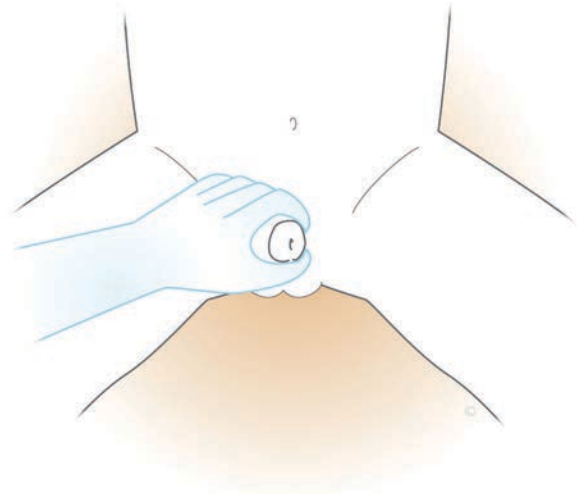
Depending on your child's age, sterile intermittent catheterization can be done sitting in a chair or wheelchair, lying down, standing or sitting on the toilet. Do what is most comfortable for your child.

1. Inspect Cure Catheter® Closed System before use. If catheter or package is damaged do not use.



The sterile, unisex Cure Catheter® Closed System is not made with DEHP, BPA, or natural rubber latex. It features polished eyelets on a straight, pre-lubricated catheter tip with integrated 1500ml collection bag.

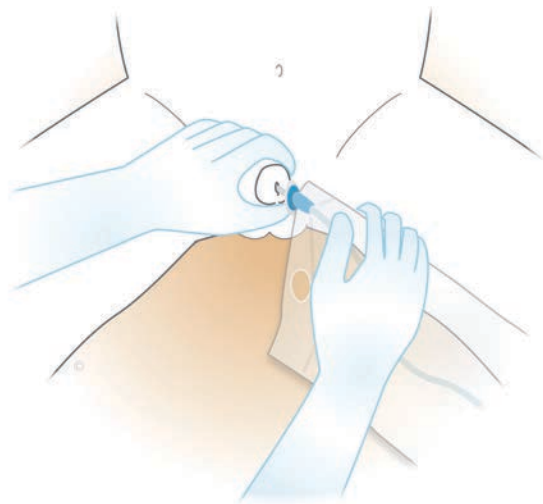
2. Wash hands thoroughly with soap and water or an antibacterial hand cleaner.
3. Open the Cure Catheter® Closed System kit.
4. Position your child comfortably on the toilet, sitting in a chair or wheelchair, or laying down on the underpad provided in the kit. Arrange clothing out of the way. If your child is sitting, spread his legs apart. If he is lying down, his knees can be straight or bent.
5. **Put on the gloves** provided in the kit. A BZK wipe and povidone-iodine swabsticks are included as well. If your child's medical provider advises using them, open the povidone-iodine swabsticks or BZK wipe package.
6. Remove the cap from the introducer tip and slide the catheter to within 1/8" (2 mm) of the top of the silicon tip. **DO NOT slide the catheter past the introducer tip yet.**
7. Hold the penis upright on the sides so that the urethra is not pinched (shown).



Sterile Intermittent Catheterization Instructions for Parents of Boys *continued*

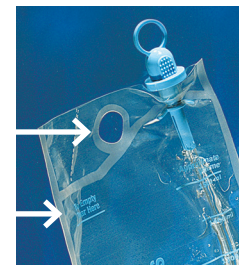
8. Retract the foreskin if the penis is uncircumcised. Wash the glans penis from the urethral opening (tip) to the base of the glans as instructed by your child's medical provider. The povidone-iodine swabsticks or BZK wipe can be used if your child's medical provider advises. Wash with a circular motion from the tip outward. **DO NOT wash back and forth over the urethral opening.** Repeat the washing two more times with the other two swabsticks or two different areas of the wipe. Throw away swabsticks or the BZK wipe after use.

9. With your non-dominant hand, hold the penis at a 45 to 60-degree angle from the body. With the dominant hand insert the introducer tip into the urethra. Hold it securely in place with the thumb and forefinger of the non-dominant hand, while still grasping the base of the penis with the remaining fingers. Once you have steadied the penis and secured the introducer tip in place, use the dominant hand to grasp the catheter through the bag close to the base of the introducer shaft and slowly push it through the introducer tip and into the urethra. Gently slide the catheter until you meet resistance at the urethral sphincters. **DO NOT pull the catheter in and out when you meet resistance;** just apply gentle but firm continuous pressure until the catheter advances into the bladder. Continue to slide the catheter through the urethra in short 2-3 inch movements until the catheter reaches the bladder and urine begins to flow.



10. When urine stops flowing, slowly rotate the catheter through the bag between your fingers while withdrawing the catheter. If urine starts to flow again when withdrawing the catheter, stop each time it flows and let the urine drain. Then continue to slowly withdraw the catheter until the bladder is empty, and the catheter is removed. If your son is uncircumcised, make sure you bring the foreskin back over the glans penis when you are finished.

11. To empty the bag, hold it upright and put your thumb in the hole provided at the top of the bag (*shown right*). Grasp the tab and tear downwards at the perforation located above "To Empty Tear Here". Pour out the urine through the opening into the toilet. Dispose of the bag properly.





Your Child's Sterile Intermittent Catheterization Specifications:

- Cure Catheter® Closed System size:
 8 FR 10 FR 12 FR 14 FR 16 FR

- Cure Catheter® Closed System tip design:
 Straight Coude (if available in specified FR size) Either tip design is acceptable

- Catheterize _____ times a day or every _____ hours.

- Catheterization required at night: Yes or No

Healthcare provider contact information:

Name

Telephone Number

Healthcare product supplier contact information:

Name

Telephone Number