**ANNEX 1**

**For use in South and West Hertfordshire and East and North Hertfordshire**

**CATHETER PRESCRIPTION REQUEST FORM**

This form must be used by HCT community nursing staff to request prescriptions to be issued by patients’ GPs for continence products, and is intended to promote improved governance, formulary compliance and waste reduction. The minimum quantity required to meet patient needs should be ordered to **avoid stockpiling**. Any requests for non-formulary items must be clinically justifiable and may be challenged.

**Please enter in CAPITALS:**

**Name of Patient: <Patient Name> Date of Birth: <Date of Birth>** Click or tap here to enter text.

**Address: <Patient Address> Tel: <Patient Contact Details>** Click or tap here to enter text.

**NHS Number: <NHS number>** Click or tap here to enter text.

**GP Practice Name & Address: <GP Name> <GP Details>** Click or tap here to enter text.

**Patient Pharmacy/Supplier Name:** Click or tap here to enter text.

**Delivery Details (Please tick relevant box):**

**Patient Collection  Home Delivery**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Product (Please refer to drug tariff for further information)** | | **Size & Codes** | | | **Ordering**  **Guide**  **Per 30 days** | | | **Quantity Required** | |
| **LUBRICANT GELS AND ACCESSORIES** | | | | | | | | | |
| Cathejell Mono (free from Lidocaine and Chlorhexidine) - pack of 1 | | 8.5gm - CJM 08501 | | | Order 1-3 | | |  | |
| Cathejell Mono (free from Lidocaine and Chlorhexidine) - pack of 1 | | 12.5gm - CJM 12501 | | | Order 1-3 | | |  | |
| Hydro-Caine Gel - pack of 1 | | 6mls - HYD006 | | | Order 1-3 | | |  | |
| Hydro-Caine Gel - pack of 1 | | 11mls - HYD011 | | | Order 1-3 | | |  | |
| Dressit Sterile Pack (pack of 10) | | Small/Medium - 908640 | | | 1 pack | | |  | |
| Dressit Sterile Pack (pack of 10) | | Medium/Large - 908650 | | | 1 pack | | |  | |
| Clinipod Saline 20mls - box of 25 | | 359-9933 | | | 1 box | | |  | |
| **CATHETERS** | | | | | | | | | |
| **Long Term use – Hydrogel Coated Latex**  Designed to remain in situ for up to 12 weeks.  Supplied with a pre-filled syringe for balloon inflation and an empty syringe for balloon deflation. | | | | | | | | | |
| Rusch Sympacath AquaFlate - Standard | | 12Ch - DH310112 | | | Maximum of 3 | | |  | |
| Rusch Sympacath AquaFlate - Standard | | 14Ch - DH310114 | | | Maximum of 3 | | |  | |
| Rusch Sympacath AquaFlate - Standard | | 16Ch - DH310116 | | | Maximum of 3 | | |  | |
| Rusch Sympacath AquaFlate - Female | | 12Ch - DH210112 | | | Maximum of 3 | | |  | |
| Rusch Sympacath AquaFlate - Female | | 14Ch - DH210114 | | | Maximum of 3 | | |  | |
| **Long term Use – 100% Silicone Latex Free**  Designed to remain in situ for up to 12 weeks.  Supplied with a pre-filled syringe of Glycerine for balloon inflation and an empty syringe for balloon deflation. | | | | | | | | | |
| 2 way Foley with glycerine filled syringe Uni-Flo (LINC) 5ml balloon  – Standard | | 12Ch - 08501205G | | | Maximum of 3 | | |  | | |
| 2 way Foley with glycerine filled syringe Uni-Flo (LINC) 5ml balloon – Standard | | 14Ch - 08501405G | | | Maximum of 3 | | |  | | |
| 2 way Foley with glycerine filled syringe Uni-Flo (LINC) 10ml balloon – Standard | | 16Ch - 08501610G | | | Maximum of 3 | | |  | | |
| 2 way Foley with glycerine filled syringe Uni-Flo (LINC) 5ml balloon  – Female | | 12Ch - 085012051G | | | Maximum of 3 | | |  | | |
| 2 way Foley with glycerine filled syringe Uni-Flo (LINC) 5ml balloon  - Female | | 14Ch - 085014051G | | | Maximum of 3 | | |  | | |
| **Long Term Use – 100% Silicone**  Designed to remain in situ for up to 12 weeks.  Second line option for regular catheter blockage with debris. | | | | | | | | | |
| Open tipped catheter with UniBal type balloon with glycerine filled syringe (LINC) - Standard | | 12Ch - 08451205G | | | Maximum of 2 | | |  | | |
| Open tipped catheter with UniBal type balloon with glycerine filled syringe (LINC) - Standard | | 14Ch - 08451405G | | | Maximum of 2 | | |  | | |
| Open tipped catheter with UniBal type balloon with glycerine filled syringe (LINC) - Standard | | 16Ch - 084516105G | | | Maximum of 2 | | |  | | |
| Open tipped catheter with UniBal type balloon with glycerine filled syringe (LINC) - Female | | 12Ch - 08471205G | | | Maximum of 2 | | |  | | |
| Open tipped catheter with UniBal type balloon with glycerine filled syringe (LINC) - Female | | 14Ch - 08471405G | | | Maximum of 2 | | |  | | |
| Open tipped catheter with UniBal type balloon with glycerine filled syringe (LINC) - Female | | 16Ch - 08471610G | | | Maximum of 2 | | |  | | |
| **CATHETER MAINTENANCE SOLUTIONS** | | | | | | | | | |
| Optiflo S Saline 0.9% Irrigation | | 50ml - CSS50 | | | Maximum of 4 | | |  | | |
| Optiflo G 3.23% Citric Acid | | 50ml - CSG50 | | | Maximum of 4 | | |  | | |
| Optiflo R 6.0% Citric Acid | | 50ml - CSR50 | | | Maximum of 4 | | |  | | |
| Bladder Infusion Kit (LINC) *To be used if catheter maintenance solution is needed more than once a week.* | | MCI/701 | | | 1 pack of 10 | | |  | | |
| **LEG BAGS** | | | | | | | | | |
| **Sterile Leg Bags**  5-7 day use with needle free port, lever tap, ridge connector, night drainage connector and Velcro anti-slip strap.  These products can also be used with urethral sheaths.  Including 1 pair of non-latex gloves and 1 pair of soft straps 5-7 day use, with needle free port. | | | | | | | | | |
| Sterile Leg Bag With Lever Tap (LINC-FLO) Direct tube  - **1st choice** | | | 500ml - LM500SD-L | | | 1 pack of 10 | |  | | |
| Sterile Leg Bag With Lever Tap (LINC-FLO) Short Tube 10 cm  – **1st choice** | | | 500ml - LM500MD-L | | | 1 pack of 10 | |  | | |
| Sterile Leg Bag With Lever Tap (LINC-FLO) Long Tube 30 cm  – **1st choice** | | | 500ml - LM500LD-L | | | 1 pack of 10 | |  | | |
| ProSys Leg Bag Slide Tap (CliniSupplies) Long Tube | | | 350ml - P350L | | | 1 box of 10 | |  | | |
| ProSys Leg Bag Slide Tap (CliniSupplies) Short Tube | | | 350ml - P350S | | | 1 box of 10 | |  | | |
| ProSys Leg Bag Slide Tap (CliniSupplies) Long Tube | | | 500ml - P500L | | | 1 box of 10 | |  | | |
| ProSys Leg Bag Slide Tap (CliniSupplies) Short Tube | | | 500ml - P500S | | | 1 box of 10 | |  | | |
| ProSys Leg Bag Slide Tap (CliniSupplies) Long Tube | | | 750ml - P750L | | | 1 box of 10 | |  | | |
| ProSys Leg Bag Lever Tap (CliniSupplies) Short Tube | | | 500ml - P500S-LT | | | 1 box of 10 | |  | | |
| ProSys Leg Bag Lever Tap (CliniSupplies) Long Tube | | | 500ml - P500L-LT | | | 1 box of 10 | |  | | |
| **Night Bags**  2 litre drainage bags.  Night bags should no longer be re-used in the community. A single use night bag is to be attached to the leg bag and disposed of daily. | | | | | | | | | |
| Sterile Non-Drainable Night Bag LINC Medical 2 litre overnight drainage bag (LINC-Flo) - **cost effective 1st choice** | | | 2 litre - LM2LS | | | 1 box of 10 x 3 | |  | | |
| Prosys Non- Sterile Drainable Night Bag With Tap (CliniSupplies) | | | 2 litre - PSU2 | | | 1 box of 10 x 3 | |  | | |
| Sterile Drainable Night Bag (LINC-Flo)  *\*Special order for larger output.* | | | 3 litre - LM3LS | | | 1 box of 10 x 3 | |  | | |
| **For bedbound patients for connection directly to a catheter for 24 hour usage OR for urethral sheath patients** | | | | | | | | | |
| CliniSupplies Lever Tap change 5-7 days | | | 2 litre - P2000 | | | 1 box of 10 | |  | | |
| **CATHETER VALVES** | | | | | | | | | |
| Care-Flo Sterile Catheter Valve (LINC) | | | CF1 | | | 1 Pack of 5 | |  | | |
| **CATHETER SECURING DEVICES** | | | | | | | | | | |
| Ugo Fix Leg Bag Holder (Optimum) | | | 24-39cm - 3005 | | | 1 Pack of 4 | |  | | |
| Ugo Fix Leg Bag Holder (Optimum) | | | 36-55cm - 3006 | | | 1 Pack of 4 | |  | | |
| Ugo Fix Leg Bag Holder (Optimum) | | | 40-70cm - 3007 | | | 1 Pack of 4 | |  | | |
| Ugo Fix Gentle Catheter Clip with soft silicone adhesive patch  (Optimum)\**Similar to Statlock.* | | | One size 3004 | | | 1 Pack of 5 | |  | | |
| Ugo Fix Catheter Strap (can be cut to size)  (Optimum) \**Similar to G-Strap.* | | | Medium 80cm - 3003 | | | 1 Pack of 5 | |  | | |
| **URINARY SHEATHS SELF ADHERING SILICONE** | | | | | | | | | | |
| InView Standard (Regular length) **– 1st choice** | | | 25mm - 97225 | | | 1 Box of 30 | |  | | |
| InView Standard (Regular length) **– 1st choice** | | | 29mm - 97229 | | | 1 Box of 30 | |  | | |
| InView Standard (Regular length) **– 1st choice** | | | 32mm - 97232 | | | 1 Box of 30 | |  | | |
| InView Standard (Regular length) **– 1st choice** | | | 36mm - 97236 | | | 1 Box of 30 | |  | | |
| InView Standard (Regular length) **– 1st choice** | | | 41mm - 97241 | | | 1 Box of 30 | |  | | |
| InView Special (Short length) **– 1st choice** | | | 25mm - 97125 | | | 1 Box of 30 | |  | | |
| InView Special (Short length) **– 1st choice** | | | 29mm - 97129 | | | 1 Box of 30 | |  | | |
| InView Special (Short length) **– 1st choice** | | | 32mm - 97132 | | | 1 Box of 30 | |  | | |
| InView Special (Short length) **– 1st choice** | | | 36mm - 97136 | | | 1 Box of 30 | |  | | |
| InView Special (Short length) **– 1st choice** | | | 41mm - 97141 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Standard | | | 25mm - 22025 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Standard | | | 28mm - 22028 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Standard | | | 30mm - 22030 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Standard | | | 35mm – 22035 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Standard | | | 40mm – 22040 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Short | | | 21mm - 22121 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Short | | | 25mm - 22125 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Short | | | 30mm - 22130 | | | 1 Box of 30 | |  | | |
| Conveen Optima (Coloplast) Short | | | 35mm – 22135 | | | 1 Box of 30 | |  | | |
| **INTERMITTENT CATHETERS** | | | | | | | | | | |
| **Intermittent catheters have not been added to the Catheter Formulary or Prescription Ordering Form. Usual usage is 5 – 6 times daily depending on the residual urine. Patients using more than 8 catheters a day should be referred to The Adult Bladder and Bowel Service for the specialist advice on bladder management.** | | | | | | | | | | |

**Please enter in CAPITALS:** Click or tap here to enter text.

**Name of Nurse: <Sender Name>** **Tel No: <Sender Details>** **Date: <Today's date>** Click or tap here to enter text.