Product Information Sheet

PrimaFit - Female	
Classification	**Urinary Continence Containment: External Catheter Female**
British Columbia Practice Statement	• The PrimaFIt female external catheter is to be used in consultation with a NSWOC/NCA.
Key Points	• PrimaFit Female External Catheter System is a device designed to manage urine output as an alternative to an indwelling urethral catheter thereby avoiding catheter associated urinary tract infections (CAUTI) and to an incontinent brief, minimizing the risk for Incontinent Associated Dermatitis (IAD). • The catheter system is designed with a flexible device which collects urine when voided. The device is connected to a tubing, which in turn, must be connected to low continuous suction. Urine is collected in the suction cannister. • Device is latex-free.
Indications	• Use for adolescents and adults with a female anatomy who are on restricted activity, (e.g., bedrest) or bed-bound: ○ For the monitoring of urine output. ○ For the management of urine incontinence. ○ As part of the treatment plan of IAD or IAD related sacral coccyx pressure injury. ○ For collection of urine when on restricted activity, (e.g., bedrest).
Precautions	• Do not use for those: ○ Who are mobile. ○ Who are up in the chair. ○ Who are agitated and/or confused. ○ Whose peri-genital skin is irritated or open. ○ Who are experiencing frequent incontinent loose bowel movements; may be used in conjunction with a fecal management system. ○ Who require a prone position. • Do not use with peri-genital barrier creams as these may interfere with the device's suction. • Use with caution if client has had recent surgery done to the vulva or pelvic area.
Contraindications	• Do not: ○ Use for those with a sensitivity or allergy to the components of the device. ○ Place the device internally. ○ Use for those with urinary retention. ○ Use for those who cannot use a tampon when menstruating. ○ Use for those who have surgical wounds in the peri-genital area.
Formats & Sizes	• Package ○ Device – one size only.

Directions	Rationale / Key Points
Selection	
In addition to the device, gather the following: • No rinse skin cleanser and cloth/wipe. • A suction machine able to provide continuous low suction at minimum of 40mmHg. • Suction tubing long enough run from the suction machine, (e.g., the wall), to the person's lower abdomen. • Securement for the tubing, (e.g., (stabilization device, tape or hydrocolloid dressing/strip).	

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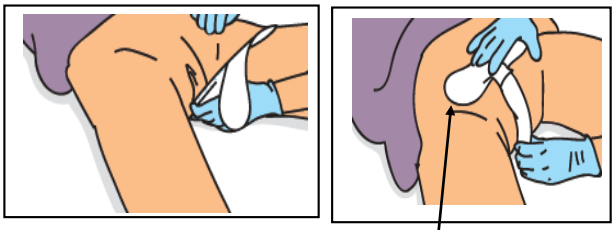
Directions	Rationale / Key Points
Preparation	
Set up the suction and suction tubing. Position the client in supine position, bend knees and then abduct the legs (frog position). If needed, trim hair from lower abdomen area where the adhesive pad will sit. Cleanse the genitalia from front to back with no-rinse cleanse and cloth/wipe. Pat area dry. Assess for skin integrity. Attach suction tubing to the device's suction tubing connector, ensure connection is tight.	Client can also be positioned side lying with knees bent and upper leg open to expose peri-area. Hair may interfere with the adhesion of the pouch's pad and cause discomfort when the pad is removed. Do not use device if peri-genital skin is irritated or open.
Application	
Hold the device with the tapered end pointing downward; the fabric side of the catheter goes against skin. Gently separate the folds of the labia, (see A) place the tip of the device just above the anus and lay the device down between the labial folds and against the urethral opening. Hold the device in place and curve it (see B) towards the lower abdomen. Remove the liner from the adhesive pad and secure the pad to the skin above the pubic hairline. Ensure catheter is sitting correctly in between the labial folds. Stabilize the tubing on the abdomen with tape or hydrocolloid strip; align the tubing so the person will not be laying on it when positioned side-laying. Set the suction machine at 60mmHg **continuous** suction.	**Image A** **Image B**  Document on the abdominal adhesive pad the date and time the catheter was applied.
Daily Care	
With each repositioning, assess that the device is in position, the suction tubing is not kinked, and that urine is flowing into the suction cannister. Empty cannister as needed.	
Removal	
Ensure the suction is on while the catheter is being removed. Position the person in supine position, bend the knees and then abduct the legs (frog position). Separate the labia, gently lift the device out of the area.	
Frequency of Change	
Remove device every 12-24 hours or sooner if device is soiled with body fluids other than urine (e.g., stool or blood). Provide peri-care, assess for skin issues; sensitivity related to the adhesive pad or device (e.g., chaffing) and pressure injury.	If sensitive to the adhesive pad, do crusting technique to area under the pad and reapply the device. If pressure injury or redness/irritation noted, discontinue the use of the device.
Expected Outcomes	
Urine is contained/collected without leakage. Product performs as expected.	If product does not perform as expected, notify NSWOC/Wound Clinician and then consider submitting a Supply Chain Product Concern Form.
For further information please contact NSWOC/Wound Clinician	