

Standard Operating Procedure (SOP) for
assessing the suitability of a catheter valve (adult patients)

Document Details		
Title	Standard Operating Procedure (SOP) for assessing the suitability of a catheter valve (adult patients)	
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Standard Operating Procedure for assessing the suitability of a catheter valve (adult patients)

Catheter valves can be used as an alternative to a urine drainage bag

Catheter valves are inserted into the end of the catheter, allowing normal bladder filling and intermittent drainage. They promote patient comfort and independence

Catheter valves must be changed every 7 days

Catheter valves should be opened / drained 4-7 times per 24 hours, or when the patient feels their bladder is comfortably full

Catheter valves are suitable for male patients, female patients, urethral and suprapubic catheters

Catheter valves must be secured against the patient's abdomen or thigh, with a retention strap / device

Catheter valves are contraindicated in the following circumstances:

- Impaired bladder capacity
- Detrusor over activity
- Ureteric reflux
- Renal impairment
- Cognitive dysfunction
- Poor dexterity / inability to release the valve independently
- If the patient has recently been catheterised following an episode of acute urinary retention (seek advice from the urology department to establish if, and when, catheter valves are appropriate)
- If the patient has recently undergone urological surgery (seek advice from the urology department to establish if, and when, catheter valves are appropriate)
- If the patient is unable to manipulate the valve and empty it themselves, at appropriate intervals

The use of a catheter valve should be a multidisciplinary decision involving patient's GP, urologist and hospital / community nurse, and continence nurse specialist, where appropriate