

Standard Operating Procedure (SOP) for administration of B Braun Uro-Tainer Twin Suby G 3.23% Citric Acid catheter maintenance solutions (adult patients)

Document Details		
Title	Standard Operating Procedure (SOP) for administration of B Braun Uro-Tainer Twin Suby G 3.23% Citric Acid catheter maintenance solutions (adult patients)	
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Related Trust policy	Urinary Catheter Care Policy for Adult Patients	
Approval process		
Who has been consulted in the development of this SOP?	Continence Advisory Service	
Approved by (Committee/Director)	Clinical Policies Group	
Approval Date	13/11/2023	
Review date	13/11/2026	
Amendments History		
No	Date	Amendment
1	Oct 2023	New Standard Operating Procedure

Standard Operating Procedure for administration of B Braun Uro-Tainer Twin Suby G 3.23% Citric Acid catheter maintenance solutions (adult patients)

<ul style="list-style-type: none"> • Administration of catheter maintenance solutions (CMS) must be undertaken as a Standard Aseptic Non-Touch Technique (ANTT) procedure • Suby G dissolves the mineral deposits composed of struvite and calcium phosphate which are formed in alkaline urine. Suby G contains magnesium oxide to reduce irritation of the bladder mucus caused by an acidic solution • Suby G promotes a reduction in urinary pH. Normal urinary pH is 6.0. If urinary pH is elevated above 6.8 (alkaline), patients' catheters will be more susceptible to blocking with debris. Administration of Suby G twice a week promotes a reduction in urinary pH, and thus promotes a reduction in catheter blockage, and promotes extended catheter life • Suby G CMS must only be administered if urinary pH is elevated above 6.8, and if catheter life is being extended • Two sequential solutions of Suby G are more clinically effective than one
<p>Equipment: Sterile dressing pack (including sterile gloves) Non-sterile nitrile gloves Sterile Uro-Tainer Twin Suby G 3.23% Citric Acid catheter maintenance solution pH indicator strips or Multistix 8 SG strips Single use apron Alcohol hand gel</p>
<p>Check that all items are within their expiry date and that packaging is undamaged</p>
<p>Check that a 'Patient Specific Direction' PSD (Authority to Administer) Authorisation Community Drug Sheet', or Medication Administration Record (MAR chart), or Drug Chart, has been completed by the prescriber, and that it is up to date</p>
<p>Assess whether there are any precautions to administration of Suby G CMS:</p> <ul style="list-style-type: none"> - Undiagnosed haematuria - Known urological cancer - Fistula - Recent radiotherapy to the lower urinary tract / pelvis - Recent urological surgery - Spinal cord injury at T6 or above (risk of autonomic dysreflexia) <p>Use clinical judgment and seek advice from urology / GP / continence nurse specialists, if required</p>
<p>Explain the procedure to the patient, and gain consent</p>
<p>Check the patient has no known allergies to any of the equipment to be used</p>
<p>Decontaminate hands, and put on apron and non sterile gloves Help the patient into a sitting or supine position, protect the bed / chair, and ensure privacy</p>
<p>Obtain a catheter specimen of urine (CSU) - refer to Trust Standard Operating Procedure for obtaining a CSU, and determine urinary pH</p>
<p>Using pH indicator strips: Remove a test strip and replace top of box Completely immerse test strip in urine, to cover all the reagent areas Remove the test strip immediately and tap off any residual urine by running its underside along the rim of the container Hold the test strip horizontally to avoid cross contamination of the reagent squares Lay the test strip flat on a paper towel Wait 15 seconds for the colour to develop, read while still moist, compare the test strip with the corresponding colour chart on the box to establish urinary pH</p>

Using Multistix 8 SG:

Remove a test strip and replace top of canister (do not remove the desiccant sachet)

Completely immerse the test strip in urine, to cover all the reagent areas

Remove the test strip immediately and tap off any residual urine by running its underside along the rim of the container

Hold the test strip horizontally to avoid cross contamination of the reagent squares

Lay the test strip flat on a paper towel

Wait 60 seconds for the colour to develop on the pH reagent square, compare the test strip with the corresponding colour chart on the canister to establish urinary pH

If urinary pH is elevated above 6.8, proceed to administration of Suby G CMS

If urinary pH is normal / below 6.8 do not administer CMS

Leave the Suby G CMS in the outer packaging, and bring the solution up to body temperature by immersing it in lukewarm tap water

If catheter valve is being used, drain the bladder and lay valve on the bed or chair

If urine drainage bag is being used, empty it and lay bag on the bed or chair

Remove gloves and decontaminate hands

Open sterile dressing pack, open Suby G CMS and bag / valve onto sterile field, place dressing field under catheter, and put on sterile gloves

Disconnect bag / valve from catheter

Open the white clamp on the CMS and administer the first chamber, via the catheter

Do not squeeze or force the solution in. Use gravity to instill the warmed solution into the bladder

Close the white clamp on the CMS bag and leave in position for 5 minutes

Ensure the CMS bag is below the level of the bladder, re open the white clamp and allow the solution to drain back into the bag

Repeat with the other chamber, using the green clamp, and drain the solution back into the bag

Re close the green clamp on the CMS bag, disconnect it from the catheter, connect a new sterile urine drainage bag or catheter valve and attach straps or other retention device, to ensure catheter is secure

Remove gloves and apron. Dispose of waste. Decontaminate hands

Seek advice from other health care professionals about any clinical concerns, queries or outcomes

Record consent, urinary pH, batch number, expiry date, solution used, manufacturer, procedure and outcomes in the patient's catheter care pathway documentation

Complete / update the patient's Catheter Card

Shropshire Community Health NHS Trust Prescribing Formulary for Continence, suggests that B/braun Urotainer Twin Suby G 3.23% citric acid CMS, should be prescribed / administered

This product has two chambers of Citric Acid, which means that x2 sequential solutions can be administered, but the closed system is only broken once

However, sometimes these on formulary B/braun Twin Suby G 3.23% Citric Acid CMS are out of stock, and Bard Optiflo 3.23% Citric Acid (single chamber) CMS, or Uroflush G 3.23% Citric Acid (single chamber) are prescribed / administered as an alternative

Please note that x2 sequential solutions of Optiflo / Uroflush 3.23% Citric Acid (single chamber) CMSs, should be administered. This involves, administering and draining back one Opiflo / Uroflush 3.23% Citric Acid CMS, disconnecting it from the catheter, and administering and draining back a second Opiflo / Uroflush 3.23% Citric Acid CMS