



Designed for fast* and convenient cathing

Getting started

For some women, starting intermittent catheterization – or 'cathing' – can be a time of anxiety. You may be facing physical difficulties or entering a completely new phase of your life.

We're here, along with your healthcare team, to make sure your adjustment to cathing is as smooth as possible.



GentleCath™ Glide

You've been given GentleCath™ Glide, an intermittent catheter designed to maximize ease of use and convenience.

This booklet explains what cathing is and contains all the information you need to get started with GentleCath™ Glide.

You'll find clear instructions, diagrams and answers to frequently asked questions.

What is cathing?

Cathing refers to the regular insertion of a hollow plastic tube (a catheter) into the bladder to drain urine.
You may also hear it referred to as intermittent catheterization (IC) or intermittent self-catheterization (ISC).

Cathing is done when your bladder is full, if you are unable to pass urine, or to drain any remaining urine if your bladder has not emptied completely.

Your bladder needs to be emptied four to six times a day, depending on how much liquid you drink.¹

Urethral opening

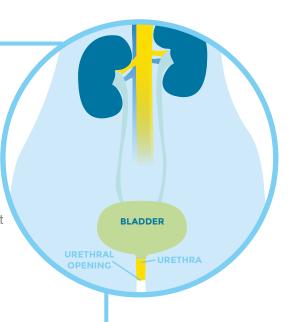
The catheter is inserted into the opening of the urethra (the little hole where urine comes out).

Urethra

The catheter travels through the urethra to the bladder.

Bladder

Once the catheter is in the bladder, it can drain the urine.

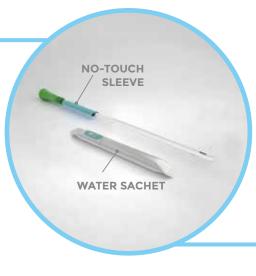




Introducing GentleCath™ Glide

GentleCath[™] Glide is designed to make cathing as convenient as possible.

How do I use GentleCath™ Glide?



GentleCath™ Me+

GentleCath™ Me+ is a service designed to provide you with everything you need to gain relief from the worries associated with cathing.



Personalized instructions:

you can find customized instructions on how to use GentleCath™ Glide on the GentleCath™ Me+ website.





Smooth, slippery surface

Feature: a low friction hydrophilic catheter

The smooth, slippery surface is designed to make cathing easier.

Less mess and residue

Feature: FeelClean[™] technology

The catheter is made with our unique technology designed to reduce the residuals and mess left behind by cathing, so you can worry less about getting residue on your clothes, hands and body.

Catheter contamination prevention

Feature: a no-touch sleeve

GentleCath™ Glide has a no-touch handling sleeve to help prevent contamination of the catheter with bacteria from the hands.^{2,3}



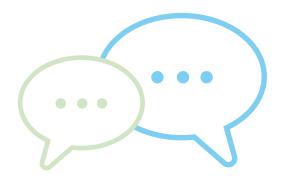
Speed and discretion

Feature: quick lubrication

GentleCath™ Glide is ready to use with no unnecessary delay. You can start cathing as soon as you break the water sachet and wet the length of the catheter – so it can be used quickly and discretely.

Not made with DEHP

The GentleCath™ Glide catheter is made without the use of DEHP.*



Frequently asked questions

We have answered some of the most common questions women ask about cathing below.

If you have a question that isn't answered here, you can call one of our specially trained nurses toll free at 1-800-422-8811. You can also access more information through our GentleCath™ Me+ website via the URL and QR code below. Alternatively, you may wish to contact a member of your healthcare team.



Professional advice: our online video FAQ may help to answer some of your questions and concerns.







How often should I empty my bladder?

- Many women cath first thing in the morning, last thing at night and about 2–3 times during the day¹
- Cath when you have the urge to urinate or your bladder contains 10–18 fl oz (300-500 mL) of urine¹
- Check the amount when you empty to see that your bladder is not holding more than 18 fl oz (500 mL). If it is, you catheterize more often¹
- You should cath as your doctor recommends

What about sex or intimate situations?

- You should be able to have sexual intimacy as before
- You may wish to cath before you engage in sexual activity.
 This will ensure your own comfort and help to avoid the possibility of leaks
- Remember to wash your genital area after sexual activity to help prevent infection

How do I obtain supplies?

There are many retailers who will ship supplies right to your door. Call us for more information at

1-800-422-8811

Urinary tract infections (UTIs)

The urinary tract includes all the organs our bodies use to make and get rid of urine, including the kidneys, ureters, bladder, and urethra.



Urine is normally sterile and its natural flow usually prevents bacteria from growing in the urinary tract.

However, when urine stays in the bladder, bacteria have a chance to grow and cause infection.¹

How can I avoid UTIs?

You can help reduce your risk of UTIs in a number of ways

- Wash your hands thoroughly
 Hand washing and personal
 hygiene before and after you
 use the catheter are very
 important
- Drink enough fluids
 Try to drink at least 8-10 cups of fluids daily¹
- Use a catheter regularly
 Regular emptying of urine is
 important to help reduce the
 risk of infection¹
- Avoid touching the sterile catheter

No-touch sleeves, as found on GentleCath™ Glide, can help prevent contamination of the catheter

How do I tell if I may have a UTI?

The following symptoms indicate that you may have a UTI

- Fever
- Pain or a burning when passing the catheter or urine
- The need to empty your bladder more often than usual
- Leakage between cathing
- Kidney pain

Contact a doctor if you experience any of these symptoms.

Medicare guidelines

Medicare at a glance

Many women have questions about catheter supplies and Medicare Guidelines. Here's what you should know.

- Physician prescriptions should reflect the number of times a user caths per day
- Medicare will cover one catheter per cathing episode up to a maximum of 200 per month:
- A4351: Intermittent urinary catheter with straight tip
- A4352: Intermittent urinary catheter with Coudé/Tiemann tip. When a coudé tip catheter (A4352) is used there must be documentation in your medical record stating why you cannot use a straight tip catheter
- A4353: Intermittent urinary catheter, with insertion supplies, With qualifying documentation in your medical record stating why you need this



The reimbursement information provided by ConvaTec is intended to provide general information relevant to coding and reimbursement of ConvaTec's products only. Coverage and payment policies for the same insurer can vary from one region to another and may change from time to time because of ongoing changes in government and insurance industry rules and regulations. Therefore please confirm HCPS codes with your local DME-MAC, private insurer, or Medicaid agency before processing claims. ConvaTec does not guarantee coverage or payment of its products listed here.

Support networks

There are many support groups available.

You may be interested in joining now, or in the future once you are settled back into a routine.

Local support groups

For information on local support groups contact us at

1-800-422-8811

Our nurses are available to answer any questions you may have.







National support groups

ConvaTec Helpline

- 1-800-422-8811
- Monday Friday
 8:30am 7:00pm EST
- CIC@convatec.com
- www.convatec.com

Miami Project to Cure Paralysis

- Miamiproject.miami.edu
- 1-800-STANDUP (1-800-782-6387)

The Christopher Reeve Paralysis Foundation

- www.crpf.org
- 1-800-225-0292

National Multiple Sclerosis Society

- www.nmss.org
- 1-800-344-4867

Paralyzed Veterans of America

- www.pva.org
- 1-800-555-9140

The Simon Foundation

- www.simonfoundation.org
- 1-800-23SIMON (1-800-237-4666)

Seekwellness

- www.seekwellness.com
- 1-800-840-9301

Call us at

1-800-422-8811



Monday-Friday, 8:30am-7:00pm EST. CIC@convatec.com www.convatec.com

www.gentlecath.com

Professional advice: our online video FAQ may help to answer some of your questions and concerns.



Personalized instructions:

you can find customized instructions on how to use GentleCath™ Glide on the GentleCath™ Me+ website.



References: 1. Newman D.K. & Willson M.M. (2011) Review of intermittent catheterization and current best practices. *Urological Nursing* 2011 Jan-Feb. 2. Hudson E. & Murahata R.I. The 'no-touch' method of intermittent urinary catheter insertion: can it reduce the risk of bacteria entering the bladder? *Spinal Cora* 2005;43(10):611–614 3. Charbonneau-Smith R. No-touch catheterization and infection rates in a select spinal cord injured population. *Rehabilitation Nursina* 1093;18(5):296–290, 205.



