



# SWIT-PCa Guide to Foley Catheter Care After Prostatectomy

*A Patient & Caregiver Handbook*

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**About this guide:** This guide is intended to help patients and caregivers feel more confident managing Foley catheter care at home after prostatectomy. It is designed to complement - not replace - the instructions provided by your surgeon or healthcare team.

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**Website: [www.switpca.org](http://www.switpca.org)**

## Dedication

**Dedicated to every patient, caregiver, and family whose lives have been touched by prostate cancer.**

May this guide provide practical knowledge, confidence, comfort, and hope throughout every stage of diagnosis, treatment, recovery, and survivorship.

**Because no one should have to face prostate cancer alone.**

*With compassion,*

*Dr. Ann Plohal, PhD, RN, ACNS-BC, CRNI*

*Founder & Executive Director*

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## How to use this guide

- Read the guide before surgery if possible.
- Keep the phone-number page handy during the catheter period.
- Follow your surgeon's instructions first if they differ from this guide.
- Use the Top 10 page as a quick caregiver checklist.

## Keep These Numbers Handy

Surgeon office number	
After-hours number	
Hospital/surgery center	
Preferred pharmacy	
Follow-up appointment	

**SWIT-PCa Tip:** Save your surgeon's office number and after-hours number in your phone before surgery. Many caregivers label the contact as SURGEON so it is easy to find quickly.

**IMPORTANT:** Call your healthcare team if something does not seem right. This guide lists common concerns, but it is not a complete list.

# 1. Understanding Your Foley Catheter

A Foley catheter continuously drains urine from the bladder while the surgical connection between the bladder and urethra heals after prostatectomy. Most patients keep the catheter for about 7-14 days, although timing varies by surgeon.

## What is usually normal?

- Urine may be clear yellow, pale pink, or slightly blood-tinged.
- Some leakage around the catheter can occur during bladder spasms, coughing, sneezing, or bowel movements.
- Mild discomfort at the insertion site can happen, especially with movement.
- Bladder spasms can feel like cramping, pressure, or a strong urge to urinate.

## What is not normal?

- No urine draining into the bag.
- Severe bladder or abdominal pain.
- Catheter falls out or is accidentally pulled.
- Urine becomes dark red, looks like ketchup, or contains large clots.
- Fever of 100.4°F (38°C) or higher, or symptoms that worsen rather than improve.

## 2. Before You Leave the Hospital

Before discharge, ask your nurse or healthcare team to show you and your caregiver how to manage the catheter, leg bag, night drainage bag, and securement device.

### Ask for supplies and instructions

- Leg bag and night drainage bag
- Securement device or extra straps
- Instructions for emptying the drainage bag
- Written surgeon instructions
- Medication instructions
- Catheter removal appointment
- Office and after-hours phone numbers

### Helpful supplies to have at home

- 3-4 washable waterproof pads
- Supportive briefs
- Side-snap pants, loose sweatpants, or athletic shorts
- Slip-on shoes
- Stool softener or Miralax® if recommended
- Gas-X® if allowed by your healthcare team
- Antibiotic ointment such as Neosporin® or Neosporin with Lidocaine® only if approved by your surgeon

### 3. Daily Catheter and Perineal Care

- Wash your hands before and after catheter care.
- Clean around the catheter insertion site daily with mild soap and water.
- Rinse and pat dry; do not scrub.
- Secure the catheter to prevent pulling.
- Change into clean underwear and clothing as needed.

**SWIT-PCa Comfort Tip:** If the catheter causes irritation where it enters the penis, ask your surgeon whether applying a small amount of antibiotic ointment (such as Neosporin®) around the catheter may help improve comfort. Apply only around the outside of the catheter where it enters the penis. Do not place ointment inside the urethra, and always follow your surgeon's recommendations.

**Perineal and Rectal Hygiene:** Daily hygiene and cleaning after bowel movements is usually sufficient for most patients. Use unscented wipes if desired, wipe front to back, and avoid aggressive scrubbing or products that cause irritation.

## Illustration: Daily catheter and perineal care

# 1 HAND WASHING & CATHETER CLEANING

### 1 WASH YOUR HANDS



Wash hands with soap and water before and after catheter care.

### 2 CLEAN AROUND THE CATHETER



Use mild soap and warm water. Clean around the catheter where it enters the body.

### 3 CLEAN AWAY FROM THE BODY



Wipe from the insertion site **DOWNWARD** and **AWAY** from the body. Do not wipe toward the urethra.

### 4 RINSE & PAT DRY



Rinse well with warm water and pat the area dry with a clean towel. Do not rub.

### PERINEAL & RECTAL HYGIENE



Keep the perineal and rectal area clean for comfort and to help prevent infection.

- Daily hygiene is usually sufficient for most patients.
- Clean after bowel movements if the area becomes soiled.
- Use unscented wipes if desired.
- Always wipe front to back.
- Avoid harsh soaps or scrubbing.

### 5 SECURE TO THIGH



Secure the catheter with a stabilization device to prevent pulling and irritation. Leave enough slack for movement.

## 4. Secure the Foley Catheter

Proper securement helps prevent pulling, tension, urethral irritation, and accidental removal. The catheter should be secured to the thigh using the stabilization device provided by your healthcare team.

- Secure the catheter using the stabilization device.
- Leave enough slack for comfort and movement.
- Keep the catheter connected to the drainage tubing and drainage bag.
- Keep tubing free of kinks.
- Keep the drainage bag below bladder level.

### Do Not

- Do not pull or tug on the catheter.
- Do not allow kinks in the tubing.
- Do not cut or remove the pigtail/capped end.
- Do not allow the drainage bag to rise above bladder level.

**SWIT-PCa Tip:** Before standing up, pause and check: catheter secured, tubing free of kinks, and drainage bag below bladder level. A secure catheter is often a more comfortable catheter.

## 5 Secure the Catheter

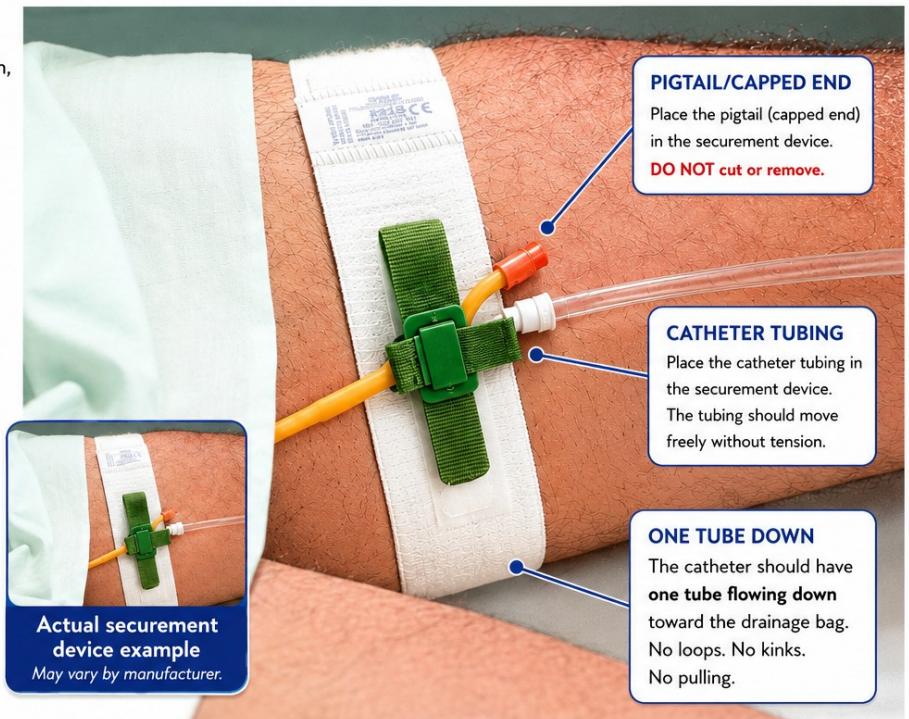
Proper securement prevents pulling, tension, and urethral injury.

- 1** Clean the skin with soap and water. Allow skin to dry completely.
- 2** Apply the securement device to clean, dry skin on the upper thigh.
- 3** Place the catheter tubing and the pigtail (capped end) into the securement device as shown.
- 4** Make sure the catheter tubing moves freely without tension.
- 5** The catheter should have **one tube flowing down toward the drainage bag.** No loops, kinks, or pulling.



### SWIT-PCa Tip

The securement device should be snug, not tight. You should be able to easily slide one finger under the strap. Never secure to clothing.



### IMPORTANT

A well-secured catheter helps prevent pulling, urethral injury, and accidental removal.



## 5. Drainage Bag Safety and Positioning

Always keep the drainage bag below the level of the bladder. This helps urine drain properly and reduces the risk of urine flowing backward into the tubing.

- Option A: Hang the night drainage bag from the bed frame if available.
- Option B: Place the night drainage bag inside a clean bucket beside the bed.
- Daytime: Use a leg bag if recommended by your healthcare team.
- Wash hands before and after handling or emptying the drainage bag.
- Empty the bag when it is 1/2 to 2/3 full or as directed.

**IMPORTANT:** Always make sure the drainage bag clamp is fully closed after emptying the bag. Before standing up, check that the clamp is closed, the drainage spout is secured, and the bag remains below bladder level.

**SWIT-PCa Tip:** Some patients prefer hanging the drainage bag from the bed frame, while others find placing the bag in a clean bucket beside the bed provides added stability and helps prevent accidental tipping or pulling.

### 4 DRAINAGE BAG SAFETY AND POSITIONING

Empty your drainage bag when it is 1/2 to 2/3 full or as directed by your healthcare team.

**OPTION A** Night drainage bag hanging from bed frame



**OPTION B** Night drainage bag in a clean bucket



**DAYTIME** Leg bag worn on the thigh



Empty your leg bag when it is 1/2 to 2/3 full or as directed by your healthcare team.



**WASH YOUR HANDS**

Always wash your hands with soap and water before and after emptying your drainage bag.



**ALWAYS** keep the drainage bag below the level of your bladder.

This helps prevent urine from flowing back and reduces the risk of infection.



**IMPORTANT:** After emptying, make sure the drainage bag clamp is fully closed. Check that the drainage spout is secured and the bag remains below bladder level.

## 6. Preventing Constipation

Constipation is one of the most common challenges after prostatectomy. Anesthesia, pain medication, decreased activity, and changes in eating habits can slow bowel function. Preventing constipation is easier than treating it after it develops.

### Ask Your Surgeon About a Bowel Regimen

Some surgeons recommend starting a bowel regimen 2-3 days before surgery. This may include a daily stool softener, Miralax® (polyethylene glycol), or another medication recommended by your healthcare team.

### Hydration and Food Choices

- Water or decaffeinated beverages
- Milk or clear broth
- Cranberry, cranberry-grape, or cranberry-pomegranate juice
- Oatmeal, fruits, vegetables, and whole grains
- Prunes or prune juice if tolerated

**SWIT-PCa Tip:** Many patients find cranberry juice works well for mixing Miralax® while helping maintain fluid intake. Do not wait until you are constipated - ask your surgeon about prevention before surgery.

### Walking and Gas

Short, frequent walks help stimulate bowel function and may reduce gas discomfort after robotic surgery. Many patients also find Gas-X® helpful during the first few days after surgery if allowed by their healthcare team.

## 7. Common Problems and Comfort Tips

### Bladder spasms

Bladder spasms can feel like cramping, pressure, a strong urge to urinate, or leakage around the catheter. They are common while the catheter is in place and usually improve after catheter removal. Your surgeon may prescribe medication to reduce bladder spasms.

### Leakage around the catheter

A small amount of leakage may occur during bladder spasms, bowel movements, straining, coughing, sneezing, or position changes. Leakage can also occur if the catheter is pulling or not secured properly.

- Avoid constipation.
- Stay hydrated unless instructed to limit fluids.
- Use stool softeners or Miralax® if recommended.
- Do not strain during bowel movements.
- Keep the catheter secured to your thigh.

### Clothing tips

- Supportive briefs often reduce catheter movement and improve comfort while walking.
- Side-snap athletic pants make catheter management easier.
- Loose sweatpants, athletic shorts, and slip-on shoes can help during the catheter period.

**SWIT-PCa Tip:** Many patients notice leakage during bowel movements, especially when pushing hard. Preventing constipation often improves comfort and reduces leakage.

## 8. When Should I Call My Surgeon?

Contact your healthcare team if any of these occur. This is not a complete list - if something does not seem right or you are concerned, call your surgical team.

- The catheter stops draining urine.
- Severe bladder, abdominal, or pelvic pain develops.
- The catheter falls out or is accidentally pulled.
- Urine becomes dark red, looks like ketchup, or contains large blood clots.
- Fever reaches 100.4°F (38°C) or higher.
- Symptoms worsen rather than improve.
- You are unsure what to do.

**IMPORTANT:** If the catheter falls out, do not try to reinsert it yourself. Call your surgeon or seek urgent medical guidance right away.

### Important numbers

Surgeon office number: \_\_\_\_\_

After-hours number: \_\_\_\_\_

Hospital/surgery center: \_\_\_\_\_

## Top 10 Things Caregivers Wish They Knew Before Surgery

- 1. Prevent constipation before it starts.** Ask your surgeon if you should begin a bowel regimen 2-3 days before surgery. Many patients find stool softeners, Miralax®, fluids, walking, and Gas-X® helpful if approved by the healthcare team.
- 2. Ask about Neosporin® (with or without Lidocaine) for catheter comfort.** If the catheter causes irritation where it enters the penis, ask your surgeon whether applying a small amount of antibiotic ointment around the outside of the catheter may improve comfort. Never place ointment inside the urethra.
- 3. Buy 3-4 washable waterproof pads.** They help protect the bed, recliner, bathroom floor, and favorite chair from unexpected catheter leaks. Having several makes laundry easier.
- 4. Wear supportive briefs instead of loose boxers.** Supportive underwear often reduces catheter movement, making walking and daily activities more comfortable.
- 5. Walking is one of the best medicines.** Short, frequent walks help improve circulation, stimulate bowel function, reduce gas discomfort, and support recovery.
- 6. Leakage during bowel movements is common.** Small amounts of leakage can happen when pushing, coughing, sneezing, or during bladder spasms. Preventing constipation often helps reduce leakage.
- 7. Empty the drainage bag before it gets too full.** A lighter drainage bag is more comfortable and places less tension on the catheter. After emptying, double-check that the clamp is completely closed.
- 8. Save your surgeon's phone number before surgery.** Store both the office and after-hours numbers in your phone so they are easy to find if you have questions or concerns.
- 9. Expect recovery to have good days and bad days.** Energy, comfort, and bladder symptoms may vary from day to day. Gradual improvement is the goal.
- 10. You do not have to be perfect to be a great caregiver.** Being present, encouraging fluids and walking, helping with medications, and offering reassurance are often the most valuable things you can do.

## About the Author

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Dr. Ann Plohal is a registered nurse with advanced clinical expertise in infusion therapy, vascular access, patient safety, and patient education. This initiative was inspired by her family's own experience with prostate cancer and our commitment to helping others facing similar challenges. This guide was developed using clinical expertise, current best practices, and practical patient and caregiver experience to help individuals undergoing prostatectomy feel more confident managing Foley catheter care at home.

## About SWIT-PCa

The Southwest Institute for Infusion Therapy and Cancer Care (SWIT-PCa) is dedicated to empowering patients, caregivers, and healthcare professionals through practical education, advocacy, and evidence-informed resources. Our goal is to make complex medical information easier to understand while helping patients and families feel more confident throughout diagnosis, treatment, recovery, and survivorship.

## Disclaimer

This guide is intended for educational purposes only and does not replace the advice, diagnosis, treatment, or instructions provided by your surgeon or healthcare team. Always follow the specific recommendations provided by your healthcare providers. If you have urgent symptoms or concerns, contact your healthcare team or seek emergency care.

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