

NHS GGC Primary Care Urology Formulary

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Introduction

The NHS Greater Glasgow and Clyde Urology Formulary Primary Care have been reviewed by the Urology Steering Group on behalf of the Non-Medicines Utilisation Sub Committee of ADTC (NMUS) preferred choices of urology products for patients with urinary incontinence.

Exclusions:

- Containment pads

This formulary complements current guidance available on use of urology products and should be used in conjunction with the [NHSGGC Urinary Catheterisation Adults Clinical Guideline](#). At time of publication, a formulary for Intermittent Self Catheters is under development. Once agreed, a link will be provided.

Assessment and use of all appliances must be undertaken by an appropriately trained healthcare professional, who should “maintain the knowledge and skills you need for safe and effective practice “. (NMC CODE 2018)

Products are listed in [Scottish Drug Tariff](#): Part 3 (Appliances) and Part 5 (Incontinence Appliances)

Key Message and Prescribing Recommendations

Preferred core product choices are included in this formulary, based on patient safety, clinical evidence, availability of products and cost effectiveness.

This Formulary includes products which are within an agreed ceiling cost (noted below). Use of products which are not listed in this formulary but are available via drug tariff and are within the ceiling cost will be considered “total formulary”. Prescribing of these will not have an adverse effect on overall formulary compliance. This will provide a choice and supply of products which support patient centred care.

Any product out with the ceiling cost required to meet patient needs either under specialist advice or for a specific patient condition, will have rationale clearly documented in patient notes. This will prevent switches being made at patient review or at medical reconciliation.

Category	Ceiling cost	Category	Ceiling cost
Urinary catheters	≤ £6.35	Night bags	≤ £1.20
Supra pubic catheters	≤ £6.75	Night bags single use	≤ £0.30
Urosheaths	≤ £1.60	Catheter valves	≤ £2.25
Leg bags	≤ £2.70	Catheter insertion packs	≤ £2.50

For further information, refer to Tables in this formulary, which include guidance on prescribing reasonable volumes of preferred product; reducing variations in practice; with advice and support focused on best practice in use of formulary products; which will provide improved patient outcomes.

It is important to continue to strive to provide the best possible quality of patient care, which is consistent across NHSGGC, therefore any products which the clinician feels should be considered as a preferred choice product choice, can make a request via the NMUS Urology Steering Group or by completion of request form. [HERE](#)

Acute Care Product Choice

The National Urology Framework was updated in early 2025 and has been reviewed by the urology subgroup as part of the formulary review to take into consideration products that may be started in acute and continued in primary care.

Product choices:

- Indwelling catheters are currently Teleflex Rusch Brilliant Aquaflate[®], with water filled balloons. These can continue to be prescribed in primary care, if suitable for patient or changed to an alternative formulary product following patient assessment.
- Patients will be discharged from acute care with 7-day discharge pack (see below). Thereafter ongoing choice of accessories (drainage bags, valves etc.) will be based on this formulary primary care formulary choices.

Seven Day Patient Supply Hospital Discharge Packs

If it is required, a holistic continence assessment should be completed prior to discharge to support the use of any ongoing continence products. The outcome of the assessment should be recorded on the patients' records and relevant discharge paperwork. This includes a clear reason for the insertion of an indwelling catheter, and any follow up/planned review for need of catheterisation or trial without catheter history.

On patient discharge from hospital, there is a requirement to provide a seven-day supply of products to allow time for District Nurses and care home staff to carry out a patient continence assessment review and decide with the patient/carer on an appropriate ongoing care plan. This may include removal of catheter; use of urosheaths or to arrange prescription of ongoing products.

To support ongoing consistent patient care and streamline process for both hospital and community, on discharge from hospital, Great Bear[®] discharge hospital packs are provided to acute wards ordered from the National Distribution Centre (PECOS) and a supply should be retained in wards for this purpose.

Leg bags have cloth backing for patient comfort at home, these cannot be used in acute wards due to infection control guidance.

Contents of Great Bear Discharge Pack:

- Two leg bags
- Ten-night bags
- Fixation device
- One hanger

Product Supply Route in Primary Care

There are two routes to the supply of urology products, and this should be discussed with patients and/or carers to determine their preferred choice:

1. Community Pharmacy (CP): prescriptions can be requested by the patient or the patient's

representative from the GP surgery and dispensed by the chosen community pharmacy. Stock will be delivered within 24 – 48 hours in most instances. Any patient requiring a delivery of their dispensed items should discuss with the pharmacy team. This may incur a charge.

2. Dispensing Appliance Contractors (DAC): prescriptions can be requested from the GP by the patient or the patient's representative and sent to the chosen DAC. Items are in most circumstances delivered directly to the patient's home. Delivery time frames and intervals between deliveries can be agreed with the DAC.

NHS GGC have published a [position statement](#) with regards to management of retrospective prescription requests.

Considerations to make when requesting repeat prescription

Discharge Paperwork / Referral Forms should indicate if the patient's catheter is to be reviewed and when to allow for appropriate stock levels to be ordered by community nursing staff. If this is unclear, a discussion should be had with referrer prior to the ordering of any additional products. Refer to [NHSGGC Urinary Catheterisation Adults Clinical Guideline](#) (link to be updated).

It is the responsibility of caseload holder/clinician to be aware of the cost of products on Scottish Drug Tariff, when prescribing. Whenever possible, if there are no variances between products to opt for lowest cost. This will make best use of resources whilst maintaining quality of patient care.

Clinicians supporting patients at initiation and ongoing use of urology products, who are not prescribers, should ensure that they request reasonable volumes to prevent waste and to choose or request products generically from the preferred options for the general practice to prescribe.

To support safe and cost-effective prescribing to meet individual patient needs, the Prescribing Support Pharmacist in the GP Practice can support clinicians, by identifying patients who require review, through the urology pharmacy implementation guide process. This includes identifying variances in prescribing such as individual patients who are being prescribed consistently very high or low volume of products and non-formulary choices over a period of time.

The Scottish Drug Tariff lists indwelling catheters in single units. Catheters should be prescribed dependent on number of required (See Table one).

Clinician Advice to Patient/Carers

- Advise patients/carers on what reasonable volumes of products are and who to contact if they feel that products/volumes are not meeting their needs, with subsequent review (Table one)
- Recommend patients/carers to order products when they get to a defined threshold quantity to allow sufficient time for delivery.
- Encourage patient/carer to report to their GP practice if they feel that they have excess stock building up or any concern with service delivery to prevent waste.

- Advise patient/carer that all drainable day and night bags must be changed at least every seven days. When utilised with a leg bag, a new single use 2 litre drainage bag should be used overnight and discarded each morning.
- Advise patient/carer leg bags are changed every seven days to reduce the risk of urinary tract infection, and to change more frequently is a waste of resources; and results in greater environment waste.
- For patients on bed rest, a drainable 2 litre drainage bag should be used with catheter stand/hanger. This allows urine to drain into bag and reduces risk of back flow of urine up catheter into bladder.
- Only exception is patients at end of life with oliguria and anuria where a leg drainage bag is more discreet.
- Advise patient/carers they should never reuse, wash urine bags or reconnect them in any care setting.

Patient Safety/Governance

- All continence products excluding containment pads are classified as medical devices and are regulated by the Medical Device Agency (MDA). Anyone may report adverse incidents or problems with products, including patients, carers, or any healthcare professional via the Medicines and Healthcare Products Regulatory Authority (MHRA). www.yccscotland.scot.nhs.uk
 - There is a slight risk of anaphylaxis from use of large doses of anaesthetic gel in patients with cardiac arrhythmias ([link](#)) or chlorhexidine (rare) in susceptible individuals <https://academic.oup.com/bja/article/102/1/65/229283>
 - Insertion of lidocaine gel/chlorhexidine gel should be slow and not one large bolus, to prevent pain and trauma to bladder and urethra NHS GGC Urinary Catheterisation
 - When initiating catheterisation, the smallest size catheter and catheter balloon should be used; ideally size 12ch catheter. Balloon volume should not exceed 10ml. Refer to [NHSGGC Urinary Catheterisation Adults Clinical Guideline](#)
 - The deposition which occurs in catheterised patients is usually chiefly composed of phosphate. If the catheter is to be left for longer periods a 100% silicone catheter is the preferred choice, to minimise risk of blockage (Table 2). (BNF Community Nurse Prescriber Formulary).
- Latex catheters increase risk to the growing number of patients with allergies. Research shows no significant difference in the incidence of bacteriuria comparing latex with silicone catheters.
- Catheter choice is based on patient comfort, ease of insertion and removal and must minimise secondary complications such as tissue inflammation, encrustation and colonisation by micro-organisms. (NHSQIS Best Practice Statement Urinary Catheterisation & Catheter Care).
 - Ensure that there are no contraindications or cautions for all products prior to initiation.

Table One: Product Information and Prescribing Guidance check against category lists

Generic Product descriptor	Frequency of change	Considerations	Prescription requirements (56-day prescribing)
<p>Indwelling urinary urethral catheters long term, nelaton rounded tip, 100% silicone with 5 or 10% glycerine filled balloons. (5ml & 10 ml balloon volume)</p>	<p>Change every 3 to 12 weeks dependent on individual patient management plan</p>	<ul style="list-style-type: none"> • Glycerine gel filled balloons may reduce risk of deflation and spontaneous catheter expulsion. • Glycerine may have opposite effect of water filled balloons, with potential for some diffusion of water from the bladder into balloon. Ensure on removal that balloon is empty. • Integrated balloon provides “true” size of catheter. • LINC catheter pack includes lidocaine/ chlorhexidine gel 	<ul style="list-style-type: none"> • First time catheterisation: prescribe 3 catheters (one for immediate use, two spare for next scheduled change and in event of an unplanned change • Ongoing prescriptions: One catheter by acute script. • Ensure if repeat script that excessive volumes are not prescribed
<p>Indwelling urinary urethral catheters, nelaton rounded tip, 100% silicone with 10ml water filled balloons.</p>	<ul style="list-style-type: none"> • Supra pubic – first change 4 weeks thereafter 4-8 weekly as required. • urethral - change every 3 to 12 weeks dependent on individual patient management plan 	<ul style="list-style-type: none"> • Water filled balloon may result in diffusion of water out of balloon and there can be reduced volume in balloon on removal. • LINC includes lidocaine/ chlorhexidine gel, suitable for catheter lubrication only. • Instillagel® licensed for intra-urethral use and should be used where urethral anaesthesia/ antiseptis is required. • Integrated balloon provides “true” size of catheter 	
<p>Indwelling urinary catheter open ended tip 100% silicone supra pubic and urethral catheterisation</p>	<p>Change every 3 to 12 weeks dependent on individual patient management plan</p>	<ul style="list-style-type: none"> • Supra pubic will require minimum of size 16ch. • Urethral route use smallest catheter size possible (12ch for male and females) • Open ended catheters 	

water filled balloons:		<p>may be considered for patients with frequent catheter blockage.</p> <ul style="list-style-type: none"> • Silicone catheters have larger lumen and may be less likely to block 	
Sterile Catheterisation Procedure Insertion Pack	One pack required per procedure (Two-layer system, layer one insertion kit and layer two insertion kit)	An aseptic non touch technique, wearing sterile gloves is used during the initial insertion of the catheter as well as during subsequent changes.	Pack required for procedure (box 10) Use sterile 0.9% sodium chloride solution for irrigation/cleansing, insertion, lubricating gel, catheter, water to inflate catheter balloon prescribed separately.
Sterile Lubricating Lidocaine hydrochloride 2% and Chlorhexidine gluconate solution 0.25% gel for catheter insertion procedure.	<p>Presentation sterile syringe gel:</p> <ul style="list-style-type: none"> • 6ml (female) • 11ml (male) 	<ul style="list-style-type: none"> • Ensure gel is not “injected” in one fast bolus. This reduces efficacy of gel and can cause trauma to urethra and bladder. • LINC includes lidocaine/ chlorhexidine gel, suitable for catheter lubrication only. 	<ul style="list-style-type: none"> • Prior to use be aware of the contraindications for use and observations required for the use of lidocaine • Administer 5 minutes prior to catheter insertion. • Instillagel® licensed for intra-urethral use and should be used where urethral anaesthesia/ antiseptics is required.
Leg drainage bags Sterile	<p>Replace bag.</p> <ul style="list-style-type: none"> • Every 7 days • At routine catheter change 	<ul style="list-style-type: none"> • Ensure patient are aware of wear time of bags. • Patients on complete bed rest and not mobilizing should not require leg drainage bags. 	<ul style="list-style-type: none"> • 1 box of 10 bags (sufficient for up to 10 weeks) • Minimum one box and maximum two boxes required. • Box includes one pair of non- sterile gloves and 10 soft elasticated cotton Velcro retention straps
Night drainage bags Nonsterile	<ul style="list-style-type: none"> • Single use • Change bag daily 	<ul style="list-style-type: none"> • Bags attached to leg bags should be closed units (infection control guidance) 	<ul style="list-style-type: none"> • 6 Boxes of 10 (60 Bags) • Available in drainable and non-drainable sterile bags
Night drainage	<ul style="list-style-type: none"> • Change every 5- 	<ul style="list-style-type: none"> • Open ended bags can be 	<ul style="list-style-type: none"> • 1 box of 10

bag sterile	7 days.	used for patients on bed rest and changed every 7 days. <ul style="list-style-type: none"> • Suitable for bed bound/ immobile when not requiring leg bag. 	
Catheter valves 4 cm: one size or three step connectors	Replace valve: Every 7 days at routine bag change	Consider when patient has catheter inserted to maintain bladder tone whenever possible	2 boxes of 5
Penile sheaths: self-adhesive	Change every one to two days: Some patients may prefer to leave in situ for longer periods. 1 box contains 30 sheaths	<ul style="list-style-type: none"> • To ensure correct size use manufacturer guide • Skin integrity should be regularly monitored. • Leg bag required use. T-Tap or Lever Tap as listed above 	Sheaths can be changed on a one-to-two-day basis to relieve pressure and allow for skin hygiene. 2 boxes (60 sheaths) max

Products

Categories of products:

- A. Long term indwelling urethral catheters with water filled balloons.
- B. Long term indwelling supra pubic catheters with water filled balloons.
- C. Long term indwelling catheters with glycerine filled balloons.
- D. Lidocaine and Chlorhexidine gel for catheter insertion
- E. Procedure pack for catheter insertion and removal
- F. Catheter valves
- G. Fixation devices
- H. Drainage bags: leg
- I. Drainage bags: night
- J. Urosheaths
- K. Catheter Maintenance Solutions

NB: Formulary Product Preferred Prescribing Choices.

- All catheters and bags connections are universal and compatible if different company range is used.
- Whenever possible attempts have been made to match catheters, valves and drainage bags.
- Catheter sizes Standard/Male 42cm & Female 29cm
- Glycerine filled catheter balloons are available in 5ml and 10 ml balloon sizes.

A. Category: Long Term Indwelling Urethral Catheters

Water filled balloons: 5ml and 10ml balloons available

1. SpiritCare® All Silicone Urethral Catheters (Spirit HealthCare); 10 ml water filled balloon Drug Tariff each £4.50 (available from AAH)

Length	Pack size	Size (CH)	Order Code	PIP Code
Female	Single unit	12	SHE-CC038	418-6615
Female	Single unit	14	SHE-CC039	418-6623
Female	Single unit	16	SHE-CC040	418-6631
Male	Single unit	12	SHE-CC034	418-6599
Male	Single unit	14	SHE-CC035	418-6599
Male	Single unit	16	SHE-CC036	418-6581

2. Prosys® All-Silicone Foley Catheter (Clinisupplies Ltd) 10ml water filled balloon round tipped Drug Tariff each: £6.18

Length	Pack size	Size (CH)	Order Code	PIP Code
Female	Single unit	12	PCF12F10	386-0624
Female	Single unit	14	PCF14F10	386-0558
Female	Single unit	16	PCF16F10	386-0608
Male	Single unit	12	PCF12M10	386-0616
Male	Single unit	14	PCF14M10	386-0582
Male	Single unit	16	PCF16M10	386-0574

3. Teleflex® Round Tip – Rusch Brilliant Aquaflate			Drug Tariff each: £6.31	
Length	Pack size	Size (CH)	Order Code	PIP Code
Standard (M/F)	Single unit	12	08501205G	3834280
Standard (M/F)	Single unit	14	08501405G	3834298
Standard (M/F)	Single unit	16	08501610G	3834306
Female	Single unit	12	085012051G	3834322
Female	Single unit	14	085014051G	3834330
Female	Single unit	16	085016101G	3834348

B. Category: Long Term Indwelling Urethral Catheters. 5% and 10% Glycerine filled balloons: sizes 5ml and 10 ml volume balloons

1. LINC® urethral catheter with 5% glycerine filled balloon- 5ml balloon nelaton round tipped (LINC Medical) NB do not use supplied Lidocaine/chlorhexidine gel; Syringes and gloves are included				
			Drug Tariff each: £6.08	
Length	Pack size	Size (CH)	Order Code	PIP Code
Female	Single unit	12	08501205G	3834280
Female	Single unit	14	08501405G	3834298
Female	Single unit	16	08501610G	3834306
Male	Single unit	12	085012051G	3834322
Male	Single unit	14	085014051G	3834330
Male	Single unit	16	085016101G	3834348

2. Teleflex® Brilliant Aquaflate silicone urethral nelaton tipped (Bellcraig Medical) with 10% glycerine 10mlfilled balloon				
			Drug Tariff £6.31	
Length	Pack size	Size (CH)	Order code	PIP Code
Standard	Single unit	12	0850081-000120	4067674
Standard	Single unit	14	850081-000140	4066632
Standard	Single unit	16	08501610G	4067724

C. Category: Long-Term Indwelling Suprapubic Catheters

Also licensed for urethral use. Water filled 10ml balloons

1. Prosys® open <u>tipped</u> supra pubic catheter. 10ml water filled balloon				
Drug Tariff each £5.79				
Length	Pack size	Catheter size	Order code	PIP code
Male	Single pack	12	PCF12M10E	419-0674
Male	Single pack	14	PCF14M10E	419-0682
Male	Single pack	16	PCF16M10E	419-0690
Male	Single pack	18	PCF18M10E	419-1086

2. Teleflex® Brilliant Aquaflate All-Silicone with sterile water filled syringe for balloon inflation and empty syringe for balloon deflation male. 10ml water filled balloon Drug Tariff each £6.25

Length	Pack size	Catheter size (CH)	Order code	PIP code
Male	Single pack	12	DA310112	285-6227
Male	Single pack	14	DA310114	285-6235
Male	Single pack	16	DA310116	285-6243
Male	Single pack	18	DA310118	285-6250

D. Category: Lidocaine 2% and chlorhexidine Gluconate 0.05% Gel for catheter insertion

Product	Drug tariff price/6 ml volume	Drug tariff price/11ml volume
Instillagel®	1 x 6ml £1.05	1 x 11ml £1.10

E. Category: Procedure pack for catheter insertion and removal

1. Cath-It® catheterisation Pack Richardson Healthcare		Drug Tariff Price each
		£1.98
Sizes	Order Code	PIP Code
Small/medium gloves	908410	370-1034
Medium/large gloves	908420	370-1042
Large/extra-large gloves	908430	379-6935

F. Category: Catheter Valves (box 5) All compatible with other devices

Catheter valves should be considered first-line choice, as their use maintains bladder control and function, and reduces risks associated with long-term urinary catheters. Catheter valves should be used with caution in patients who have cognitive decline, renal impairment, reduced mobility or poor manual dexterity. Carer and family may be able to support safe catheter valve use if this is the patient choice.

Catheter valves

Description	Descriptor	Order Code	PIP Code	Drug tariff price
Flexicare®	Three stepped connector	00-0060	3002300	£11.01 pack (£2.20 each)
Care Flo® (L.I.N.C medical)	One size lever tap. Smooth connector	CF1	3441524	£7.88 pack (£1.56 each)
Prosys® (Clinisupplies)	Lever tap. Smooth connector	PCV3942	386-3800	£10.01 (£2.00 each)
Teleflex® (Bellcraig Medical)	Lever tap. Smooth connector	850560-000000	383-6657	£2.03 each

G. Accessories: Fixation devices for indwelling catheters: clips, straps and sleeves

Fixation Devices for foley catheters: clips				
	Pack size/length	Order code	Pip code	Drug Tariff cost
1. UgoFix® Gentle revolving catheter clip (Optimum Medical) silicone, 7-day continuous use	1 x 5	3004	394-9054	£13.17 (£2.63 each)
Fixation devices for foley catheter: straps				
1. FixStrip® (L.I.N.C)	1 x 4 /100cm	FIXSTRIP	4049938	£10.33 (£2.58 each)
2. Ugo Fix® Catheter strap for urethral and supra pubic catheters (Optimum Medical)	1 x 5 45 cm 80cm 130cm Extra Long	3002 3003 3009 3010	393-3389 393-3397 393-3405 393-3413	£13.33 (£2.66) £13.33 (£2.66) £14.71 (£2.94) £17.91 (£3.58) £20.04 (£4.08)
3. Simpla G® strap catheter retaining strap (Coloplast)	1 x 5 50cm	380812	326421	£15.48 (£3.10 each)
Fixation Device sleeve to support leg drainage bags as an alternative to leg straps and clips for patients with fragile skin or patient preference.				
1. Ugo fix® sleeve leg bag holder	1 x 5 Small 24-39cm Medium 36-55cm Large 40-70cm Extra-large 65-90cm Extra-large 75-105cm	3005 3006 3007 3008 3027	394-0178 394-0160 394-0152 394-0145 409-6699	£7.76 (£1.55 each) £7.76 £7.76 £7.76 £8.64 (£1.73)
2. Liberty® Leg bag sleeve	1x4 25cm-40cm 26cm-50cm 45cm-65cm	PLS3881 PLS3904 PLS3928	3824711 3824729 3824737	

NB drainage bags are provided with reusable Velcro straps.

The above noted additional accessory fixation devices are intended to reduce risk of traction on catheters and patient comfort. In all instances best practice is that patients/carers must be advised to empty bag when one third to half full. This will reduce risk of urinary tract infection, displacement of catheter and discomfort.

Refer to [NHSGGC Urinary Catheterisation Adults Clinical Guideline](#) for best practice

H. Category: Drainage bags: Sterile leg bags. 10 bags per box. All choices contain latex free gloves and soft elasticised Velcro straps.

1. Spirit® Healthcare: sterile drainage leg bag Drug Tariff £1.85				
Leg bag volume	Tube length	Tap	Order code	PIP Code
350ml	Short 10cm	T valve	SH-CC001	418-9981
350ml	Long 30cm	T valve	SH-CC002	419-0047
500ml	Short 10cm	T valve	SH-CC003	418-9999
500ml	Long 30cm	T valve	SH-CC004	419-0054
750ml	Short 10cm	T valve	SH-CC005	418-0005
750ml	Long 30cm	T valve	SH-CC006	419-0062

2. LINC® drainage leg bags Drug Tariff £2.15-£2.31 each				
Leg bag volume	Tube length	Tap	Order code	PIP Code
350ml	Direct inlet tube	T valve	LM350SD-T	3384997
350ml	10cm inlet tube	T valve	LM350MD-T	3385002
500ml	Direct inlet tube	Lever	LM500SD-L	3712114
500ml	10cm inlet tube	Lever	LM500MD-L	3712213
500ml	Direct inlet tube	T tap	LM500SD-T	3383726
500ml	10cm inlet tube	T tap	LM500MD-T	3385077
500ml	30cm inlet tube	T tap	LM500LD-T	3385044
500ml	30cm inlet tube	Lever	LM500LD-L	3783891
500ml	Adjustable inlet tube	T tap	LM500AD-T	3385051
500ml	Adjustable inlet tube	Lever	LM500SD-L	3811643
750ml	Adjustable inlet tube	Lever	LM750AD-L	3834363
750ml	Direct inlet tube	T tap	LM750SD-T	3383692

3. Prosys® drainage leg bags (CliniSupplies Ltd) Drug Tariff £2.75 - £2.93 each				
Leg bag volume	Tube length	Tap	Order code	PIP Code
350ml	Short tube	Slide action	P350S	299-6817
350ml	Long tube	Slide action	P350L	299-6767
500ml	Short tube	Slide action	P500S	299-6825
500ml	Long tube	Slide action	P500L+	299-6791
500ml	Short tube	Lever	P500S-LT	351-1474
500ml	Long tube	Lever	P500L-LT	351-1466
750ml	Short tube	Slide action	P750S	299-6833
750ml	Long tube	Slide action	P750L	299-6809

**I. Category: Drainage bags sterile single use: tear function or non-returnable tap
10 leg bags per box**

1. Spiritcare® night drainage bag with T valve**Drug tariff £2.65 (26p each)**

Night bag volume	Tube length	Tap/tear function	Order code	PIP code
2 litres	130cm	T tap	SH-CC022	421-3161

2. Prosys® night drainage bag – Clinisupplies Ltd**Drug tariff £3.18 (32p each) and £2.14 (21p each)**

Night bag volume	Tube length	Tap/tear function	Order code	PIP code
2 litres	90cm	Slide tap	PSU2	PSU2
2 litres	90cm	Tear function	P2	P2

3. LINC- Flo® Medical Ltd night drainage bags Drug tariff £2.21 (22p each)

Night bag volume	Tube length	Tap/tear function	Order code	PIP Code
2 litres	120cm	Twist off tube	LM2LHJ	3054780

J. Category: Urosheaths**1. Clinisure® Box 30****Drug Tariff £43.70**

Size	Diameter	Product code	PIP Code
Standard	24mm	CS24S	419-1623
	28mm	CS28S	419-1631
	31mm	CS31S	419-1649
	35mm	CS35S	419-1656
	40mm	CS40S	419-1664
Wide	24mm	CS24W	419-1672
	28mm	CS28W	419-1680
	31mm	CS31W	419-1698
	35mm	CS35W	419-1706
	40mm	CS40W	419-1714
Pop on	24mm	CS24P	419-1772
	28mm	CS28P	419-1730
	31mm	CS31P	419-1748
	35mm	CS35P	419-1755
	40mm	CS40P	419-1763

2.1 P-Sure® sheath, Manfred Sauer Ltd Box 30**Drug Tariff £52.19**

Size	Diameter	Product code	PIP Code
Small	20mm	97.20	290.2856
Small	22mm	97.22	290.2864

Small	24mm	97.24	290.2872
Medium	26mm	97.26	290.2880
Medium	28mm	97.28	290.2898
Medium	30mm	97.30	290.2906
Large	32mm	97.32	290.2914
Large	35mm	97.35	290.2922
Large	37mm	97.37	290.2930
Extra Large	40mm	97.40	290.2948

2.2 B-Sure® sheath, Manfred Sauer Ltd Box 30			Drug Tariff £55.35
Size	Diameter	Product code	PIP Code
Small	20mm	B20	401-8529
Small	22mm	B22	401-8537
Small	24mm	B24	401-8545
Medium	26mm	B26	401-8552
Medium	28mm	B28	401-8560
Medium	30mm	B30	401-8578
Large	32mm	B32	401-8586
Large	35mm	B35	401-8586

3. Conveen® (Coloplast) Box 30			Drug Tariff £57.30
Size	Diameter	Product code	PIP Code
Shorter length	21mm	22121	3209731
	25mm	22125	3209582
	30mm	22130	3209491
	35mm	22135	3209921
Standard length	25mm	22025	3209889
	28mm	22028	3999232
	30mm	22030	3209855
	35mm	22035	3209798
	40mm	22040	3209731

K: Category: Catheter Maintenance Solutions

Please refer to Appendix 1 for further information on clinical use of these products. **These products must be prescribed.**

Review group

Elaine Paton	Senior Prescribing Adviser, Pharmacy Services, Chair (NHSGGC)
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Appendix 1: Catheter Maintenance Solutions

Current guidelines

Catheter Maintenance Solutions (CMS) - Evidence

- There is currently inconclusive evidence to conclude if catheter maintenance solutions provide benefit or harm.
- Possible harmful side effects can include bleeding, changes in blood pressure, bladder spasms, and CAUTI.
- CMS should only be utilised, as planned care, to extend the life of urinary catheters by removing debris, tissue, or encrustation.

CMS - Education and Training

- CMS is carried out by staff deemed competent in catheter care.
- There is no formal training for CMS administration, but staff undertaking it must follow the manufacturer's guidelines. Support for staff unfamiliar with the procedure is available from senior staff confident with CMS administration.

CMS - Risk assessment

- The use of catheter maintenance solutions should be avoided unless clinically indicated and recommended by the patient's urologist, urology nurse specialist, or senior clinician with advanced clinical knowledge.
- A rigorous risk assessment must be conducted to ensure safe practice, taking into account the benefits, risks, and alternatives to treatment for each patient.
- Risks to consider (but not exhaustive) include allergies, history of sensitivities or adverse reactions, risk of CAUTI, haemorrhage, or advanced renal disease. It is crucial to consider less invasive approaches first, to prevent urinary blockage.
- Refer to Appendix No 6 for urinary catheter problem-solving guide options.

CMS should NOT be used in patients with:

- Spinal injury, due to the high risk of autonomic dysreflexia (a potentially life-threatening condition). To mitigate this risk, healthcare professionals should promptly change catheters to ensure ongoing patient safety.
- Unscheduled care episodes to unblock catheters.
- CAUTI
- Fistula
- Haematuria
- Urological cancer
- Recent radiotherapy to urinary or pelvic regions.
- Urological surgery

CMS - care planning

It is crucial to have a clear and concise written care plan that:

- Justifies why the patient requires administration of CMS.
- Is prescriptive in the care.
 - As a prescription-only medication, catheter maintenance solutions should be prescribed within a direction to administer chart or Kardex or HEPMA.
 - The prescription should be current and indicate the route of administration, volume, and frequency.
- Outlines the intended outcomes of the treatment.
- Establish a timeline for evaluation (A two-week review should be conducted to evaluate the effectiveness of the care).

CMS - Administration

Catheter maintenance solutions are administered as a sterile procedure.

They should be used according to manufacturer guidelines.

Currently, there are three main brands and the instructions for administering each differ (see below links):

1. [Uro-Tainer® Twin® \(bbraun.co.uk\)](http://bbraun.co.uk)
2. [Optiflo®](#)
3. [uroflush®_PIL.pdf](#)

CMS - recommendations for administration

- Sequential small volumes are more effective than a larger single volume.
- Twin Urotainer may be more cost-effective and reduces the breaching of the closed system when administered at the same time as routine drainage bag changes.
- The solution should be at room temperature.
- As there is a high risk of infection, each time the closed drainage system is breached, clinicians should:
 - Aim to perform CMS once weekly at the same time as routine drainage bag change. Drainage bags should be changed each time CMS are administered.
 - Where CMS is required to be administered more frequently, consider using a closed valve system to prevent unnecessary breakage of a closed drainage system: [Bladder Infusion Kit \(BIK\) - Linc Medical \(linc-medical.co.uk\)](http://linc-medical.co.uk)
- Avoid force when administering CMS to avoid tissue trauma.

CMS - Indications for use:

The use is based on an individual assessment, and several considerations must be made before use.

Solution	Advantages	Disadvantages	Ph
Solution G (3.32% citric acid) (e.g. Uro-Tainer Twin SUBY G®, OPTIFLO G®)	<ul style="list-style-type: none"> • Can potentially dissolve crystals or encrustations • May be recommended if the patient's catheter blocks on a regular basis 	<ul style="list-style-type: none"> • Increased risks of infection due to the break in closed system • Irritation to the bladder mucosa • Possible discomfort 	Encrustation identified and Ph > 6.8
Solution R (6% citric acid) (e.g. Uro-Tainer Twin Solution R®, Optiflo R®)	<ul style="list-style-type: none"> • May dissolve persistent encrustation • Indicated for dissolving crystals on encrusted catheter tips immediately prior to catheter removal to aid removal and reduce the risk of damage to the urethra 	<ul style="list-style-type: none"> • Increased risks of infection due to the break in closed system • Irritation to the bladder mucosa • Possible discomfort 	Persistent blocker and Ph > 7.7
Solution S (saline) (e.g. UroTainer® NaCl, Optiflo S)	<ul style="list-style-type: none"> • Less potential trauma caused to the bladder mucosa than solution G or R • Can potentially dissolve small blood clots or mucous 	<ul style="list-style-type: none"> • Increased risk of infection due to break in closed system • Can potentially make blockages worse if used for encrustation 	Mechanical flush (Not recommended).
Polyhexanide 0.02%	On the recommendation of UROLOGY Specialist only.	<ul style="list-style-type: none"> • is potentially active against gram - and gram + bacteria, fungi and yeast including MRSA, Pseudomonas aeruginosa, VRE etc. 	Mechanical flush, together with bacterial decolonisation for suprapubic and indwelling urethral catheters.

Tables from British Journal of Nursing: Kelly Thomas (Feb 2020. Vol 25 No. 2) Amended with Braun pH guidance / B Braun