

Continence Care Service

Admin Building, Astley Ainslie Hospital, 133 Grange Loan, Edinburgh, EH9 2HL

Telephone ordering line: 0131 537 4572

email: loth.continencecare@nhs.scot

Care Home Urology Appliance Request Form

This form should be completed by **Registered Nurses** using **BLOCK CAPITALS** and sent to the address above. Download form at: <https://services.nhslothian.scot/carehomes/services-bladder-and-bowel-health/>

Please note that incomplete forms cannot be processed and will be returned.

**Enter all items required. Submitting this form replaces all items previously requested.
To re-order, contact the ordering line at 0131 537 4572 (option 1).**

NOTIFICATION TO CANCEL ALL UROLOGY APPLIANCES RESIDENT DECEASED

RESIDENT DETAILS		CHI No:	
Resident Surname:		Resident Forename:	
Title:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Date of Birth:
Care Home Name:		Care Home Unit:	
Address:			
Area/Town:	Post Code:	Telephone:	
GP Name:		GP Practice:	
GP Address:			
Registered Nurse's Name:		Nurse Telephone:	

UROLOGY APPLIANCES (see page 2 for product names and code numbers)

Code Number	Product Name	Supply Now
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

Preferred Pharmacy:

Pharmacy Address:

Reason for Non-Formulary Request

Has this request been discussed with a Bladder and Bowel Nurse? Yes No

Signed by Registered Nurse:

Designation:

Print Name of Registered Nurse:

Date:

UROLOGY APPLIANCE FORMULARY PRODUCT NAMES AND CODE NUMBERS

For advice from the Bladder and Bowel Nursing Team email loth.bbnteam@nhs.scot

Foley Catheters - pack of 1	Long term (up to 12 weeks)		
	Hydrogel coated latex	All silicone	Open-ended all Silicone
Male/Standard Size 12	DH310112	DA310112	PCF12M10E
Male/Standard Size 14	DH310114	DA310114	PCF14M10E
Male/Standard Size 16	DH310116	DA310116	PCF16M10E
Male/Standard Size 18	DH310118	DA310118	PCF18M10E
Male/Standard Size 20	DH310120	DA310120	
Male/Standard Size 22	DH310122	DA310122	
Female Size 12	DH210112	DA210112	
Female Size 14	DH210114	DA210114	
Female Size 16	DH210116	DA210116	
Female Size 18	DH210118	DA210118	
Female Size 20	DH210120	DA210120	
Female Size 22	DH210122	DA210122	
Tiemann Size 16		850084-000160	

Instillagel 6ml - pack of 10	40-006
Instillagel 11ml - pack of 10	40-011
Uro-Tainer PHMB 0.02% Polihexanide 100ml - pack of 10	FB99965
Uro-Tainer Twin Suby G (Citric Acid 3.23%) 2 X 30ml - pack of 10	9746609
Uro-Tainer Twin Solution R (Citric Acid 6%) 2 X 30ml - pack of 10	9746625
Uro-Tainer NaCl 0.9% Saline – 100ml - pack of 10	FB99833

Leg Bags (sterile) with Velcro straps - pack of 10	Short Tube	Long Tube
T-Tap (350ml)	LM350MD-T	P350L
T-Tap (500ml)	LM500MD-T	LM500LD-T
T-Tap (750ml)	LM750MD-T	LM750LD-T
Lever Tap (500ml)	LM500MD-L	LM500LD-L
Lever Tap (750ml)	00-1752	00-2752

Night Bags (non-drainable) - pack of 10	LM2LNS
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Leg Bag Holders (washable) - pack of 4		Penile Sheaths	Ensure correct measurement	
Ensure correct measurement			Shorter length	Standard length
Small (24-39cm)	ME350-750S S	pack of 30	21mm	
Medium (36-55cm)	ME350-750S M		25mm	22025
Large (40-70cm)	ME350-750S L		28mm	22028
Extra-large (65-95cm)	ME350-750S XL		30mm	22030
XX-Large (75-105cm)	ME350-750S XXL		35mm	22035

Catheter Valves - pack of 5	CF1
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Adult Catheter Retaining Strap 50cm - pack of 5	PCS50
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