

# Magic<sup>3</sup><sup>®</sup>

INTERMITTENT CATHETER

Bard Medical Division is the world's leading developer and manufacturer of silicone catheters for urological continence care and bladder drainage. We have dedicated ourselves to improving lives through advanced technology, excellent product performance, and greater product options.

## Summary of Indications and Warnings

### INTERMITTENT CATHETERS

Intermittent catheters are intended for draining urine from the bladder. Reuse of a single use device may create a risk of patient or user infection. Please consult product labels and inserts for more detailed safety information and instructions for use.

For the antibacterial intermittent catheters, see below for summary of indications and warnings.

### NITROFURAZONE-COATED INTERMITTENT CATHETERS

Summary of Indications, Warnings, Contraindications, Precautions, and Adverse Reactions: Intermittent catheters are intended for use by adult, male and female patients for draining urine from the bladder. Efficacy of the catheter in preventing urinary tract infections during intermittent use has not been established. The device is not intended to be used as a treatment for active urinary tract infections. Do not use in individuals with known sensitivity to nitrofurazone. Use of certain antimicrobial agents may allow overgrowth of non-susceptible organisms including yeast and fungi. If this occurs, or if irritation, sensitization or superinfection develops, discontinue use and institute appropriate therapy. Safety and effectiveness in children has not been established. Pregnancy Category C: Nitrofurazone has been shown to have an embryocidal effect in rabbits when given in oral doses thirty times the human dose. There are no adequate and well controlled studies in pregnant women. Nursing mothers: It is not known if this drug is excreted in human milk and because of the potential for tumorigenicity shown for nitrofurazone

in animal studies, a decision should be made with your healthcare provider whether to discontinue nursing or to discontinue use of the catheter. Sensitization and generalized allergic skin reaction are known to occur in 1.2% of patients treated with topically administered nitrofurazone. Allergic reaction should be treated symptomatically.<sup>1</sup> Glascock HW, et al Is nitrofurazone a primary irritant or a potential sensitizer? Review of Allergy. 1969;23:54-8. Reuse of a single use device may create a risk of patient or user infection; compromise the device which may lead to device failure and/or injury, illness or death of the patient. Carcinogenesis, Mutagenesis and Impairment of Fertility: Nitrofurazone has been shown to produce mammary tumors when fed in high doses to female Sprague-Dawley rats. The relevance of this to topical use in humans is unknown. Dietary dosage levels of 60 and 30 mg/kg/day shortened the onset time of the typical mammary gland tumors associated with older female rats. These tumors exhibited the same histological characteristics seen in the spontaneously occurring tumors, and were seen only in the female rats. No mammary tumors were seen in rats treated with nitrofurazone orally in the diet for 1 year at levels of approximately 11 mg/kg/day. Spermatogenic arrest was noted in the male rats in dietary dosages of 30 mg/kg/day and above, after one year on test.

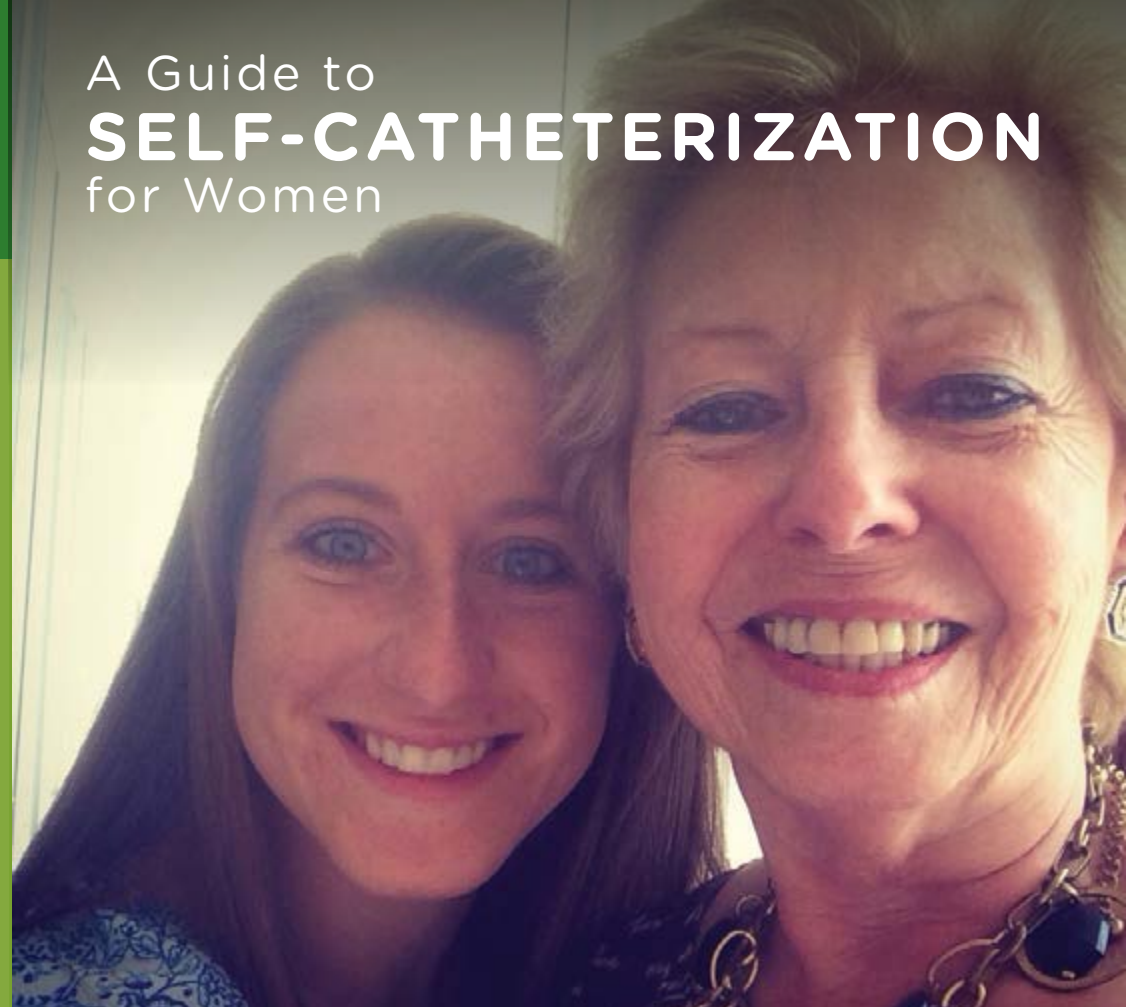
Handle and dispose of in accordance with accepted medical practice and applicable local, state and federal laws and regulations.

Please consult product label and insert for any indications, contraindications, hazards, warnings, cautions and directions for use.

C. R. Bard, Inc.  
8195 Industrial Blvd., Covington, GA  
800-243-3315  
www.bardcare.com

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# A Guide to SELF-CATHETERIZATION for Women



# Magic<sup>3</sup><sup>®</sup>

INTERMITTENT CATHETER



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Intermittent self-catheterization (ISC) is a simple procedure that drains urine from the bladder. It can be carried out safely at home, at work, or when traveling. ISC should not restrict your busy life. The primary purpose of this booklet is to provide instructions for use concerning the MAGIC<sup>3</sup> Catheter. Other recommendations are for informational use only and may not apply to your condition. Always consult with your healthcare professional.

## Take Back Control of Your **BLADDER**

## **MANAGEMENT**

CLINICIAN:

CLINIC OR HOSPITAL:

TELEPHONE NUMBER:

EMERGENCY NUMBER:

CATHETER:

FR SIZE:

REF NUMBER:

GENERAL INFORMATION:

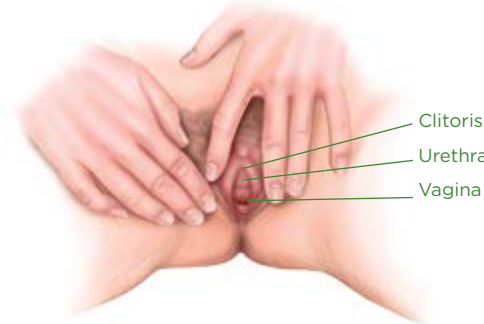
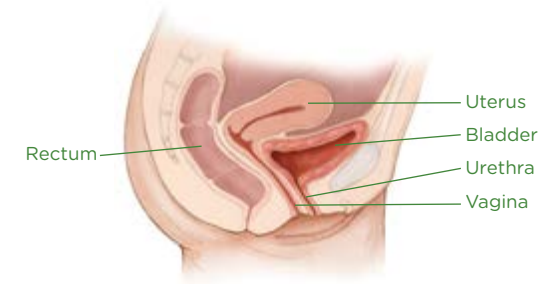


# USEFUL INFORMATION ABOUT YOUR ANATOMY

The bloodstream carries the body's waste products to the kidneys where they are filtered from the blood and combined with water to produce urine. The urine flows - via tubes called ureters - from the kidneys to the bladder.

The bladder acts as a storage vessel for urine. As it gradually fills with urine, the stretch receptors in the bladder wall send messages to the brain that it is time to think about emptying. When functioning normally, the bladder receives signals from the brain that cause the urethral sphincter to open and the bladder walls to contract. The urine is then discharged from the bladder through the urethra. A woman's urethra is about 1.5 inch long and runs from the bladder to outside the body at a point between the clitoris and vagina.

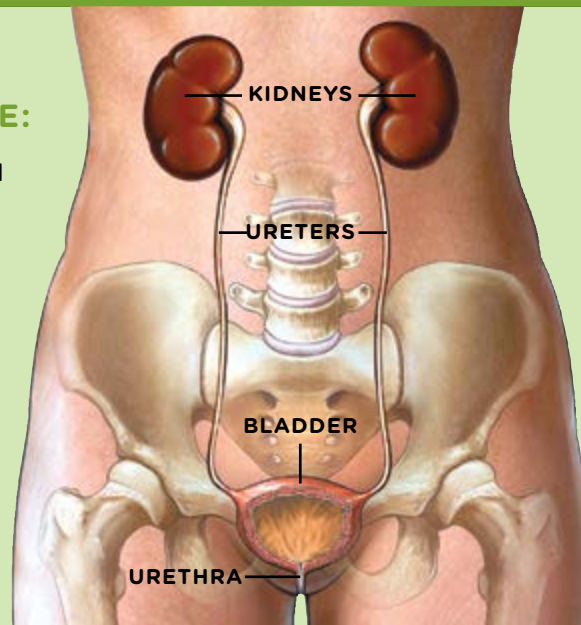
Urination typically occurs 4-6 times per day, or whenever the bladder collects 200-400ml of urine. Production of urine slows down during the night, decreasing the need for urination.



Normally the bladder will be virtually empty when you finish urinating, but in some people the process of urination remains incomplete, leaving a residual pool of urine in the bladder. Residual urine provides a haven for bacterial growth and may lead to a urinary tract infection.

## REASONS THAT MAY CONTRIBUTE TO URINARY INCONTINENCE:

- > Nerve damage, such as spinal cord injury or diseases that affect the nervous system
- > Poor bladder tone
- > Back injury
- > Pelvic surgery
- > The presence of urethral obstructions
- > Problems with the normal feedback mechanism between bladder and brain
- > Constipation



## HELPFUL HINTS FOR BLADDER MANAGEMENT

- > Always follow the advice of your healthcare professional. The following hints may not apply to you.
- > Always maintain a good healthy diet and keep your fluid intake up at a level of about 6-8 cups each day.
- > Contact your clinician for advice if you become constipated as this can affect your bladder function.
- > If your urine becomes cloudy or has an unpleasant odor, or you have a burning sensation or discomfort while passing urine, increase your fluid intake and contact your clinician as these symptoms may indicate a urinary tract infection.
- > Should you run an elevated temperature, contact your clinician immediately.

## INTERMITTENT SELF-CATHETERIZATION (ISC)

If the bladder cannot be emptied completely through normal urination, it can be drained by inserting a thin tube up the urethra and into the bladder. The tube, called a catheter, is removed when drainage is complete.



This procedure is called ISC and most women can easily learn to do it themselves. Upon prescription from your doctor, ISC is taught by specially trained healthcare professionals who provide training and advice to ensure correct procedures are followed to minimize risks.

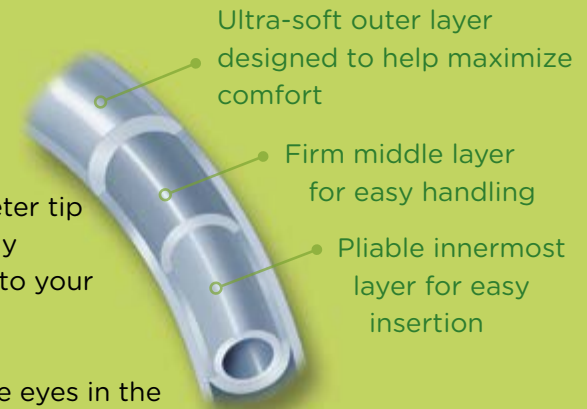
## TIPS FOR INTERMITTENT SELF-CATHETERIZATION

- > To help minimize the risk of contamination of the catheter, avoid touching the tip with your fingers and avoid letting it touch other surfaces.
- > Try to stay relaxed when inserting the catheter. If you feel tense, your sphincter muscle may tighten and make it difficult to insert or withdraw the catheter. Coughing can help relax your sphincter muscle.
- > You should continue to empty your bladder using the catheter during your menstrual cycle. If you use a tampon always remove it before commencing the catheterization procedure.
- > Remember that your catheter is designed to be used one time only. After each use, the catheter should be discarded in a suitable receptacle.

## ABOUT YOUR MAGIC<sup>3</sup>® INTERMITTENT CATHETER

Your MAGIC<sup>3</sup>® intermittent catheter with m<sup>3</sup> technology has many special features that help make it soft and comfortable to use, but easy to handle.

- > Designed from a unique composite of three distinct all-silicone layers.
- > The tapered seamless catheter tip is designed to pass smoothly through your urethra and into your bladder.



- > Four comfort-sized drainage eyes in the catheter tip allow urine to flow through the catheter tube and into the toilet or a collection device.
- > The funnel shaped catheter outlet end may also be connected to a urine collection bag, if preferred.
- > The all-silicone design eliminates allergies, toxins or disposal concerns that may be associated with latex and PVC catheters.
- > Available with a hydrophilic coating that becomes slippery when wet, for virtually friction-free insertion and removal.
- > Available with an antibacterial coating that has demonstrated to produce localized antibacterial activity in pre-clinical testing.\*

*\*Pre-clinical testing may not correlate with outcomes in humans*

# HOW TO PREPARE AND USE YOUR MAGIC<sup>3</sup>® INTERMITTENT CATHETER

Always try to pass urine and empty your bladder as much as you can before using an intermittent catheter.

## Step 1

Wash your hands thoroughly with soap and water and dry them. Washing your hands properly will help ensure that you don't accidentally contaminate the catheter. You should pay particular attention to washing between your fingers and the backs of your hands - these are areas that are all too often overlooked.



## Step 2

### Standard

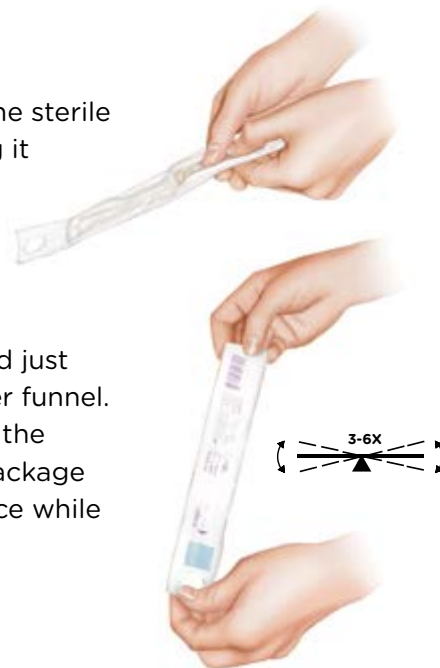
Carefully open the catheter package to expose the entire length of the catheter. Lubricate the tip and shaft of the catheter with water-soluble lubricant being careful not to place the catheter on an unclean surface.

### Hydrophilic

Prior to opening the package, release the sterile water from the foil packet by squeezing it firmly between your fingers and thumb.

Tip the catheter pouch end-to-end three to six times to thoroughly wet the catheter surface.

Peel open the package at the funnel end just enough to allow you to grip the catheter funnel. Don't remove the catheter just yet. Use the adhesive tab at the funnel end of the package to stick it to a nearby dry, vertical surface while preparing to catheterize.



## Step 3

Get yourself in a comfortable position and wash around the urethral opening, spreading the labia and wiping from front to back using a new alcohol-free wet wipe or soap and water. (Wiping from back to front can spread bacteria from the perineum and should be avoided). You can choose from several different positions such as standing up, lying down or sitting.

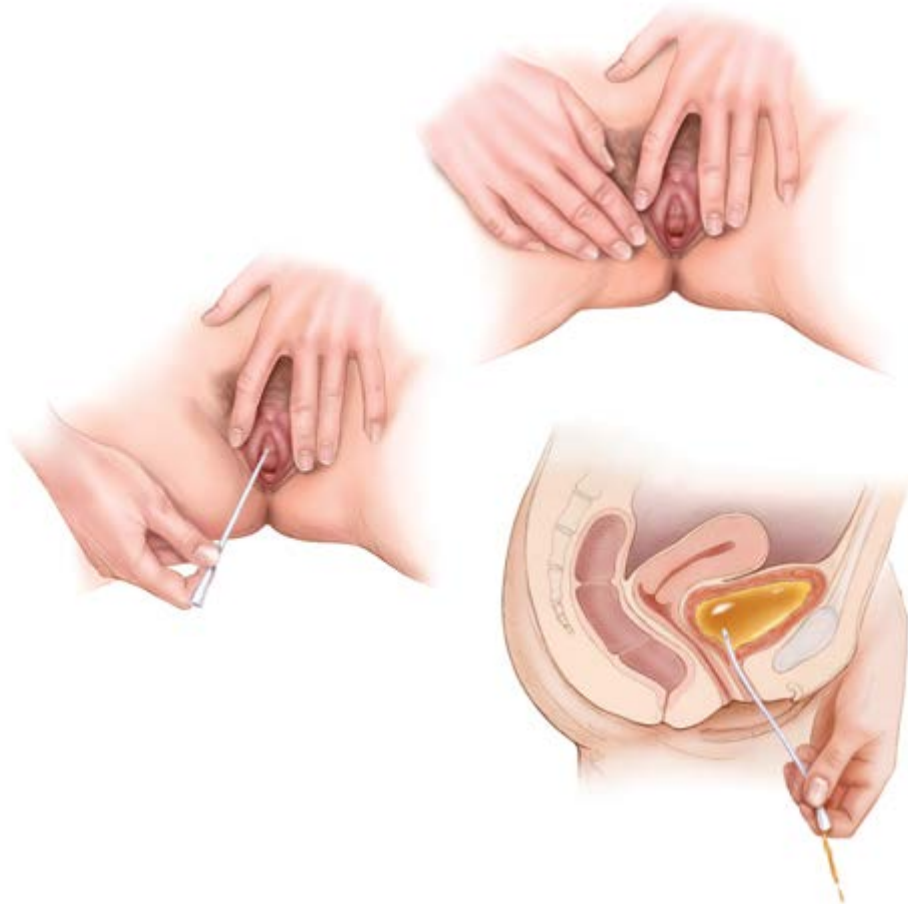


# HOW TO PREPARE AND USE YOUR MAGIC<sup>3</sup> INTERMITTENT CATHETER

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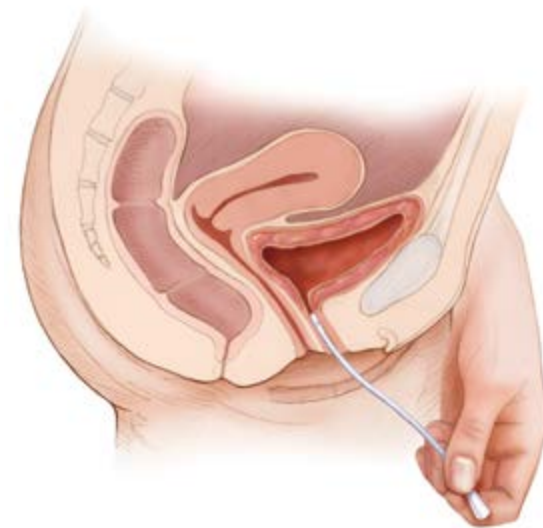
## Step 4

Wash your hands again and remove the catheter from the package, holding the funnel end. Spread the labia with the non-dominant hand. With the dominant hand, insert the catheter tip into the urethral opening, allowing it to pass gently up into the bladder until urine begins to flow. Advance the catheter another inch. A well-placed mirror will help you to locate the urethral opening, especially when you are learning the technique.



## Step 5

When urine has stopped flowing, slowly withdraw the catheter. If urine begins to flow again wait until it stops, then continue to fully withdraw the catheter.



## Step 6

Finish by disposing of the catheter and its packaging in a waste receptacle - do not flush it down the toilet. Wash your hands with soap and water, just as you would normally do.



## FREQUENTLY ASKED QUESTIONS

**How often should I catheterize?** This will depend on the amount of your fluid intake, the amount of residual urine to be drained and the effect of any medication you may be taking. Some people may only need to catheterize once daily, while others may catheterize up to six times a day. Your clinician will advise on a schedule that will suit you.

**How much fluid should I drink?** Depending on your doctor's advice and your health, you should drink about 6-8 cups of fluid every day.

**What do I do if I can't insert the catheter?** Just relax for a few minutes and try again. You may be anxious causing your sphincter muscle to tighten. Coughing may help. If you still have difficulty, contact your clinician for further advice.

**What if there is blood in my urine?** Sometimes there may be specks of blood on the catheter or slight bleeding after removal. Don't worry, as this will usually clear up in a couple of days. If the bleeding persists, you should contact your clinician for advice or go to the emergency room at your local hospital.

**What if the catheter won't come out?** This can happen if you are tense. When you are tense your muscles can go into spasm and prevent the catheter from coming out. Eventually these muscles will relax and allow you to remove the catheter, so rest for a few moments then try again. Coughing several times as you begin to remove the catheter will also help. If these suggestions don't work, you should contact your clinician or go to the emergency room at your local hospital for help.

**Can I travel overseas?** Ask your clinician for a letter stating that you are carrying the catheters to manage a medical problem.

**Which type of catheter should I choose?** There are many different types of catheters and your clinician will show you a selection from those that are suitable for you. Together you will be able to choose one that suits you best.

**Does Intermittent Self Catheterization (ISC) hurt?** It may feel like a strange sensation at first, but ISC should not be painful. For some the urethra is more sensitive when first learning, but ask your doctor for advice if this does not settle with time.

**From now on, will I always have to catheterize?** This will depend on the underlying reasons for catheterization. Sometimes ISC is a temporary measure until your bladder and urinary sphincter regain normal function. You should report any changes in drainage volume or pattern of passing urine to your clinician who will review the clinical need for continuing ISC, or altering the frequency.

**What should I do if I forget to catheterize?** You should catheterize as soon as you remember. Then continue as normal at the regular intervals you have been advised. Remember that you must completely empty your bladder to remove any residual urine and reduce the risk of infection.

**What happens if I do not catheterize as often as I was told to?** If you miss catheterizations once or twice don't worry, but if this happens often it can cause various adverse events such as a urinary tract infection or urinary leakage. If the pressure in your bladder becomes too high there is a risk that your urine may back up to your kidneys, which can cause serious injury.

**What if the catheter goes into my vagina by mistake?** Simply remove the catheter and dispose of it, then start again with a new catheter.

**Note:** The frequently asked questions are provided as general health guidelines and may not be applicable to your particular health condition. Your individual health status and any required medical treatments can only be properly addressed by a professional healthcare provider of your choice. Remember: Always consult with your healthcare professional.

# OUTPUT CHART (4 WEEKS)

Each day record the time and amount of urine you voided normally or via a catheter (measured in ml/cc).

## WEEK 1

Time	P/C	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							

## WEEK 2

Time	P/C	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							

**P** = Urine was passed normally  
**C** = Urine was passed via catheter

## WEEK 3

Time	P/C	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							

## WEEK 4

Time	P/C	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							
	P							
	C							

**P** = Urine was passed normally  
**C** = Urine was passed via catheter



## HOW TO OBTAIN SUPPLIES

Your clinician will provide you with a prescription for intermittent catheters. Ask your clinician to write down the description and codes of the catheter selected for you in the front of this booklet. The order numbers shown here will help to identify the correct product.

CATHETER	REF NUMBER	FR SIZE
<input type="checkbox"/> MAGIC <sup>3</sup> Go <sup>®</sup>	518XX	<input type="checkbox"/> 10 FR
<input type="checkbox"/> MAGIC <sup>3</sup> <sup>®</sup>	513XX	<input type="checkbox"/> 12 FR
<input type="checkbox"/> MAGIC <sup>3</sup> <sup>®</sup> + Antibacterial	519XX	<input type="checkbox"/> 14 FR
<input type="checkbox"/> MAGIC <sup>3</sup> <sup>®</sup> + Hydrophilic	516XX	<input type="checkbox"/> 16 FR
<input type="checkbox"/> MAGIC <sup>3</sup> <sup>®</sup> + Antibacterial + Hydrophilic	515XX	<input type="checkbox"/> 18 FR
		<input type="checkbox"/> 20 FR

**Magic<sup>3</sup><sup>®</sup>**  
INTERMITTENT CATHETER

Supplies can be obtained from a medical supply company. They offer a discreet and convenient way to obtain supplies quickly and easily. Additionally, they will process your insurance claims for you at no additional cost. Ask your clinician to recommend a medical supply company or call us at 800.243.3315 for assistance.



## ADDITIONAL RESOURCES

## NOTES

Bard Medical Division	800.243.3315 www.bardcare.com
Bard Liberator Medical	888.244.0789 www.liberatormedical.com
American Urological Association Foundation	410.689.3700 www.auafoundation.org
American Spinal Injury Association (ASIA)	404.355.9772 www.asia-spinalinjury.org
Christopher & Dana Reeve Foundation	800.539.7309 www.christopherreeve.org
National Association for Continence (NAFC)	800.BLADDER 843.377.0900 www.nafc.org
National Multiple Sclerosis Society	800.344.4867 www.nationalmssociety.org
National Spinal Cord Injury Association (NSCIA)	800.962.9629 www.spinalcord.org
Paralyzed Veterans of America (PVA)	800.555.9140 www.pva.org
The Simon Foundation for Continence	800.23Simon (800.237.4666) www.simonfoundation.org

*For further information or assistance contact your healthcare professional.*