

Clean Intermittent Catheterization

| Student's Name | _ ทดห |
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Equipment/Supplies (to be supplied by parent/caregiver)

- 1. Catheter
- 2. Gloves (if person other than student is to do the procedure)
- 3. Water Soluble Lubricant (e.g. K-Y Jelly, Lubrifax, Surgel)
- 4. Cleansing Supplies (mild soap and water, wet wipes, cotton balls or student-specific cleansing supplies)
- 5. Container to collect urine (if student is unable to be positioned to use the toilet)

Procedure

| | Key Steps | Points to Remember |
|----|--|---|
| 1. | Standard (Universal) precautions are to be maintained throughout procedure. | Use standard precautions while dealing with body fluids. |
| 2. | Wash hands. | |
| 3. | Assemble equipment in appropriate, private location for administration of procedure | A bathroom with running water and a toilet is optimum, avoiding unnecessary exposure and respecting privacy. |
| 4. | Explain procedure to student at their level of understanding. Have them do as much of the procedure as capable of, with supervision as needed. | Encouraging the student to assist in the procedure helps achieve maximum self-care skills. |
| 5. | Position the student, assisting with removal or adjustment of clothing. Have the <i>female student</i> maintain a sitting position on the toilet whenever possible, otherwise position the student on her back with feet flat on cot, knees flexed and apart. Have the <i>male student</i> positioned near the toilet whenever possible; otherwise try to maintain a comfortable sitting position. | If the student will be learning self-catheterization, tr to use the position that will be used once student masters self-catheterization. |
| 6. | Put on gloves. | |
| 7. | Lubricate the tip of the catheter with water- soluble lubricant. Leave in protective wrapper if possible, otherwise place on clean paper towel. | Lubrication reduces friction and trauma to the urethra. |
| 8. | Using non-dominant hand, gently separate the labia (vaginal lips) with the thumb and middle-finger so that the urethral opening may be visualized. Maintain separation | |

- with slight backward and upward tension.
- Using opposite hand cleanse in a direction from the top of the labia toward the rectum with cotton balls saturated with soap and water, disposable wipes or other cleansing supplies.
 Cleanse once down each side and once down the middle.
- Using clean supplies each time, repeat cleansing technique three times.
- Guide catheter into urethra until urine flows (about 1.5"), placing the other end of the catheter over toilet or collection container.

MALES

- Using the non-dominant hand, hold the penis by the shaft and at an angle straight out from the student's body.
- If the student is not circumcised, retract the foreskin.
- With opposite hand cleanse around the meatus using cotton ball saturated with soap and water, disposable wipe or other cleaning supplies. Begin at the urethral opening, and in a circular manner, wash away from the meatus.
- Using clean supplies each time, repeat cleansing technique three times.
- Holding the penis at a 45-90 degree angle from the abdomen (depending upon studentspecific guidelines or position of student) insert catheter gently into urethral opening until urine flows, then advance the catheter another fraction of an inch.
- 9. When urine flow stops, insert catheter slightly more. If no more urine is collected withdraw catheter slightly, rotating so that catheter openings have reached all areas of the bladder.

Top to bottom cleansing helps to prevent contamination/infection.

Using clean supplies each time helps to prevent contaminations/infection.

Slight resistance as the catheter passes through the urinary sphincters may be met as you advance the catheter into the bladder. If strong resistance is met, do not force the catheter. If catheter is accidentally inserted into the vagina, it may be helpful to insert a new catheter into the urethra before removing the first one; this will help prevent making the same mistake again. If unsuccessful in inserting catheter notify School Nurse for further instructions.

Cleansing away from the meatus helps to prevent contamination/infection.

Using clean supplies each time helps to prevent contaminations/infection

Slight resistance as the catheter passes through the urinary sphincters may be met as you advance the catheter into the bladder. Pause and instruct student to breathe deeply to relax the perineal muscles, then increase traction of penis slightly and apply steady pressure on the catheter. If strong resistance is met, do not force the catheter. If unsuccessful in inserting catheter notify School Nurse for further instructions.

It may be helpful to have student bear down a few times while catheter is in place to ensure complete emptying of the bladder. 10. When urine stops, pinch catheter and withdraw slowly.

This prevents urine still in the catheter from back into the bladder during withdrawal.

- 11. For **male** students, if not circumcised pull the foreskin over the glans when finished.
- 12. Remove gloves and wash hands.
- 13. Assist student in dressing.
- 14. If ordered, observe urine for signs of abnormality, measure volume and document.
- 15. Discard urine and disposable equipment.
- 16. If reusing catheter, wash with warm soapy water, rinse and dry. Place in plastic bag or other container. Send home if requested by parent/guardian.
- 17. Wash collection container with soap and water, rinse and dry.
- 18. Document procedure. Promptly report any abnormality to the School Nurse and the parent.

Observe for color, clarity and odor.

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Problems that Require Immediate Attention

| Observations | Possible Causes | Action |
|---|---|--|
| Bleeding from urethra | Trauma to urethra Urinary tract infection | Discontinue catheterization and contact School Nurse |
| Inability to insert catheter | Increases sphincter tone due to anxiety or spasms | Encourage student to relax by deep breathing • Male: reposition penis, use firm, gentle pressure until the sphincter relaxes. Try having student flex at hips to decrease sphincter's resistance. • Female: Check catheter placement. If catheter is in the vagina, do not reinsert; use a clean catheter and begin procedure anew. If unable to perform catheterization, contact |
| | | School Nurse |
| No urine flow | | Check position of catheter If no urine flows after readjusting catheter, contact School Nurse. |
| Cloudy urine, presence of mucus, blood, foul odor, color changes or unusual wetting between catheterizations. | Possible urinary tract infection | Contact School Nurse. |

Always report any changes in student's typical pattern or response to procedure to the School Nurse.