

Trial without catheter (TWOC)

What is a trial without catheter?

A trial without catheter involves removing a catheter from your bladder to see if you can pass urine without it. This usually takes place in the outpatient clinic within a short period after catheter insertion.

Why would I need this procedure?

You have an indwelling catheter (a tube) draining urine from your bladder.

What are the symptoms that have led to me having this procedure?

Your catheter may have been inserted for one of the following reasons:

- as a planned event after an operation/procedure
- you were suddenly unable to pass urine (acute retention of urine)
- you were found to have an overfilled bladder (chronic retention of urine)

What are the alternatives?

There are no alternatives to this procedure; however, your clinical details will be reviewed by the urology specialist nurse who will advise if an alternative management plan may be preferred, such as, a long-term catheter or further investigations.

What are the potential risks and side effects?

The longer your catheter remains in place the greater the risk of urinary tract infection (UTI). This risk can be reduced by washing your hands before and after touching your catheter bag, cleaning the place where the catheter enters your body with mild soap and water twice daily, and maintaining hydration aiming for yellow straw-coloured urine (8-10 cups of fluid per day).

What are the expected benefits of treatment?

To restore or improve normal bladder function.

What should I do before I come into hospital?

You will be invited to attend the outpatient clinic for a TWOC. Your appointment will last several hours.

Drink well the day before your appointment to make sure you are well hydrated and make sure that your bowels are working normally and that you are not constipated. If you are constipated, you may be unable to pass urine. Please discuss with your GP if laxatives are required.

If you are using a catheter valve to maintain bladder function, please allow your bladder to fill comfortably before your appointment, as this will reduce the time taken to assess your bladder function.

Please bring a change of underwear and your regular medication list with you.

Will I have an anaesthetic?

An anaesthetic is not required for this procedure.

How will I feel afterwards?

Following removal of your catheter, you will be encouraged to fill your bladder slowly by drinking, as advised by your specialist nurse. Once you have passed urine, your bladder residual (the urine left in your bladder) will be measured using a bladder scanner. This procedure will be repeated after a second, and even a third time passing urine.

If you are able to pass urine well and residuals remain low, you will be discharged from the clinic and an outpatient's follow up appointment may be arranged to check your progress.

If you are unable to pass urine, or do not empty your bladder sufficiently a new catheter may need to be inserted. It is not unusual to return to clinic for another attempt at a TWOC. Some patients may be taught intermittent self-catheterisation (ISC) to help with bladder emptying. This will be provided by your specialist nurse who will provide you with everything you need for this and will continue to monitor your progress.

What should I do when I go home?

Drink normally, 8-10 cups per day. Reduce the amount of Tea and coffee you have as these drinks contain caffeine, which can cause urgency and frequency symptoms. Alternatively try decaffeinated tea and coffee.

Empty your bladder regularly, every three-four hours.

Avoid constipation by eating a well-balanced diet.

Observe for signs of urinary retention, if you become unable to pass urine or are passing very small volumes and feel uncomfortable, we advise you **seek urgent medical advice from 111 or the Crisis Response team designated catheter line, Eastbourne & Hailsham 0300 131 4711 or Hastings & Rother 0300 131 5603.**

Observe for signs of UTI, if you have pain on passing urine, frequency and cloudy urine, please get your GP to check if you have an infection and require antibiotics. **Contact your GP or 111 urgently** if you have a very high temperature with shivering or a very low temperature and are feeling generally unwell.

Consent

Although you consent for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

Sources of information

For any queries or concerns about the appointment, please contact:

Natasha Ewen, Urology Nurse Practitioner Eastbourne district general hospital 0300 131 4500 ext 770660 (Mon-Thurs 8-5)

Tara Fisher, Urology Nurse Practitioner Conquest Hospital 0300 131 4824 (Mon-Wed 8-5 Thurs 8-12.30)

NB. not available on bank holidays, Please contact the crisis response team catheter line as below.

For catheter troubleshooting and support, please contact the Crisis Response team designated catheter line:

Eastbourne & Hailsham 0300 131 4711 or Hastings & Rother 0300 131 5603. (8am – 10pm 7-day service)

For further catheter supplies, please contact Bullen healthcare 0800 756 2429 (9am-5.30pm Monday to Friday, NB not available on weekends or bank holidays)

Further information and support is available www.nhs.uk, [Master Patient Information Document \(esht.nhs.uk\)](#),
[Catheter passport patient only v6.pdf \(england.nhs.uk\)](#)

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or esh-tr.patientexperience@nhs.net.

Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of our leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department on 0300 131 4434 or esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The following clinicians have been consulted and agreed this patient information:

Natasha Ewen Urology nurse practitioner
John Buyungo Urology nurse practitioner
Penny Whitling Urology Clinical Nurse Specialist in Functional & Reconstructive Urology
Sylvia Harris Head of Nursing DAS

The directorate group that have agreed this patient information leaflet:
Diagnostic, Anaesthetic and Surgery Clinical Governance Group

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Responsible clinician/author: Tara Fisher, Urology Nurse Practitioner