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留置導尿管的居家照護  
Home Care of Urinary Catheter Placement

*保持尿管通暢，降低發炎的機會*

*Keep the urinary catheter a free flow to decrease the chance of infection*

1. 每日執行1-2 次尿管護理（以清水確實清洗會陰部或尿道口）。
2. 每日至少柔捏尿管一次，避免折到或壓到，以保持暢通。
3. 解便後應立即予會陰沖洗。
4. 尿袋高度要低於膀胱位置（但不可置放於地面上），每日至少要倒尿三次，並紀錄尿量。
5. 尿袋開口須隨時關閉，勿受污染。
6. 每日更換膠布及固定位置，以減少皮膚刺激。
7. 無特殊水分限制者，應每日給水2500cc-3000cc，每日尿量至少需維持1500 cc。
8. 可予蔓越莓汁或果汁，以降低泌尿道感染機會。
9. 如有發燒，尿量少於500cc /日、血尿、滲尿、或尿管脫出、分泌物或小便有臭味、沈澱物增加等情形，請儘快與醫護人員聯絡。

1. Perform the care of urinary catheter procedures once or twice a day.  
(Wash the perineum or the urethral orifice with clean water)
2. Pinch the urinary catheter at least once a day, and avoid bending or pressing it to maintain a free flow.
3. Clean the perineum right after urinating.
4. The urine collection bag should be placed below the bladder position (not on the floor). Empty the urine at least three times a day, and record the urinated volume.
5. Close the opening of urine collection bag at any time to avoid infection.
6. Change the securing tape on urinary catheter every day to decrease the stimulating toward skin.
7. Provide 2500 to 3000 cc. to those who have no water contraindication, and their urinated volume should maintain at least 1500 cc.
8. Provide them the cranberry juice to decrease the chance of urinary tract infection

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9. If some abnormal situations happen like fever, less than 500 cc of urine volume a day, hematuria, uncontrollable lose of urine, dislocation of urinary catheter, stinky smell of urine, and addition of settlings, please contact with medical staff right away.

以上資料來源自台灣長期照護專業協會，  
若您對以上內容有任何疑問時，請洽詢護理人員。