



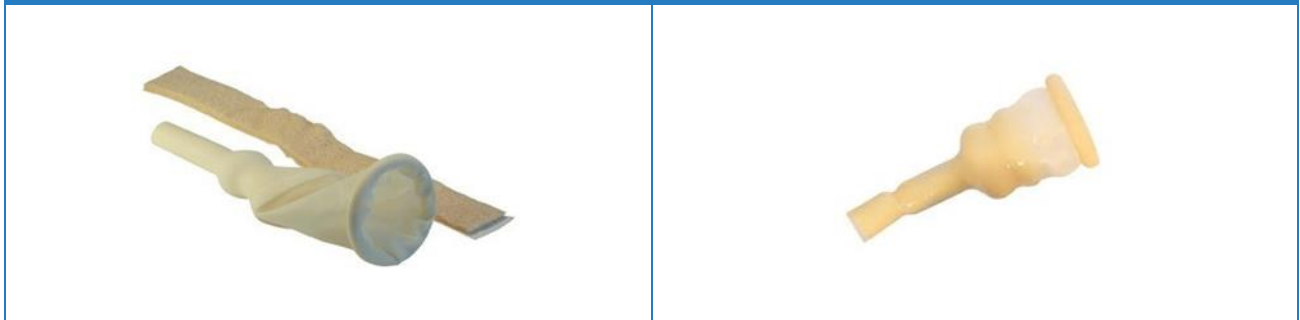
- Only staff trained by an Appropriately Qualified Health Professional can perform this procedure.
- Ensure that the person's staffing preference is applied to this procedure, as detailed in their [NDIS LWB 5531 Personal Care - Plan](#).
- This procedure is a guide only and may not be appropriate in all circumstances. Therefore, instructions from an AQHP must always be obtained and followed.
- This procedure should be read in conjunction with the [NDIS LWB 5600 High-Intensity Daily Personal Activities Procedure](#), [NDIS LWB 5501 Health and Wellbeing – Procedure](#), and in consultation with the person we support or their Uridome Application and Care – Plan.

This information is intended as a guide only and may not be appropriate in all circumstances. The person's support requirements must be documented in a support plan by an AQHP, such as a Continence Nurse, Urologist, or Doctor.

The [NDIS LWB 5667 HIDPA Uridome Application and Support - Plan](#) should be provided for use, or the AQHP may provide instruction in their format.

NOTE: The Uridome is usually applied after daily bathing/showering.

Image of Uridome



Uridome Application and Support Procedure



Check

- Check and follow the person's Uridome Application and Support – Plan.
- Check that the required equipment and consumables are available and ready for use.
- Confirm how the person would like to be actively involved in their support, as outlined in their plan, and to their chosen level.
- Explain the procedure to the person and seek their consent to proceed.

- Check for abnormalities, including bruising, pressure injury, and skin tears.



Support

- In Spinal Cord Injury, **Autonomic Dysreflexia** can be related to a blocked urinary device. **This is a medical emergency, immediately call an Ambulance (000) and follow the person's care plan to alleviate symptoms. Do not leave the person alone.**

Constriction of the Penis

- Use of an ill-fitting or too-tight Uridome will cause constriction of the penis. This can lead to loss of blood supply to the area, causing tissue necrosis and possible gangrene. Remove the Uridome immediately should the person complain of numbness, tingling or pain. Localised swelling or redness may be observed. **Seek urgent medical advice if constriction of the penis is suspected.**

Distended (swollen) or hyperactive bladder

- This may result from a urinary tract infection, bladder or kidney stones, or a urological procedure such as inserting a urinary catheter. The bladder may become distended due to a blockage, the catheter not draining, infection or an enlarged prostate in males. **This is a medical emergency, and an ambulance should be called immediately.**

Urinary Tract Infection

- Report signs of a urinary tract infection immediately: urine may be cloudy, blood-stained, and have an offensive odour. The person may have a fever, chills, and sweating. Urine may be passed frequently with a burning sensation. **Seek medical advice immediately.**

Skin Breakdown

- Trauma to the skin can be caused by rubbing, chafing, and irritation. In addition, the person may have an allergy to the Uridome, especially if it is latex. The person should be supported to find an alternative option.
- If symptoms persist, **seek medical advice**. Do not place the Uridome over broken skin. Instead, discuss other options with the person, such as using a urinary collection bottle or incontinence pad as a temporary measure.

The Urine Bag does not Fill.

- The Uridome may be twisted or dislodged. Check all tubing for kinking or blockages. If blocked, replace the drainage bag immediately and observe the urine output. In addition, a vacuum may have formed at the end of the Uridome, preventing urine from draining. This can be resolved by briefly disconnecting the drainage device.

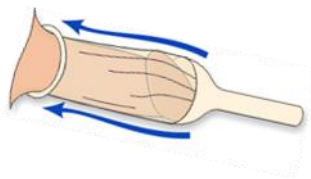
The Uridome Leaks or Becomes Displaced

- The Uridome could be the incorrect size. Ask the person to consent to check with the continence nurse or Doctor. Use of moisturisers, creams or powder should be avoided as these will affect the adhesion of the Uridome
- Wash your hands.
- Put on the correct personal protective equipment (PPE) before attending to the person or handling any Uridome equipment. Refer to the [NDIS LWB 5507 Let's Talk About PPE for Support Activities](#) for the correct PPE requirements.

Applying the Uridome

- Select a private location free from distraction to perform the procedure per the person's choice and preferences.
- Maintain the person's dignity and privacy during the procedure.
- Assist the person to get into a suitable and comfortable position.
- Wash the penis with soap and water if necessary. Rinse and dry. The penis must be completely dry before applying the Uridome.
- Assess the penis for irritation or redness – do not apply the Uridome if the skin is broken or irritated. Consult a health professional.
- If pubic hair causes issues during the application, a protective cloth placed over the base of the penis can prevent hair from getting caught. Another tip to keep the hair out of the way is to tear a small hole in the centre of a paper towel and then slip this over the penis to the base. Some people may prefer their pubic hair to be trimmed.
- Roll the Uridome onto the penis. If the person is uncircumcised, do not pull back the foreskin.
- Leave a 2-3 cm space between the tip of the penis and the end of the Uridome.

Applying the Uridome



- Attach the Uridome as per the manufacturers' instructions. If the tape is used to secure the Uridome, ensure it is not too tight and apply it lengthwise rather than around the penis to prevent constriction.
- Make sure the edge of the Uridome does not roll back to form a tight band around the penis.
- Check that there are no ridges, ripples or wrinkles. If any are present, remove the Uridome and reapply.
- Connect the drainage bag with a tube to the connector tip on the Uridome.

- Make sure the tube is free of twists and kinks and that urine can flow freely into the bag.
- Secure the drainage bag and ensure the tap is closed to prevent urine from leaking from the bag. If the bag is strapped to the person's leg, ensure it is secure but not too tight.

Secure the drainage bag.



Monitor the Person we Support

- Check the penis within 30 minutes of application to ensure the tape is not too tight and there are no allergies: look for swelling, change in colour and discomfort. Check also for good adhesion of the Uridome. (Gloves are required for this check. Other PPE is only required if you need to remove, adjust or replace the Uridome)
- If the person complains of pain or discomfort at any stage or if swelling, redness or irritation is observed, contact a health professional.
- Check for leakage of urine regularly.
- Check the penis 4 hourly to ensure the tape is not too tight and there are no allergies or skin breakdown: look for swelling, change in colour, rubbing or chafing and discomfort.

Drainage System

- A closed drainage system should be maintained to reduce the risk of urinary tract infection. The prevention of urinary tract infections is critical. Prevention can be aided by using the correct hand hygiene and PPE whenever performing Uridome support.
- The leg bag is usually worn under clothing and attached to the thigh with leg straps.

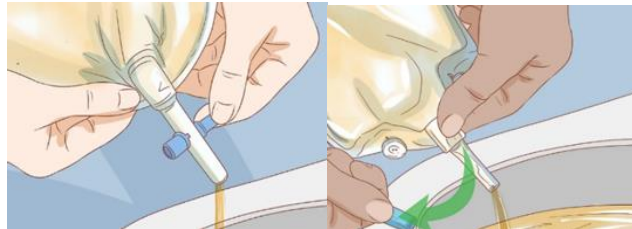
Leg Bag Placement



- If the person uses a wheelchair, the drainage bag may be worn on the calf or hung on the wheelchair. In addition, some people use a drainage bag cover to maintain dignity in the community.
- Empty the drainage bag as necessary. When the urine bag fills, it becomes heavier and may stretch the straps or become disconnected. Therefore, the drainage bag should be emptied when it is ½ to ¾ full. Never let the drainage bag become full.

- The leg bag should be emptied into a suitable container or directly into the toilet as per the person's choice and preference by opening the drain tap on the lower end of the leg bag. The type of drain tap may differ depending on the kind of leg bag used.

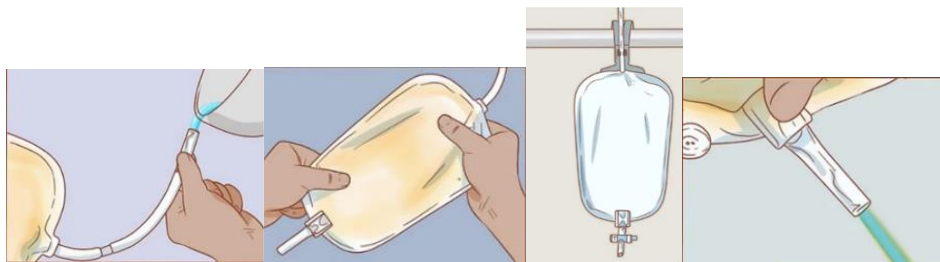
Emptying the Leg Bag



Attaching and Cleaning Overnight Bag

- The larger overnight bag is attached to the leg bag by connecting the plastic tip on the tube to the drainage tap at the base of the leg bag. Do not remove the leg bag from the Uridome; this will break the closed drainage system.
- Open the drainage tap on the leg bag to allow the urine to run into the overnight bag. Ensure the drainage tap on the overnight bag is in the closed position.
- The overnight bag should be placed on an appropriate stand below the level of the bladder to ensure it does not come into contact with the floor.
- The leg bag should remain strapped to the person's leg overnight to prevent it from pulling and becoming disconnected.
- When removing the overnight bag, ensure the drainage tap on the leg bag is closed.
- Empty the contents of the bag into the toilet. Record the amount if required.
- After each use, rinse the long-term overnight bag or re-usable leg bag with warm tap water, soak for 20 minutes in the sterilising solution, and then dry in a well-ventilated area out of direct sunlight.
- When hanging to dry, place the cover over the plastic tip on the tubing.

Cleaning the Overnight Bag



Change the urine bag at least once a week or as the AQHP recommends.



Report

- Record the urine colour, odour, and amount on the [NDIS LWB 5668 HIDPA Urine Output - Recording Chart](#)

- Record any abnormalities, including bruising, pressure injury, and skin tears, in progress notes and organise for medical review of any abnormalities. See [NDIS LWB 5554 Responding to Unexplained Bruising Suspicious Mark or Injury – Procedure](#) and report in an i-Sight event.
- Report any concerns or issues related to the person's Uridome support immediately to the Disability Support Leader¹ or On Call.

For Further Guidance and Advice

Contact the AQHP who developed the person's HIDPA Uridome Application and Support Plan.

¹ All references to Disability Support Leader (DSL), includes all Frontline Leadership roles, such as House Supervisor.