Urinary retention after surgery: discharge

Original independent practice. Time allowed: 45 minutes (5 minutes reading and 40 minutes writing). Assume that today's date is 3 November 2026. Mr Manjon is being discharged home with a urinary catheter. You are a registered nurse on a surgical ward. Using the case notes, write a discharge letter to Ms Candelaria Manrique, District Nurse, District Nursing Service, 20 Community Road, SW1P 3BT, United Kingdom. Request a home visit for catheter assessment and self-care support, clearly identifying responsibility for catheter follow-up and the booked review. In your answer: expand the relevant notes into complete sentences; do not use note form; use letter format. The body of the letter should be approximately 180–200 words.

Choose one box per line: I = Include / C = Compress / O = Omit. Answers and reasons are on the webpage (scan QR).

	I	C	O
Patient details			
1. Name: Mr Heliodoro Manjon	☐	☐	☐
2. DOB: 14/03/1958 (68 yrs)	☐	☐	☐
3. Home: 8 Orchard Road, SW1P 3BT, United Kingdom	☐	☐	☐
4. Admitted 31/10/26; discharge home 03/11/26	☐	☐	☐
Social background			
5. Lives alone; previously independent with personal care	☐	☐	☐
6. Daughter staying tonight only; unavailable for ongoing catheter assistance	☐	☐	☐
7. Retired tailor; enjoys listening to radio dramas	☐	☐	☐
8. Daughter criticised her brother's spending during ward visit	☐	☐	☐
Medical history			
9. No previous urinary retention or catheter use	☐	☐	☐
10. No known drug or latex allergies	☐	☐	☐
11. Remote appendicectomy; no subsequent problems	☐	☐	☐
12. Reports normal urinary stream before this admission	☐	☐	☐
31/10–02/11/26 — admission and progress			
13. 31/10: elective inguinal hernia repair; wound remains dry	☐	☐	☐
14. Postoperative nausea settled; eating and drinking normally	☐	☐	☐
15. Constipation resolved after inpatient treatment; bowels now open	☐	☐	☐
16. 01/11: unable to void → urethral catheter inserted	☐	☐	☐
17. 02/11: trial without catheter unsuccessful; retention persisted	☐	☐	☐
18. 02/11: indwelling urethral catheter reinserted; leg bag attached	☐	☐	☐
31/10–02/11/26 — admission and progress			
19. Urology reviewed; discharge with catheter approved	☐	☐	☐
03/11/26 — current assessment			
20. Clear urine draining freely; no leakage or lower abdominal pain	☐	☐	☐
21. Afebrile; no shivering; mobilising independently	☐	☐	☐
22. Can empty leg bag; uncertain connecting larger night bag	☐	☐	☐
23. Teaching given: hand/entry-site hygiene, bag below bladder, avoid kinks	☐	☐	☐
24. Night bag, stand and written self-care information supplied	☐	☐	☐
Discharge plan			
25. District nurse: home visit 04/11; assess drainage, reinforce self-care/night-bag use; confirm independent management and adequate equipment supplies	☐	☐	☐
26. Urology nurse owns follow-up: trial without catheter 09/11, 10:00, urology clinic	☐	☐	☐
27. Leave catheter until urology appointment; no routine district-nurse removal requested	☐	☐	☐
28. Absent drainage with lower abdominal pain → urgent assessment for blockage	☐	☐	☐
29. Fever, shivering or new lower abdominal pain → prompt medical review	☐	☐	☐
30. Contact urology clinic if unable to attend; clinic details on supplied appointment letter	☐	☐	☐
31. Complained that ward television showed too much sport	☐	☐	☐

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