



North of England Commissioning Support

Partners in improving local health

Controlled Copy Issued 20.01.2017

North of England Commissioning Support

Medicines Optimisation

Guidance on prescribing continence appliances in primary care in North East Lincolnshire Clinical Commissioning Group

Version issue date:	13/01/2017
Date of MO Q&G approval:	20/01/2017
Date of review:	December 2019

Author Name	Email Address	
Karen Hiley	Karen.hiley@nhs.net	



NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 1 of 23

Document Summary	
Directorate:	Medicines Optimisation
Document Purpose:	To inform prescribers in North East Lincolnshire about the continence formulary
Document Name:	Guidance on prescribing continence appliances in primary care within North East Lincolnshire Clinical Commissioning Group
Document Ref No.	
Author:	Karen Hiley
Report Owner or Sponsor:	Janette Stephenson
Target Audience:	All prescribers in North East Lincolnshire
Superseded Document:	N/A
Action Required:	To note for compliance with the procedure
Contact Details (for further information and feedback)	Name & Title: Karen Hiley Tel: 0300 3000 506 E-mail: Karen.hiley@nhs.net

Document Status

This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of this document are not controlled.

As a controlled document, this document should not be saved onto local or network drives but should always be accessed from the intranet.

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 2 of 23

Table of Contents

Document Summary	2
1. Introduction	4
1.1. Aim	4
1.2. Scope of the guidance	4
1.3. Key messages	4
1.4. Responsibilities of the Practice	5
1.5. Responsibilities of the patient or carer	7
References	7
Acknowledgements	7
Appendix One: Continence appliance prescription request algorithm for	new and
existing adult patients	8
Appendix Two: Formulary	9
Appendix Three: Abbreviations	23

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 3 of 23

1. Introduction

1.1. Aim

- The aim of this document is to provide guidance on issuing prescriptions for appliances to manage urinary incontinence, to help reduce over-ordering, wastage, poor communication and inappropriate use.
- The document outlines the responsibilities of the continence advisor, GP, dispensing contractor (dispensing appliance contractor (DAC), community pharmacy and dispensing doctor) and the patient/carers or relatives.

The healthcare professional (HCP) who prescribes the treatment legally assumes clinical responsibility for the treatment and the consequences of its use.

1.2. Scope of the guidance

This guidance is designed to be used by all prescribers, GP practices and specialist nurses.

1.3. Key messages

1.3.1. Responsibilities of the HCP initiating urinary catheterisations

Assess the patient, then select and initiate the most appropriate product(s) for treatment/management without pressure from any sponsoring company. Product selection should be made to meet patient needs on an individual basis as not all products are suitable for all.

- Appendix two provides guidance to prescribers for cost effective first line products. It is not intended to restrict patient choice.
- Only continence products listed in the Drug Tariff should be initiated.
- Ensure the patient has an established treatment plan that they fully understand.
- Communicate promptly with the patient's GP regarding:
 - Product initiation (including product codes)
 - Expected monthly usage
 - Expected duration of treatment; or, if long term, date of next review
- Monitor response to treatment, or advise GP of monitoring requirements.
- Following any change to prescription, advise both GP and dispensing contractor (where appropriate) of any modifications.
- Ensure clear arrangements for back-up stock, advice and support.
- HCPs must remember that the risks associated with catheter usage are of a serious nature that increasingly may become more difficult to justify.
- The need for urinary catheterisation must be reviewed on a regular basis and as circumstances change. If appropriate consider intermittent catheterisation.

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 4 of 23

- Ensure indwelling catheterisation is used as a last resort and only when at least one of the following has been met.
 - To maintain a dry environment and prevent skin maceration when a patient is suffering from urinary incontinence and all other forms of nursing intervention have failed.
 - Inability to self toilet due to social, disability or terminal illness. In these cases patients should be informed of the potential risks as well as benefits.
 - Following discharge from Secondary Care where urinary catheterisation is part of the treatment. This is usually temporary, patients maybe readmitted for a trial without catheter or arrangements made for this to be performed in the community.
 - Where chronic retention is present accompanied by a history of renal dysfunction/damage and intermittent self catheterisation is not a viable option.
- The only exception to this might be the first prescription following discharge to ensure the patient has a supply of products at home. In these circumstances supply is initiated by the Acute Trust specialist team.

1.4. Responsibilities of the Practice

Initiate system for supply and then continue prescribing, adjusting prescriptions for product(s) as advised by the specialist.

- Check quantities requested against information in Formulary. This gives suggested quantities, directions and notes to assist with prescribing. Be aware of the normal usage rate by the patient and ensure that any irregularities are flagged to the GP and reviewed with the patient/carer.
- The practice should not issue retrospective prescriptions requested by the dispensing appliance contractor.
 - The dispensing contractor must receive the prescription PRIOR to the delivery of items.
 - o If the dispensing contractor delivers item(s) prior to receiving a prescription, a prescription may not be issued to cover the supply if it is not considered necessary/appropriate.
- Print prescription for patient/carer (or send to contractor) within the agreed turnaround time and by the agreed method of dispatch.
- If using Electronic Prescription Service (EPS), the patient can nominate a pharmacy for the dispensing of medicines AND an appliance contractor for the dispensing of continence appliances.
- Document any communication from the dispensing contractor and specialist in the patient's clinical record.

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 5 of 23

- Report to and seek advice from the specialist or prescriber on any aspect of patient care that is of concern and may affect treatment.
- Stop or adjust treatment/management on the advice of the specialist or prescriber or immediately if an urgent need to stop treatment arises.
- Copies of the Appliance Use Review (AUR) should be reviewed by an appropriate person in the practice and stored in the patient's medical records.
- Ensure clear communication to the patient with regard to the process agreed between the practice and the contractor e.g. the interval prior to delivery when the regular prescription request should be submitted.
- When a patient dies, the practice must inform the dispensing contractor so that any prescriptions (including repeat dispensing prescriptions) that have not yet been sent or dispensed can be retrieved and destroyed.
- The practice should ensure that the patient/carer:
 - Understands the treatment.
 - Is aware of how to raise any concerns and report any problems in relation to the treatment.
 - Understands the ordering process and reports any problems with supply to the specialist or GP.
- It is strongly recommended that the practice has its own agreed protocol for how it deals with dispensing contractors.

1.4.1. Points to consider

- Where possible, agree a named person at the GP practice for managing prescription requests.
- If possible, agree a named contact with the dispensing contractor. All
 prescription requests should come from the patient/carer, however the
 contractor may need to be contacted to clarify the delivery schedule, product
 availability etc.
- Consider frequency of supply and the turnaround time from request of prescription by dispensing contractor to dispatch of prescription from surgery (e.g. 48 hours).
- Consider method of receipt of prescription by contractor e.g. fax, email, post or EPS. It is recommended that if prescriptions are posted to contractors, a record is kept and if possible a certificate of posting obtained (to help with any queries regarding missing prescriptions).
- It is strongly recommended that requests for emergency prescriptions should only be accepted from the patient/carer.

If there are concerns around over ordering or the first line choice listed is unsuitable please contact your local Continence Service for further advice and support on (01472) 256702 and see algorithm in appendix One.

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 6 of 23

1.5. Responsibilities of the patient or carer

- To order when they reach a defined threshold sufficient to allow time for the processing of the prescription.
- To avoid stock piling:
 - o products have a recommended shelf life and are influenced by changes in temperature.
 - o product choice may change over a period of time.

References

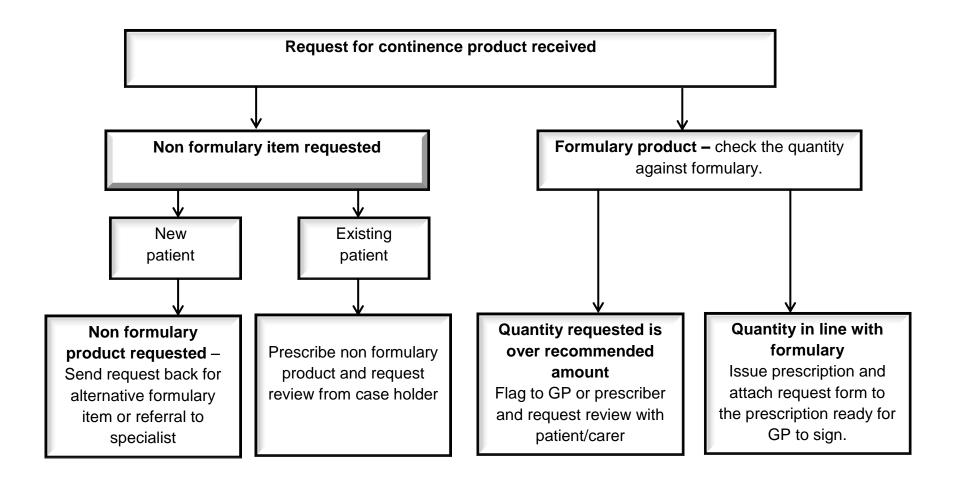
- 1. PrescQIPP
- 2. 3.Getliffe K Hughes S Claire M (2000) The dissolution of urinary catheter encrustation British Journal Of Urology 85(1):60-4
- 3. 8. Pratt et Al Evidence Based Guidelines for Prevention Health Care Infections in NHS Hospital in England Journal of Hospital Infection 65SS1-S64
- 4. 9. FillinghamS, Douglasj(2005)Urological Nursing (3rd edition) Bailliere Tindall,London

Acknowledgements

Hartlepool and Stockton-on Tees (HAST) CCG Guidance on Prescribing Continence products in General practice

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 7 of 23

Appendix One: Continence appliance prescription request algorithm for new and existing adult patients



NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 8 of 23

Appendix Two: Formulary

Prices correct as at January 2017

Patient Advice

Hygiene Normal daily bath or shower. Antiseptic solutions DO NOT reduce bacterial infection. Too frequent washing may upset normal meatal flora which acts as a defence mechanism. If meatal cleansing is required use soap and water and a disposable cloth designated for this purpose(3)

Fluid Intake Aim for a fluid intake of 1500-2000ml over 24hours (unless contra-indicated) as this helps to prevent infection(4)

Diuresis may assist in voiding micro-organisms from residual urine in the bladder. Dilute urine will reduce the concentration of encrustation components(2)

Changing bags. Do not change more frequently than necessary (once a week). Remove protective cap from new drainage bag/catheter valve and insert the ends as quickly as possible ensuring the ends of the bag/ catheter valve are not touched. This reduces the risk of contamination of bag and catheter

Catheterisation pack						
Order code	Glove Size	Unit price	Notes			
	Cath-it Insertion/Removal Pack Small/Medium	£1.98	A two layer system, layer 1 catheter removal kit, layer 2 catheter insertion kit. (catheter or anesthetic gel not included) Facilitates aseptic non-touch technique (ANTT) to reduce risk of catheter associated urinary tract infections (CAUTI). Cost effective as supplied in one packet reducing nursing time and FP10 costs.			
	Cath-it Insertion/Removal Pack Med/Large					
908430	Cath-it Insertion/Removal Pack Large/Ex Large					

Anaestheti	Anaesthetic lubricant /Lubricant (Check not included with catheter)						
Order code	Product	Unit price	Notes				
CJL 08501	Cathejell Lidocaine 8.5g Anaesthetic lubricant	£1.20	One to be used at each catheter change. Order in singles appropriate to the number of catheters prescribed. For urethral catheter insertion 8.5g female, 12.5g male.				
CJL 12501	Cathejell Lidocaine 12.5g Anaesthetic lubricant	£1.25	Licensed for supra pubic use where appropriate – 8.5g to be used. To reduce injury to the urethra and subsequent risk of possible urethra damage.				

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 9 of 23

CJM 08501	Cathejell Mono 8.5g lubricant	£0.80	To facilitate pain free insertion. To help reduce the risk of associated infection
CJM 12501	Cathejell Mono 12.5g Lubricant	£0.85	
T872	Instillagel 6ml Tubes anaesthetic lubricant	£1.41	One to be used at each catheter change. Order in singles appropriate to the number of catheters prescribed
T881	Instillagel 11ml Tubes anaesthetic lubricant	£1.58	Licensed for the male and female urethra during cystoscopy, catheterisation and exploration by ultrasound and other endourethral operations.

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 10 of 23

Urinary Catheters

Patient assessment, monitoring and ongoing support is essential to prevent urinary tract infections and improve quality of life for those patients who have a urinary catheter.

Aim to remove catheter as soon as possible following insertion if appropriate

Aim to use the smallest size that provides adequate drainage to avoid problems such as bypassing.

Select the correct length and type of catheter. Standard/male – for males/females and suitable for supra pubic catheterisation. Female – for females only.

Use 10ml balloon, use the recommended amount of fluid required to fully inflate the balloon. Under inflation can distort the angle of the catheter tip, causing bladder spasm, over inflation could cause the ballon to burst

Long Term Catheters Supra pubic and urethral use. Can be left in place for a maximum of 12 weeks

Order code	Product	Gauge/CH	Unit price	Notes
08501205W	LINC Medical	12	£5.52	Standard/Male
08501405W	Foley 2-way Round tip silicone catheter. Suprapubic and urethal use	14	£5.52	Includes empty syringe for deflation, Anaesthetic lubricant /Lubricant and syringe containing fluid for inflation. Initial prescription for 3 then
08501610W	ouprapasio ana aremarase	16	£5.52	One every 12 weeks
085012051W	LINC Medical	12	£5.52	Female
085014051W	Foley 2-way Round tip silicone catheter. Suprapubic and urethal use	14	£5.52	Includes empty syringe for deflation Anaesthetic lubricant /Lubricant and syringe containing fluid for inflation. Initial prescription for 3 then
085016101W		16	£5.52	One every 12 weeks
DH310112	Rusch Sympacath Aquaflate Hydrogel coated latex catheter.	12		Standard/ Male Includes empty syringe for deflation of previous catheter and a syringe
DH310114	Suprapubic and urethal use	12	£6.18 (10)	prefilled with sterile water. Initial prescription for 3 then
DH310116		12	()	One every 12 weeks (no lubricant supplied)
DH210112	Rusch Sympacath Aquaflate Hydrogel	12	£6.18 Female Only Includes empty syringe for deflation of previous cathor prefilled with sterile water. Initial prescription for 3 the	,
DH210114	coated latex catheter Suprapubic and urethal use	14		prefilled with sterile water. Initial prescription for 3 then
DH210116		16	()	One every 12 weeks(no lubricant supplied)

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 11 of 23

Long term Catheters 2 nd line choice – All silicone catheters suprapubic and urethal use Change no later than 12 weekly							
Order code	Product	Gauge/CH	Unit price	Notes			
DA310112	Rusch Sympacath Aquaflate All Silicone	12		Standard/ Male			
DA310114	catheter	14	£6.07 (10)	Includes empty syringe for deflation of previous catheter and a syringe prefilled with sterile water Initial prescription for 3 then			
DA310116		16	(10)	One every 12 weeks.(no lubricant supplied)			
DA210112	Rusch Sympacath Aquaflate All Silicone	12		Female Only			
DA210114	catheter	14	£6.07 (10)	Includes empty syringe for deflation of previous catheter and a syring prefilled with sterile water.			
DA210116		16	(13)	Initial prescription for 3 then One every 12 weeks (no lubricant supplied)			
Long Term	Long Term Catheters all silicone - urethral use only Change no later than 12 weekly						
Order code	Product	Gauge/CH	Unit price	Notes			
34220512	Qufora All silicone catheter	12		Male urethra use only. Includes empty syringe for deflation and syringe			
34220514	Qufora All silicone catheter	14	£4.29 each	filled with glycerin for inflation			
34220516	Qufora All silicone catheter	16	- Cuon				
				Female urethra use only. Includes empty syringe for deflation and syringe			
34240512	Qufora All silicone catheter	12					
34240512 34240514	Qufora All silicone catheter Qufora All silicone catheter	12 14	£4.29 each	Female urethra use only. Includes empty syringe for deflation and syringe filled with glycerin for inflation			

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 12 of 23

Long term of	Long term catheter – All silicone suprapubic use only						
Order code	Product	Gauge/CH	Unit price	Notes			
34230212	Qufora All Silicone catheter-Suprapubic	12	£5.50 each	Open Tipped Suprapubic Catheter with 5/10ml balloon. Includes empty			
34230214	Qufora All Silicone catheter-Suprapubic	14		syringe for deflation and syringe filled with glycerin for inflation			
34230216	Qufora All Silicone catheter-Suprapubic	16					

Specialist ca	Specialist catheter – All silicone suprapubic use only						
Order code	Product	Gauge/CH	Unit price	Notes			
D236512S	Bard Bardex I.C	12		Standard/Male			
D236514S		14	£9.76(1)	With silver alloy coating and pre-filled syringe of sterile water.			
D236516S		16		Should only be used for 3 consecutive months initially – further use requires discussion with continence team.			
Order code	Product	Gauge/CH	Unit price	Notes			
08451205W	Linc medical	12		All Silicone Open Tipped Catheter with UniBal type balloon with sterile			
08451405W		14	£10.95	water filled syringe for balloon inflation, empty syringe for balloon deflation and a syringe of lidocaine & chlorhexidine for lubrication			
08451610W		16	(1)	May help with life of catheter in cases of persistent blockage urethral or			
08451810W		18		supra pubic use			

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 13 of 23

Medium term	Medium term catheter – Licensed to be used for a maximum of 28 days				
Order code	Product	Gauge/CH	Unit price	Notes	
DP210112	Rusch Aquaflate All PTFE Coated latex foley catheter	12		Female Includes empty syringe for deflation of previous catheter and a syringe	
DP210114	Rusch Aquaflate All PTFE Coated latex foley catheter	14	£2.16 (10)	prefilled with sterile water. Initial prescription for 3 then	
DP210116	Rusch Aquaflate All PTFE Coated latex foley catheter	16		One every 4 weeks	
DP310112	Rusch Aquaflate All PTFE Coated latex foley catheter	12	£2.16 (10)	Male Includes empty syringe for deflation of previous catheter and a syringe	
DP310114	Rusch Aquaflate All PTFE Coated latex foley catheter	14		prefilled with sterile water. Initial prescription for 3 then	
DP310116	Rusch Aquaflate All PTFE Coated latex foley catheter	16		One every 4 weeks	

Catheter Valves

For use with indwelling catheters only. These provide a discrete alternative to drainage bags. Their use helps to imitate normal bladder function by allowing the bladder to fill and empty, maintaining normal capacity and tone. They allow the catheter balloon to be lifted from the bladder wall decreasing the risk of bladder wall erosion and trauma to the bladder neck. Contra-indicated in: Reduced bladder capacity:/No bladder sensation: Cognitive impairment: Poor manual dexterity: Renal impairment/Post Radical Prostatectomy

Order code	Product	Unit price	Notes
21104204	MacGregor Qufora	£8.50 (5)	Catheter valves should be changed every 5-7 days. One pack of 5 per month Review weekly
PCV3942	Prosys Clini-Supplies	£9.50 (5)	

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 14 of 23

Catheter drainage bags - LEG BAGS

Leg bags may be worn in different positions on the leg, i.e. inside thigh/calf, which is an individual choice, and this will determine the length of the inlet tube. Maintaining a closed drainage system (i.e. not removing the leg bag when attaching a night bag) reduces the risk of infection. The leg bag must remain connected to the catheter and linked to the night bag if additional drainage capacity is required overnight. 500mls bags have been listed below, as this is the most common size used. Other volume leg bags are available

Order code	Product	Pack Size	Pack price	Notes
LM500SD-L	Linc-Flo Lever Tap Direct inlet			All the leg bags are sterile and include 1 pair of leg straps & a pair of
LM500MD-L	Linc-Flo Lever Tap 10cm Tube	500ml x10	£22.09	gloves
LM500LD-L	Linc-Flo Lever Tap 30cm Tube			Linc-Flo Leg bags should be changed every 5-7 days,
12161704	Qufora sterile, Q flow lever tap Direct	500ml x10	£22.40	Qufora every 10 days (manufacturers recommendation).
12161804	Qufora sterile, Q flow lever tap Short			
12161504	Qufora sterile, Q flow lever tap Long			No more than one box of ten should be issued alternate months (6 x10 boxes per year).
LM500SD-T	Linc-Flo T-tap Direct inlet			, a a cost p a cost, p
LM500MD-T	Linc-Flo T-Tap 10cm Tube	500ml x10	£22.13	Orders in excess should be questioned as it is poor practice an increases risk of infection to change more frequently than every 5-days.(including care homes)
LM500LD-T	Linc-Flo T-Tap 30cm Tube			
12151704	Qufora sterile leg bag Direct inlet T-Tap			
12151804	Qufora sterile leg bag Short inlet T-Tap	500ml x10	£22.40	
12151504	Qufora sterile leg bag Long inlet T-Tap			

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 15 of 23

Intermittent catheters (ISC)

- These are suitable for patients with incomplete bladder emptying e.g. neurogenic bladder disorders, particularly patients with multiple sclerosis, spina bifida, diabetes and spinal cord injury.
- These catheters are for single use only.
- Patient needs good dexterity and cognitive ability.
- Help to reduce catheter-associated urinary tract infections (CAUTI)
- How many a patient uses a day depends on their medical reason for ISC ranging from 1 to a usually maximum of 5 times daily.(refer back for overuse)
- All patients to be managed by the Continence team.

Order code	Product	Gauge/C H	Unit price	Notes
228010E		10		Pre-lubricated with glycerine for smooth insertion and removal
228012E	Actreen Lite Mini Female B.Braun Medical	12	£43.96	Review every 3 months
228014E	- B.Diauii Medicai	14	per pack of 30	The Quanity supplied to the patient needs to be stipulated by the clinician at the start of treatment.
CL10		10		
CL12	Curan Lady	12	£41.79 Per pack of 30	Female15cm Low friction catheter in saline with easy-grip handle Review every 3 months The quanity supplied to the patient needs to be stipulated by the clinician at the start of treatment
CL14	- (Clinimed)	14		
28580	Speedicath Compact (Coloplast)	10	£46.72 Per pack of 30 £47.37 per pack of 30	
28582		12		
28584		14		
4161025	LoFric Sense (Wellspect HealthCare)	10		
4161225		12		
4161425		14		
4161625		16		

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 16 of 23

Intermittent	catheters (ISC) Continued				
630010		10			
630012	Liquiek Page (Taleflay)	12	£84.00	Male	
630014	Liquick Base (Teleflex)	14	per pack of 60	iviale	
630016		16			
28410		10		Standard/ Male	
28412		12	£45.17 per pack of 30	(Pre-Hydrated Polyurethane) Pre-lubricated with glycerine for smooth insertion and removal Review every 3 months 1 pack of 30 every month	
28414		14			
28416		16			
4431225		12		Standard/male with integrated water-pocket and a handling aid for	
4431425	Lofric Origo Male (Wellspect Healthcare-(Formerly Astra Tech)	14	£51.28	hygienic non-touch catheterisation. Review every 3 months 1 pack of 30 every month	
4431625	Treattricate-(i offierly Astra Tech)	16	per pack of 30		

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 17 of 23

Night bags

Suitable for night time use for the collection of urine from indwelling catheters or urinary sheaths. The position of the bag should be below bladder level to enhance drainage.

Night bags should be directly connected to the leg bag to maintain a closed system.

Night bags should be used in conjunction with a catheter stand, available from Clinisupplies (not available on FP10). Non-drainable night bags are the preferred option as single use reduces the risk of infection.

Order code	Product	Pack Size	Unit price	
LM2LNS	LINC medical non-sterile	2L x 10 per pack	£2.11 per pack of 10	non-sterile 2 litre overnight drainage bag with 100cm inlet tube and non-return valve.
PSU2	ProSys Non- sterile 2 litre night bag with single use drainable tap	2L x 10 per pack	£3.04 per pack of 10	Drainable night bag (single use) Care homes should always use this type of night bag attached to a leg bag. Change each day. No more than 3 packs per month
LM2LS	LINC-Flo sterile	2L x 10 per pack	£2.63 per pack of 10	2 litre overnight drainage bag with 100cm inlet tube and non-return valve
SLC13	Linc-Flo Slide outlet tap	2L x 10 per box	£9.44 per pack of 10	Sterile drainable night bags Include 1 pair of leg straps and a pair of gloves
SLC13-L	Linc-Flo lever outlet tap	2L x 10 per box	£9.44 per of 10	For community bed bound patients it may be appropriate for a sterile drainable 2 litre bag to be connected directly to the catheter
14823204	Qufora U4 drainable night bag with 120cm inlet tube	2L x 10	£9.57 per pack of 10	(Not recommended for care home patients due to risk of cross infection). Drainable night bags should be changed every 5-7 days
P2000	ProSys Slide outlet tap	2L x 10 per pack	£11.96 per pack of 10	(manufacturer's recommendation).
P2000-LT	ProSys Lever outlet tap	2L x 10 per pack	£1.20 (£11.96 per pack)	No more than one box of ten should be issued alternate months (6x10 boxes per year)

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 18 of 23

Catheter accessories

It is extremely important that both the catheter and leg bag is well supported to reduce traction and trauma to the bladder neck/urethra.

Order code	Product	Pack Size	Unit price	Use
3002	UGO fix catheter strap Short	upto 45cm (x5)	£12.50	The catheter strap is used as a retaining strap which secures the tubing or catheter firmly and comfortably against the leg acting as a shock absorber for all
3003	UGO fix catheter Strap Medium	upto 80cm (x5)	£13.80	indwelling catheters. Larger and smaller sizes are available if required These are washable and reusable
3009	UGO fix catheter Strap Long	upto 130cm (x5)	£16.80	One Pack of 5 Catheter fixation straps should last every 4-6 months (including care homes)
10644A	GB fix it catheter retainer strap	45cm(x5)	£14.10	The catheter strap is used as a retaining strap which secures the tubing or catheter firmly and comfortably against the leg acting as a shock absorber for all
10645B	GB fix it catheter retainer strap	80cm(x5)	£15.43	indwelling catheters. These are washable and reusable
10647D	GB fix it adjustable catheter retainer strap	150cm(x5) Cut to fit	£17.78	One Pack of 5 Catheter fixation straps should last every 4-6 months (including care homes)
3004	Ugo Fix Gentle	5	£12.35	For the fixation of foley catheters
3005	Ugo Fix sleeve small	24cm-39cm	£7.28 per pack of 4	
3006	Ugo Fix sleeve Medium	36cm-55cm	£7.28 per pack of 4	Adhesive dressing with retainer to secure catheter in place – change every seven days. Can be used to support leg bags attached to urethral catheters,
3007	Ugo Fix sleeve Large	40cm-70cm	£7.28 per pack of 4	suprapubic catheters and urinary sheath systems.
3007	Ugo Fix sleeve Extra large	65cm-90cm	£7.28 per pack of 4	

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 19 of 23

Catheter accessories Continued							
Order code	Product	Pack Size	Unit price	Use			
150111	Uri sleeve Small (Bard)	24-39cm	£8.23	The leg sleeve can be used as an alternative or alongside leg straps.			
150121	Uri sleeve Medium (Bard)	36-55cm	£8.23 Particularly good if patient has frail skin, or problems with straps d rubbing against the leg as it distributes the weight of the urine more				
150131	Uri sleeve Large (Bard)	40-70cm	£8.23	One Pack of 4 Leg bag holders should last for four to six m			
150141	Uri sleeve Extra Large (Bard)	65-95cm	£8.14	(including care homes)			

	ntenance solutions use – Catheter not draining. First check fo	or mechanic	al reasons for	blockage i.e kinked/obstructive tubing/constipation then follow below:
First blockage Recatheterise Document change in notes Open up catheter lumen Note if blockage due to debris or encrustation – record on catheter template Advise increased fluid intake			Persistent Blocker Note expected life of catheter Trial of catheter maintence solution Debris Encrustation 0.9% normal saline daily instillation for 2 weeks (see algorithm in Care Plus catheter policy http://www.nelctp.nhs.uk/url/go/82 (5))	
Order code	Product	Volume	Unit price	Use
FB99965	Uro-Tainer PHMB 0.02% Polihexanide	100ml	£3.40	There should be a clinical rationals for use and care. Places follow algorithm
9746609	Uro-Tainer Twin Suby G 3.23% Citric Acid	2 x 30ml	£4.81	There should be a clinical rationale for use and care. Please follow algorithm (5)
9746625	Uro-Tainer Twin Solution R 6.0% Citric Acid	2 x 30ml	£4.81	Should only be considered for short-term use, to treat indwelling catheters for prevention of encrustation, or to dissolve crystal formation prior to removal of
CSG100	OptiFlo G 3.23% Citric Acid (Suby G)	100ml	£3.56	catheter to prevent urethral trauma.
CSR100	OptiFlo R 6.0% Citric Acid (Solution R)	100ml	£3.56	Citric acid should only be used for patient with evidence of grit. Two sequential instillations of a small volume are more effective than a single
CSS100	Optiflo S 0.9% Saline	100ML	£3.36	administration (3).

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 20 of 23

Urinary sheaths – Over ordering more than one box of thirty per month may indicate poor fit - refer to continence team for advice						
Order code	Product	Volume	Unit price	Use		
GBLSS24		24mm				
GBLSS28		28mm				
GBLSS31	Great Bear Libra Sheath Standard	31mm	£46.80 for 1 box of 30			
GBLSS35		35mm				
GBLSS40		40mm		Can offer a valuable alternative method of urinary incontinence management		
GBLSP24		24mm		for men.		
GBLSP28		28mm		It is important to accurately assess for type and size of sheath using		
GBLSP31	Great Bear Libra Sheath Pop-on	31mm	£46.80 for 1 box of 30	manufacturers measuring device.		
GBLSP35		35mm				
GBLSP40		40mm		It is recommended that sheaths are changed on a daily basis.		
GBLSW24		24mm		It may be necessary to use a fixation strip to ensure the sheath remains in		
GBLSW28	Great Bear Libra Sheath Wide Band 28mm	28mm		place.		
GBLSW31		£46.80 for 1 box of 30				
GBLSW35		35mm		Please ensure an adhesive remover spray is used if unable to bath/shower daily to prevent skin stripping on sheath removal.		
GBLSW40		40mm		It is recommended one box of thirty should be sufficient per month		
5243		24mm				
5283		28mm				
5232	Clear advantage standard	31mm	30 for £50.52			
5263		36mm				
5403		40mm				

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 21 of 23

Urinary sheat	Urinary sheaths continued			
Order code	Product	Pack Size	Unit price	Use
7243		24mm		
7283		28mm		
7323	Clear advantage pop-on	31mm	30 for £50.52	2
7363		36mm		
7403		40mm		
9243		24mm		
9283		28mm		
9323	Clear advantage wide band	31mm	30 for £50.52	2
9363		36mm		
9403		40mm		

Sheath accessories						
Order code	Product Pack Size Unit price					
10380A	GB soft skin adhesive remover 50ml aerosol £9.19		Order singly (only one per year as per recommendation from manufacturers			
62042	Coloplast prep wipes	£10.61 for 51	One per day			

Urinals

- These may be used for patients who have functional incontinence.
- These should be used as part of the patient's treatment or management plan

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 22 of 23

Appendix Three: Abbreviations

Abbreviation	Definitions
НСР	Healthcare professional
AUR	Appliance Use Review
DAC	Dispensing Appliance Contractor
ISC	Intermittent Self Catheterisation
EPS	Electronic Prescription Service

NEL Continence Formulary 2017-01 Final	Status: Approved	Next Review Date: December 2019
©NHS Commissioning Board. Developed by North of England Commissioning Support Unit 2016	Approved date: 20/01/2017	Page 23 of 23