

# Techniques For Foley Catheter Management

In all instances, aseptic technique must be vigorously maintained. The nursing techniques for sizing, placement, balloon inflation and final seating of the balloon are well known.

It is a prudent and recommended procedure to preinflate the balloon prior to catheterization to establish the functionality of the catheter.

A suggested preinflation technique is as follows:

1. Insert the luer tip of the syringe with a firm push/twist motion into the catheter valve housing to assure activation of the valve (Figure A).
2. Inflate with the prescribed volume of fluid.
3. Remove syringe with a twisting motion and observe balloon and valve for any evidence of leaking and any difficulties of inflation.
4. Reinsert syringe, as in #1 above, deflate the balloon and observe for any difficulty with the deflation.

For Foley catheter removal the deflation technique should follow the sequence of events outlined below:

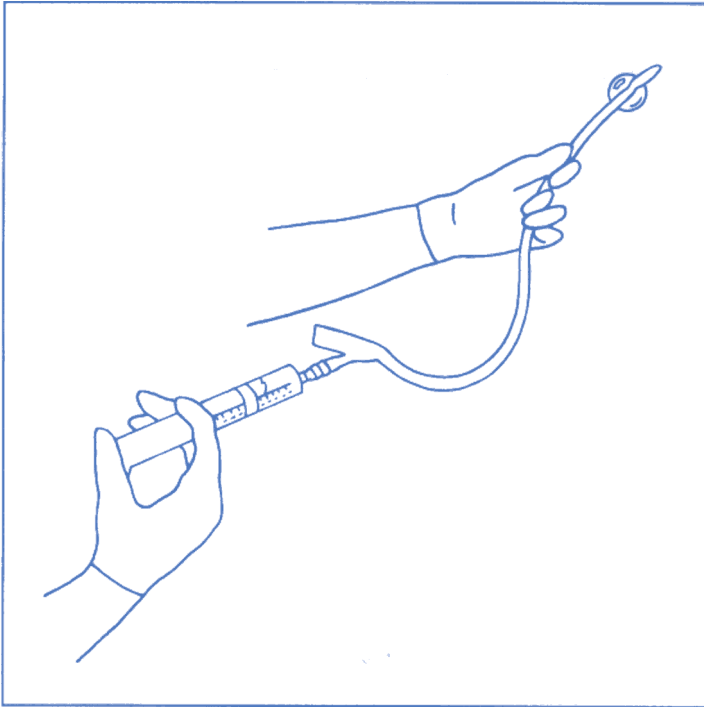
1. Insert the syringe luer tip into the valve housing with a firm push/twist motion. The balloon should spontaneously deflate (Figure B). If deflation does not occur, proceed to the alternative methods listed below.
2. Aspirate by slowly pulling back on syringe plunger handle to force deflation. If not:
3. Remove syringe; fill with 2-3cc of water; reinsert syringe tip into valve; inject water into balloon and aspirate. If not:
4. Cut catheter shaft at some safe distance from the meatus and catheter should drain spontaneously. If not:
5. Inject 100-200cc of suitable irrigating fluid into bladder. Then inject 2-3cc of ether or acetone into the balloon by syringe/needle and wait for deflation followed by a volume of a suitable irrigation fluid to avoid any chance of chemical cystitis.
6. Scope around the catheter and use a suitable device to puncture balloon.

Baxter Foley Catheters cannot be clamped on the shaft since the inflation lumen will be sealed and the catheter cannot be readily deflated (Figure D). Therefore, if it is necessary to interrupt urine flow, clamp the drainage tubing. If drainage tubing is not present, use a sterile catheter plug inserted into the catheter funnel. If the catheter must be clamped, place the clamp on the funnel above the inflation valve sidearm (Figure C).

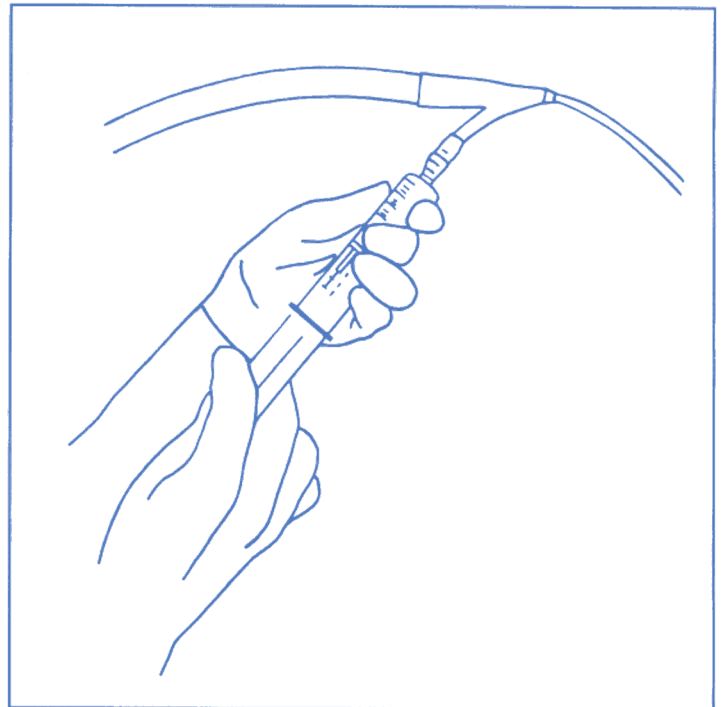
Observation of these precautions should assure proper Foley catheter performance and a minimum of patient discomfort.

(Procedures on reverse side)

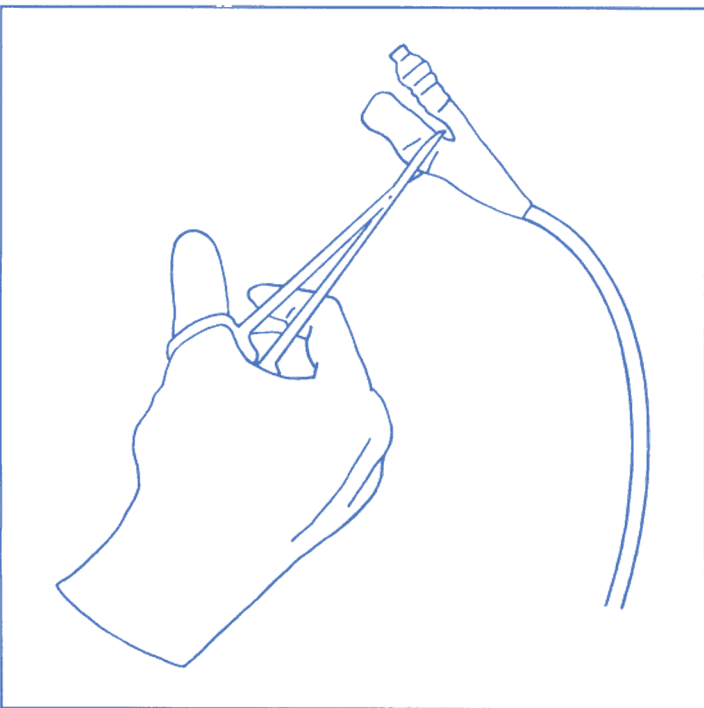
# Foley Catheter Use Procedures



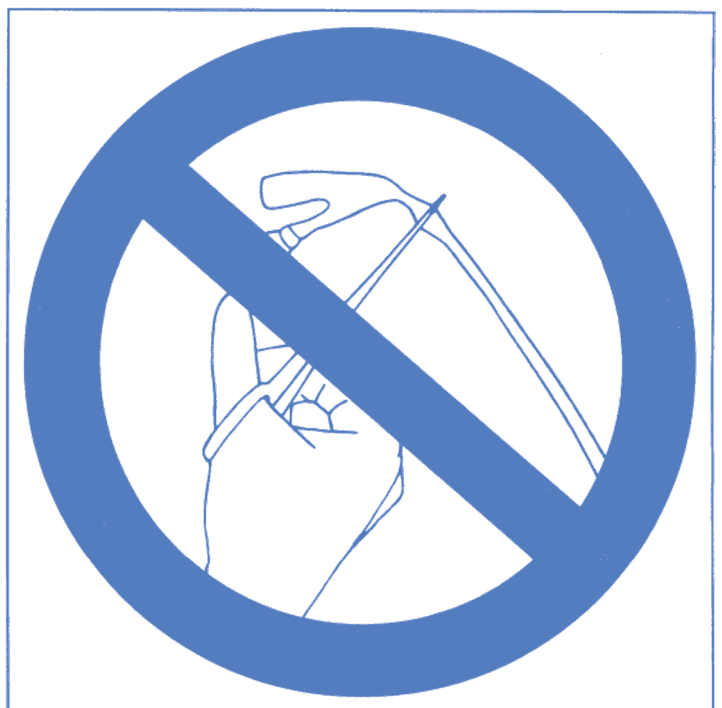
**A. Prior to insertion, preinflate and deflate balloon.**



**B. For catheter removal, deflate using syringe.**



**C. If necessary, clamp only as shown above.**



**D. DO NOT clamp catheter shaft.**

Manufactured in Malaysia  
by an affiliate of:

**Baxter Healthcare Corporation**  
Deerfield, IL 60015 USA