

**NORTH SHORE LONG ISLAND JEWISH HEALTH SYTEM
SMITH INSTITUTE FOR UROLOGY
STANDARD/POLICY/PROCEDURE**

Guidelines for Intravesical Drug Instillation

ANESTHETIC COCKTAIL

PURPOSE: To administer a combination of drugs directly into the bladder, thereby reducing systemic side effects. This particular intravesical cocktail has both diagnostic and treatment purposes. Instillation of the anesthetic medications can help determine the source of the pelvic pain. If the patient experiences immediate relief after the cocktail instillation, it strongly suggests that the origin of the pain is the bladder versus other organs or structures within the pelvic area. The anesthetic cocktail is used for pain management of patients with interstitial cystitis and Hunner's ulcer disease.

TREATMENT SCHEDULE:

This treatment may be given once or more than once per week, titrated to every 2 weeks, three weeks and four weeks based on patient's improvement.

EQUIPMENT:

1 Betadine swab
10 cc syringe
18 gauge needle
60 cc catheter tipped syringe
60 cc Leuer lock syringe (For patients needing size 10 French red rubber catheter)
1 Catheterization Tray set
2 % Xylocaine Jelly
1 sterile cup
1 pair of unsterile gloves

ANESTHETIC COCKTAIL:

Mix medications as ordered by physician. Cocktail contains:
Sensorcaine or Marcaine (Bupivacaine HCL) 0.5 %.
Heparin Sodium 1 milliliter (10,000 units/ml)
Kenalog (Triamcinolone Acetonide) 40 to 80 milligrams (*40 milligrams for Non-Hunner's Ulcer patients and 80 milligrams for Hunner's Ulcer patients*)
Gentamicin Sulfate 80 mg
2 % Xylocaine Jelly 15-20 cc's

SENSORCAINE OR MARCAINE (BUPIVACAINE HCL)

This is a long acting anesthetic given intravesically to provide longer, local pain control in the bladder.

HEPARIN SODIUM

Heparin is a chemical that is normally found in the bladder wall and seems to have a protective role in the bladder surface. This is added into the cocktail mixture to augment the bladder's normal protective surface. It inhibits scar formation and it also has anti-inflammatory properties.

KENALOG (STEROID)

The anti-inflammatory effect of the steroid helps control the local inflammatory process in the bladder wall of IC patients.

GENTAMICIN (ANTIBIOTIC)

Antibiotic is added to the cocktail mixture for prophylaxis against infection.

2 % XYLOCAINE JELLY

This is a short acting anesthetic added into the cocktail mixture to provide local anesthetic effect on the bladder.

PROCEDURE:

1. Identify patient with two identifiers, i.e. name and date of birth.
2. Assess/Review patient's history: Non-Hunner's ulcer or Hunner's ulcer and for history of poor urinary flow and urinary retention.
3. Verify signed MD orders on preprinted label for cocktail medication for intravesical treatment.
4. Adhere preprinted MD medication order label to a new progress note with patient identifier (label or written) and place in patient's chart.
5. Explain procedure and the "cocktail therapy" to the patient.
 - a) If the pain is coming from your bladder, you may feel relief in 5 to 15 minutes after the anesthetic cocktail is administered.
 - b) Initially, you may need this treatment more than once per week to relieve your urinary symptoms.
 - c) Try to hold the solution in your bladder for an hour, not more than two hours to avoid overstretching your bladder.
 - d) Rarely, urinary retention may occur. If this occurs, you may need straight catheterization in the office or in the emergency room.

- e) Very rarely, patients may experience a rebound effect in which there is an increase in urinary symptoms approximately 5 hours after anesthetic cocktail bladder instillation.
 - f) Prolonged relief from symptoms occurs usually around the 10th to the eleventh treatment period.
5. Wash hands. Don unsterile gloves.
 6. Clean the patient's urinary meatus with betadine swab.
 7. Administer local anesthesia by applying small amount of Xylocaine 2 % jelly first around the urinary meatus, then gently inserting the cone applicator into the urethra and squeezing in a small amount of the Xylocaine 2 % jelly into the urethra.
 8. Remove gloves.
 9. Wash hands.
 10. Mix ordered medications in a sterile cup with cap.
 - a) Remove cap
 - b) Add Lidocaine jelly to cup
 - c) Pour Bupivacaine HCl into cup
 - d) Draw up remaining medications with a 10cc syringe/18 gauge needle and add mixture to cup
 - e) Place cap on sterile cup and swirl to mix anesthetic cocktail
 11. Open the catheterization tray set and prepare patient for catheterization.
 12. Don sterile gloves.
 13. Open the lubricating jelly and squirt on sterile container found in the kit.
 14. Maintaining sterile technique, pick up the urethral catheter provided in the kit, lubricate the tip with the jelly and insert the catheter gently into the urethra.
 15. Empty the bladder by allowing the urine to flow out of the catheter, then insert the syringe and instill the medication cocktail by slowly pushing the plunger of the syringe.
 16. Remove the urethral catheter.
 17. Dispose of used materials or equipment.
 18. Remove gloves.
 19. Wash hands.
 20. Document patient assessment, observations, and treatment.
 21. RN must sign preprinted MD medication order label.

*Courtesy: Robert Moldwin, MD, 2007
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