



Spina Bifida Clinic

Clean Intermittent Catheterization Instruction for Females

Child's Name _____ Catheter Size _____ Cath times _____

What is clean intermittent catheterization (CIC)?

CIC is a method of putting a thin, flexible tube (called a catheter) into the bladder to remove all the urine several times a day. It is used by people who cannot empty their bladder voluntarily.

Why use clean intermittent catheterization?

Completely emptying the bladder at frequent intervals (usually four or five times a day) can help meet three important goals:

1. Symptomatic urinary tract infections (UTIs), which may be caused by urine staying in the bladder where bacteria can grow, may be avoided or lessened.
2. Backup of urine (reflux) from a full bladder through the ureters to the kidneys, where it can cause permanent damage, may be prevented or improved.
3. Social continence, and avoiding the diapers, odor, and skin problems that accompany being wet, may be achieved.

How do we get started on CIC?

After evaluation of the child's urinary system function, the urologist may recommend clean intermittent catheterization. If needed, medications will be prescribed to increase the effectiveness of the program. An education session will be scheduled to teach parents how to perform the catheterization, how to obtain and care for the supplies, and when to seek follow-up treatment.

CIC is as easy as ABC!

A = anticipate needs, and gather supplies

1. Always use a clean, dry catheter.
2. Use a generous amount of water-soluble lubricant (such as K-Y jelly, *never* vaseline).
3. Gather soap, water, and washcloths or another method to wash hands and private areas (liquid soap is less likely to grow bacteria than bar soap).
4. If using a hydrophilic catheter, this is the time to pour clean water in the package that contains the catheter. You want the catheter to soak for 10-30 seconds.
5. Position your daughter as comfortably as possible, either lying down with knees bent in "frog-like" position, or sitting with legs spread apart. Make sure child is on a clean diaper or towel and the diaper area is clean of bowel movement.

B = begin

1. Wash your hands well with soap and running water and dry.
2. Lubricate the catheter generously.
3. Hold the labia open with your non-dominant hand using thumb and forefinger so that you can identify the urinary meatus (the small opening of the urethra, the tube that leads to the bladder).
4. Wash from front to back three times with soap and water, using a clean area of the clean washcloth or wipes. Rinse off soap.
5. Continue holding the labia open and insert the catheter gently about 1 inch beyond the point where urine begins to flow.
6. Hold the catheter in place until flow stops. Have child push with abdominal muscles or sit up to fully empty.
7. Remove catheter slowly, rotating it slightly. If flow begins, stop in that

position until flow stops again. To completely remove, pinch off catheter with fingers and remove. This will prevent urine in the tube from returning to the bladder.

C = clean up

1. Wash catheter and hands with soap and water after use. Rinse well (you may need a syringe) and let dry.
2. Store the used catheters in a clean, dry Ziplock bag. Always use a dry catheter (unless a water activated catheter or antibiotic coated catheter). Dry catheters on a clean paper towel.
3. Catheters should be changed every two weeks, earlier if they become stiff, brittle, or discolored.
4. If you are using a hydrophilic (water activated catheter) or antibiotic coated catheter, you can reuse after cleaning. Use them like a regular catheter apply water-soluble jelly prior to insertion.

When CIC joins your family?

At the beginning of the CIC program, it may seem confusing and difficult to adapt catheterization into your family lifestyle. However, in our experience, most parents and children accept the catheterization program and feel that it is an important contribution to good health, good hygiene, and better self-esteem for the child.

Some families find it helpful to keep several sets of catheterization supplies in various places, to keep up with their busy lives. A small Ziplock bag with clean catheters, lubricant, or antibacterial wipes, and a collection container can be kept in a purse/backpack, the car, and even at the babysitter or relatives' homes.

While the parent or other caregiver usually does CIC for a young child, self-catheterization is taught when children are ready to learn the technique and have the necessary hand-eye coordination.

It will help to explain to your daughter what you are doing, to teach her about the cath program, and to talk about the expectation that she will do self-catheterization when old enough.

What about infection?

If you suspect a urinary tract infection, contact your pediatrician. Signs and symptoms include:

- fever that does not have another obvious cause (sore throat).
- abdominal or back pain.
- pain on catheterization.
- decreased amounts of urine when cathed.
- underwear wet between caths.

Cloudy, hazy urine with a strong smell may indicate increased bacterial growth, but may not require treatment. Talk about this with the urologist or pediatrician.

Things to remember . . .

- Cath on a regular schedule and completely empty the bladder.
- Wash hands and genitals with soap and water or antibacterial wipes.
- Use a clean catheter every time. You will need to cycle 3 to 5 catheters each day.
- Throw out catheter after about 2 weeks of use.

If you have questions about clean intermittent catheterization or concerns about its impact on your daughter or family, please call us. The spina bifida nurse is available for your questions and concerns.

455 South Main Street, Orange, CA 92866, 714-997-3000 www.choc.org