



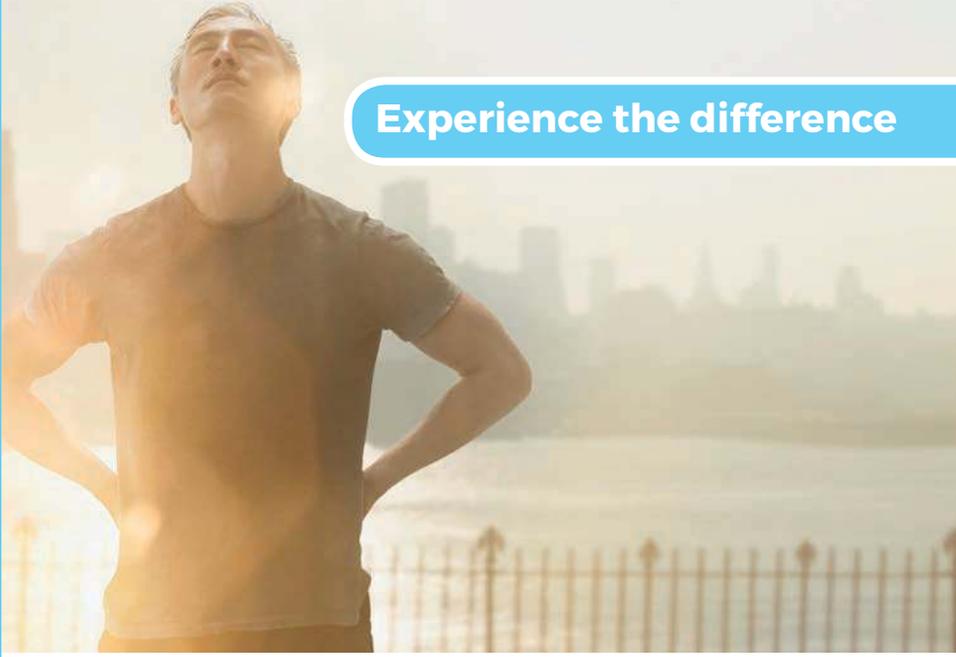
Experience the difference™

GentleCath™ Hydrophilic Catheters

Help minimize the risk of infection with
no-touch catheterization



Latex
Free



Experience the difference

Getting started

Support and advice are a call or click away. Our me+ team has live experts available by phone or email to answer your questions.

1-800-422-8811

Monday-Friday 8:30am-7:00pm EST

CIC@convatec.com
www.convatec.com



Professional advice: our online video FAQ may help to answer some of your users' questions and concerns.



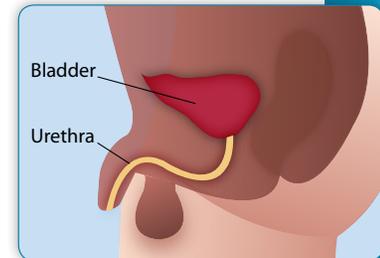
What is intermittent catheterization?

Intermittent catheterization means periodic insertion of a hollow plastic tube (a catheter) into the bladder to drain urine from the bladder.

Catheterization is done when the bladder is full, if you are unable to pass urine or after incomplete voiding to drain residual urine in the bladder.

Catheterization and your body

The bladder needs to be emptied 4-8 times a day (based on your fluid intake). The catheter is inserted into the urethra and then travels through the urethra to the bladder. Once the catheter is in the bladder it can drain the urine.



The advantages

- Catheterization prevents the bladder from over filling
- It eliminates residual urine
- It helps prevent bladder infections
- It gives you independence

GentleCath™ Hydrophilic Catheters

Hydrophilic catheters are coated with a hydrophilic polymer that reacts with water to create a smooth, slippery coating on the surface of the catheter. Compared to uncoated catheters, hydrophilic catheters have been shown to reduce the incidence of urinary tract infections.¹

Help minimize the risk of infection with no-touch catheterization

- GentleCath™ Hydrophilic catheters feature a no-touch handling strip which allows you to catheterize without touching the catheter
- This no-touch catheterization is designed to help minimize the risk of infection



For more information visit:
www.gentlecath.com

www.gentlecath.com

What you need...

Before you begin, gather the following items: catheter, water-based lubricant, washcloth or antiseptic wipe and a receptacle to void into if a toilet is not available.

Wash your hands thoroughly and then choose the position that is most comfortable for you.



Step-by-step instruction guide*:



STEP 1: Wash hands thoroughly with soap and water.



STEP 2: Withdraw the foreskin and wash the penis with water.



STEP 3: Break the sterile water sachet. Then let the water run down into the package.*



STEP 4: To activate the hydrophilic coating, make sure the catheter is soaked in water for at least 15 seconds. Open the package by peeling the tabs on the connector side.



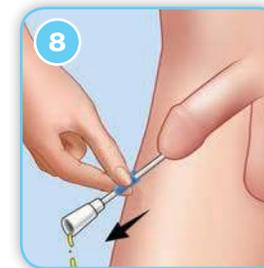
STEP 5: Hold your penis upward towards your stomach. This will make it easier to guide the catheter into your bladder. Do not squeeze your penis too hard as this can block the opening of the urethra.



STEP 6: Using the “no touch” blue handling strip, slide the catheter slowly and smoothly into the opening of your urethra and into your bladder until the urine starts to flow. Make sure the funnel end is pointing into a container.



STEP 7: When the urine starts to flow, push the catheter in a little (one or two cms/half an inch) to make sure that it is fully inside the bladder.



STEP 8: To make sure the bladder is emptied completely, remove the catheter slowly and stop if more urine starts to flow.

When the bladder is empty withdraw the catheter slowly. Discard the catheter after use. **Wash your hands.**

* Please refer to the Instructions for Use for a detailed guide

Troubleshooting & frequently asked questions

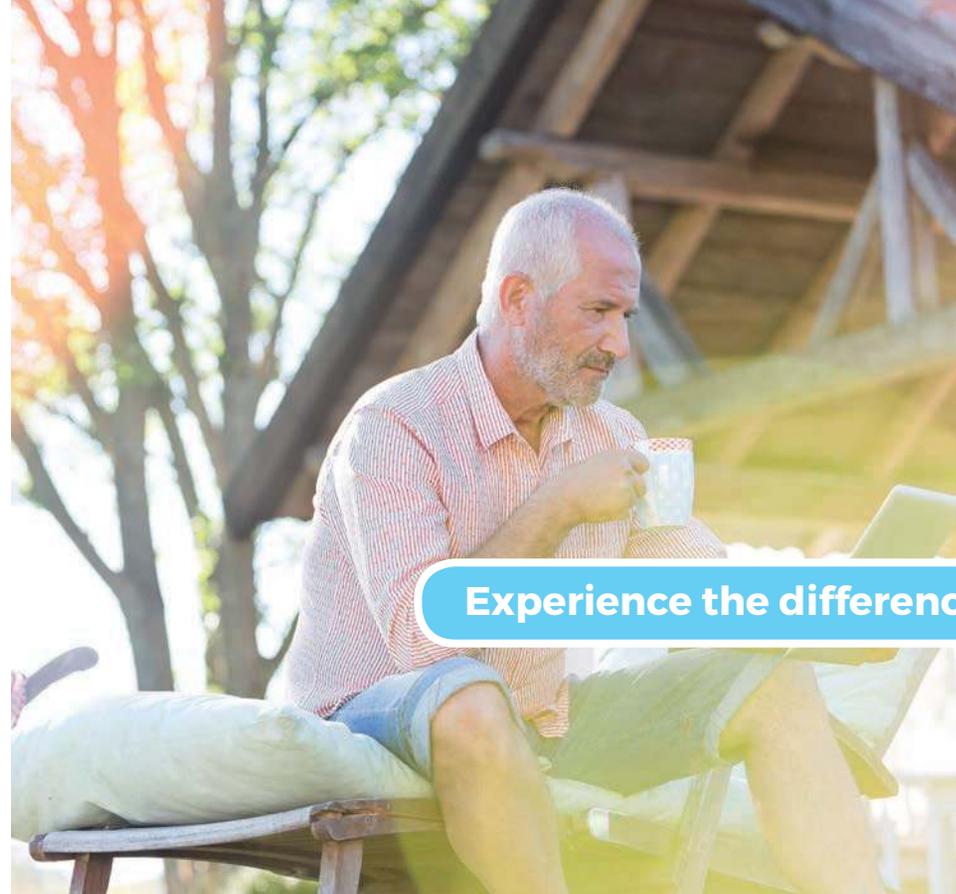
How often should I empty my bladder?

- Usually, first thing in the morning, last thing at night and about 2-3 times during the day.
- When you have the urge to urinate or your bladder contains 10-18 fl oz (300-500 mL) of urine.
- Check the amount when you empty your bladder to see that the bladder is not holding more than 18 fl oz (500 mL). If it is, you will need to catheterize more often.
- Whenever your doctor recommends.
- To help you keep track of your fluid intake and output, it might be helpful to make a daily chart like this one.

	Monday		Tuesday		Wednesday		Thursday		Friday	
TIME	Drink	Void: fl oz/mL	Drink	Void: fl oz/mL	Drink	Void: fl oz/mL	Drink	Void: fl oz/mL	Drink	Void: fl oz/mL
8 AM										
9 AM										
10 AM										
11 AM										

I'm having trouble inserting, or removing, the catheter...

- You may feel some resistance when inserting or removing the catheter. If this happens, wait momentarily and take a few deep breaths until the sphincter muscle relaxes.
- Never force the catheter, neither when inserting nor upon removal.
- If you have trouble removing the catheter - don't panic! Relax and take some deep breaths - perhaps a little cough to relax the muscles as you remove it.
- Contact your health care provider immediately if you cannot get the catheter out.



Experience the difference

No urine is draining...

- Check the eyelets at the tip of the catheter to make sure they are not blocked.
- Ensure the catheter is inserted far enough into the bladder.
- Pull the catheter back a short distance.
- If you are unable to drain for over 6-8 hours contact your healthcare provider.

What about intimacy?

- You should be able to have sexual relations as before. Prior to sexual activity you may want to catheterize to ensure your own comfort and prevent the possibility of urine leakage. It is important to wash your genital area after sexual activity.

How do I obtain supplies?

- There are several retailers who will ship supplies right to your home. Call ConvaTec for more information.

Questions about urinary tract infections (UTI's)

How can I avoid UTI's?

Urine is normally sterile and the normal flow of urine usually prevents bacteria from growing in the urinary tract. When urine stays in the bladder, however, bacteria have a chance to grow and infect the urinary tract.

You can help reduce the risk of UTI's in several ways.

- **Wash your hands thoroughly:** Hand washing and personal hygiene before and after you use a catheter are very important.
- **Drink enough fluids:** Try to drink at least 8-10 cups of fluids daily.
- **Use a catheter regularly:** Regular elimination of urine is important to help reduce the infection risk.

Avoid touching the sterile catheter- No-touch catheterization can help reduce the risk of infection.

How will I know if there may be an infection?

- Fever
- Pain or a burning feeling when passing the catheter or urine
- Cloudy, oddly-colored or offensive-smelling urine
- The need to empty the bladder more often than usual
- Leakage between catheterizations
- Kidney pain

Contact your healthcare provider if you experience any of these symptoms.



Medicare guidelines

Many people have questions about Medicare Guidelines regarding Urinary Catheter Supplies. At GentleCath™, we want to give you the most up-to-date information possible.

Medicare: at-a-glance*

Per the Medicare guidelines on Intermittent Urinary Catheterization, any patient who utilizes intermittent catheters can receive one sterile urological catheter and one packet of lubricant for each catheterization.

- Physician prescriptions should reflect the actual number of times a patient catheterizes per day.
- Medicare will cover one catheter per cathing episode up to a maximum of 200 intermittent catheters per month:
 - **A4351:** Intermittent urinary catheter with straight tip
 - **A4352:** Intermittent urinary catheter with Coudé/Tiemann tip
When a coudé tip catheter (A4352) is used there must be documentation in your medical record stating why the patient cannot use a straight tip catheter.
 - **A4353:** Intermittent urinary catheter, with insertion supplies
With qualifying documentation in your medical record stating why the patient needs this.

Medicare's policy is designed to:

- Promote safety
- Reduce health care costs related to urinary tract infections
- Improve your quality of life
- Reduce risk of infection

* The reimbursement information provided by ConvaTec is intended to provide general information relevant to coding and reimbursement of ConvaTec's products only. Coverage and payment policies for the same insurer can vary from one region to another and may change from time to time because of ongoing changes in government and insurance industry rules and regulations. Therefore please confirm HCPCS codes with your local DME-MAC, private insurer, or Medicaid agency before processing claims. ConvaTec does not guarantee coverage or payment of its products listed herein.

Support networks

1-800-422-8811

Monday-Friday 8:30am-7:00pm EST

CIC@convatec.com

www.convatec.com



www.gentlecath.com

There are many support groups that may be of interest to you once you have settled back in to a routine. We list some of them below.

Miami Project to Cure Paralysis

miamiproject.miami.edu

305-243-6001

The Christopher Reeve Paralysis Foundation

www.crpf.org

1-800-225-0292

National Multiple Sclerosis Society

www.nmss.org

1-800-344-4867

Paralyzed Veterans of America

www.pva.org

1-800-424-8200

The Simon Foundation

www.simonfoundation.org

1-800-23SIMON (1-800-237-4666)

Seekwellness

www.seekwellness.com

1-800-840-9301





If you have questions call the
ConvaTec me+™ team at

1-800-422-8811

Monday-Friday 8:30am-7:00pm EST

CIC@convatec.com

www.convatec.com



www.gentlecath.com

Professional advice:
our online video FAQ may
help to answer some of your
users' questions and concerns.



REFERENCES: 1. Cardenas DD, Hoffman JM. Hydrophilic catheters versus noncoated catheters for reducing the incidence of urinary tract infections: a randomized controlled trial. *Arch Phys Med Rehabil.* 2009;90(10):1668-71.

© / TM indicates trademarks of Unomedical a/s.
©2018 ConvaTec Inc. AP-019899-US

