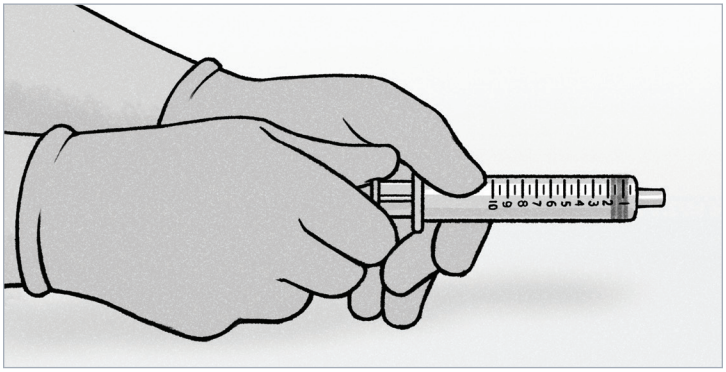
U
Urological Solution

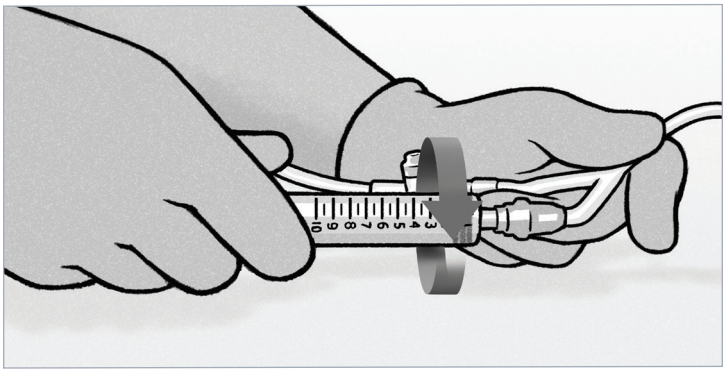
Proper techniques and best practice guidance

Deflating the balloon of an indwelling urinary catheter (IUC)

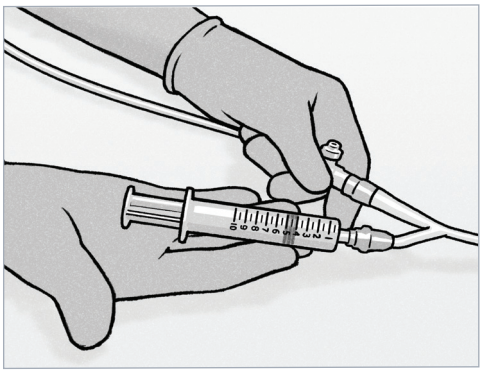
MEDLINE Infection Prevention

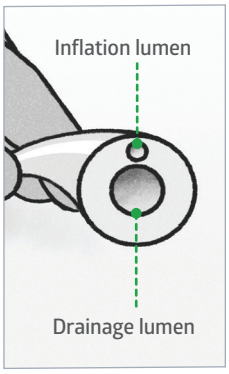


1. Position plunger between 0.5 and 1 ml to ensure the plunger isn't suctioned to the base of the syringe, allowing for passive deflation.



2. Attach the tip of the syringe to the inflation valve on the catheter by gently pushing and then slightly twisting to engage the valve.





3. Allow the catheter balloon to passively dispel the water. The plunger will move on its own as the syringe fills with water. Do not pull back on the plunger. The inflation lumen on an IUC is small, so it is important not to pull back on the syringe as it may cause the lumen to collapse.

Wait 30 seconds for the full volume of the balloon to fill the syringe and deflate the catheter balloon.

⚠ PRACTICE ALERT

100% Silicone Foley Catheters: Minimize balloon creasing by re-instilling 0.5 ml of sterile water into the completely deflated balloon prior to removal. The addition of sterile water will smooth the balloon without adding size to the catheter.

Troubleshooting

When an IUC does not deflate:

1. Remove the syringe and try re-seating it into the inflation valve. Be sure to gently push the syringe and then slightly twist to engage the valve.
2. Reposition the patient as the balloon may be engaged in the bladder wall.
3. If the balloon still fails to deflate, apply a slow and gentle aspiration on the syringe.
4. Fill a syringe with 1-2 ml of sterile water. Push the water into the inflation/deflation valve, then perform passive deflation technique.
5. Cut the inflation/deflation valve port.
6. Cut the catheter above the "Y" connection valve.
7. If problems persist after all of these steps have been followed, refer to your hospital protocol and contact a trained urologist for assistance.

Deflation issues may be caused by:

1. Active deflation can result in collapse of the inflation/deflation channel or a vacuum within that channel.
2. Inflating the balloon with normal saline can cause crystallization of the channel and/or balloon.
3. Underinflated balloons can cause deflation issues. Know the appropriate balloon fill.
4. Pre-clamping or clamping during a procedure can cause failure in the inflation/deflation channel if the catheter is clamped above the "Y" port. **Always clamp the catheter below the "Y" junction.**