

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

Male Patients



Tips & Tricks Guide sent together with 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 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.

1. 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.
2. Assemble the syringe and attach the UroDapter’s connecting tail to it - show this to the patient.
3. Examine the exact anatomy of the urethral orifice, the glans and the nearby structures.
 - a. For complicated cases consult the Tips & Tricks Guide (*As shown on slides 26, 27 and 28 Tips & Tricks Guide*).

4. Explain the findings to the patient. If the anatomy's normal, inform him about it, too.
5. Demonstrate what proper disinfection is; Retract the foreskin of the glans (if it is present). The whole penis is to be disinfected, especially the entire glans and the external urethral orifice (*As shown on slide 21 Tips & Tricks Guide*).
6. The penis is to be held in the same way as it is for catheterization: with one hand and straightened with a slight pull. This ensures that the urethra is not being kinked.
7. The syringe with the UroDapter shall be inserted into the first, slightly wider section of the urethra (fossa navicularis). It is worth making the tip of the adapter slippery with a few drops of the drug being instilled. The isolation collar should be lying on the surface of the glans, surrounding the urethral opening.
8. It is important to tell the patient to be fully relaxed for the instillation. Since male patients have double sphincter, the urethral pressure can increase to a high grade, but in relaxed state, the liquid being administered can open the sphincters easily.
9. The instillation itself should be performed slowly and intermittently.
10. After the instillation has ended, approximately 15-18ml of the solution will stay inside the urethra. Before taking away the syringe, press the urethral opening with your thumb and index finger so that the solution cannot flow out.
 - Suck approximately 20ml of air into the same syringe and push it into the urethra. The air can make the fluid enter the bladder; a "buffing" sound can be heard when this happens (*As shown on slides 18, 19 and 20 Tips & Tricks Guide*).
 - A thin layer of the solution still adheres to the surface of the urethra, so that organ will be treated by it, too.
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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