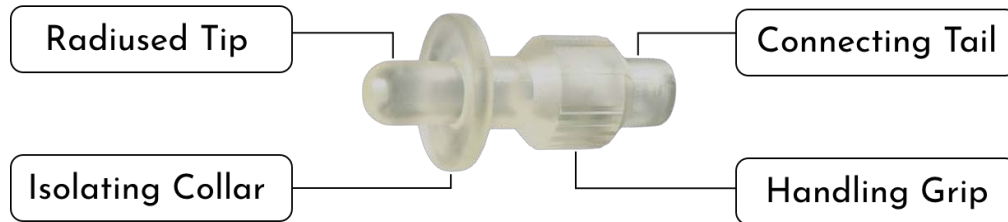




# Instructions for doctors to teach self-instillation of the UroDapter®

## Female Patients



***Tips & Tricks Guide*** sent together the instructions shows more in-depth explanation and videos of how to use the UroDapter. Some points refer to the presentation if needed more explanation therefore when in doubt, consult with the “*Tips & Tricks*” Guide.

### **Prior to using the UroDapter®**

**It is important to inform the patient prior to using the UroDapter about necessary measures:**

1. The patient must not have sexual intercourse within 3 days prior to the treatment.
2. The patient must completely empty the bladder before instillation.
3. Before unpacking the UroDapter, wear disinfected gloves to ensure hygienic care.
4. If you use a pre-filled Luer-Lock or Luer-Slip syringe, unpack it. Otherwise, fill the solution you plan to instill into a Luer-Lock or Luer-Slip syringe.
5. Open the packaging of the UroDapter on the connecting tail end so that the sterility of the parts which contact the body can be maintained. Attach the UroDapter to the syringe.
6. The UroDapter, mounted on the syringe, is now ready for use.

### **Important things therapists/nurses have to know, do, and explain to the**

**patients** The patient should empty their bladder before the demonstration starts.

- a. Explain where the urethral orifice is. If possible, show it to the patient in a mirror.
- b. Examine the exact anatomy of the orifice and the nearby structures (*As shown on slide 19 Tips & Tricks Guide*).
  - Consult with the Tips & Tricks guide for special cases: mobile orifice, too small orifice; slit-formed orifice. (*As shown on slides 41-46 Tips & Tricks Guide*).
  - Explain the findings to the patient. If the anatomy's normal, inform her about it, too.

- c. Demonstrate what proper disinfection is. Elaborate some suitable and easy-to-buy products.
- d. Demonstrate the best way to expose the orifice. Mind the special cases, too.
- e. Explain how to perform the "spooning" movement - driving the UroDapter below and behind the symphysis (*As shown on slide 36 Tips & Tricks Guide*).
- f. For long-term local antibiotics, it is also essential to explain how to perform the self-instillation when a woman is on her period. The patient has to insert a new tampon before the instillation starts. The force applied to the UroDapter when it is being pushed into the orifice should be greater, just as well as the pressure applied during the instillation.

It is best if the therapist shows points c-f first and lets the patient try it next - guiding her hand may be useful, too.

- g. Show how to attach the UroDapter to the syringe.
- h. Perform the instillation, paying attention to all the previous points.
  - Note the best angle - the one with the least resistance felt with the syringe -, and show it to the patient.
  - Mind the speed of pressing the liquid inside, as well.
  - Pay extra attention to any leakage.
  - Explain the final steps below thoroughly.

*Note: if the patient wants to try it right on the spot, a small amount of simple saline fluid (0.9% NaCl) 10ml could be used for this. The instillation can be done with it, and no expensive antibiotics are being wasted if anything goes wrong. Again, guiding her hand may be useful.*

## Instructions

1. Disinfect the urethral orifice and its surrounding 3cm area, along with the inner labia (*As shown on slide 19-20 Tips & Tricks Guide*).
2. While wiping with gauze, if needed, part the labia minora to properly expose the urethral orifice (*As shown on slide 22 Tips & Tricks Guide*).
3. Explain the findings to the patient. If the anatomy's normal, inform her about it as well.
4. Unpack the UroDapter by opening its packaging at the connecting tail of the adapter so that the part which will contact the body remains sterile.
5. Assemble the syringe and attach the UroDapter's connecting tail to it.
6. Insert the URODAPTER® into the urethral orifice and gently push the orifice under the symphysis toward the rectum, then gently drive the syringe with a "spooning" motion under the symphysis. This is crucial, as it allows for the liquid to flow from the syringe through the urethra (*as shown on slides 20 and 36 Tips & Tricks Guide*).
7. Adjust the angle of the syringe so that it is parallel with the urethra. Begin instilling the liquid and adjust the angle as needed - the most optimal angle will cause the least resistance while pressing the plunger of the syringe.
  - As a general rule, for younger patients the optimal angle is a bit "upwards" (the tip of the UroDapter is situated slightly above the connecting tail), whereas for older patients it is a bit "downwards".
8. Perform the instillation at low speed, which usually takes around one minute, though it can vary from patient to patient.
9. The instillation works as the liquid instilled increases intra-urethral pressure and opens the sphincter. It is important to tell the patients to be relaxed: anxiety and fear can

cause the sphincter to constrict and make the instillation painful. Slow down or pause the instillation while the sphincter is constricted; take a few deep breaths, and resume if there is no pain.

10. Some leakage may occur after the instillation. Usually, it is insignificant - only a few drops - and is harmless.
  - If there is any leakage during the instillation, it can be caused by too little or too much pressure. If there is not enough pressure, the sphincter may remain closed. Apply more pressure until the leakage stops.
  - Make sure that the UroDapter has entered the orifice properly and the sealing collar covers the nearby tissues tightly. If not, leakage can occur.
  - If the pressure against the orifice exceeds a certain level, the urethra can bulge (also called kinking) and as the drug solution cannot flow into the bladder, which can result in leakage, too. The solution is to gradually decrease pressure until the leaking abates.
11. After the drug solution has been instilled, remove the adapter. It is recommended to hold the instilled solution back for at least 3 hours, but otherwise the patient is free to do any activity.



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