Catheterization: Sterile

Sterile catheterization is the insertion of a sterile tube into the bladder.

I. Personnel Involved

- A. School nurse
- B. Designated school personnel under indirect supervision
- C. Pupil
- D. School nurse as a procedural supervisor

II. General Information

- A. Intermittent catheterization may need to be done at school according to a time schedule ordered by the physician.
- B. The sterile technique is used when ordered by a physician.
- C. Pupils who need catheterization may:
 - 1. Be on a bladder training regimen.
 - 2. Have no bladder control.
 - 3. Have residual urine
 - 4. Need medication instilled in the bladder.
- D. This procedure requires a physician's authorization. The service must be reauthorized yearly by the prescribing physician and the parent.

III. Guidelines

- A. Purpose
 - 1. To empty the bladder at appropriate intervals and instill medication if prescribed.
 - 2. To prevent bladder distention.
 - 3. To reduce chances of a bladder infection.
 - 4. To remove residual urine
- B. Equipment (Parents are responsible for providing equipment.)
 - 1. Sterile catheterization tray
 - a. Sterile gloves
 - b. Forceps
 - c. Sterile water-soluble lubricating jelly
 - d. Collecting tray
 - e. Cotton balls
 - f. Drape
 - g. Povidone-iodine or other antiseptic solution
 - 2. Sterile disposable catheters of appropriate size (if not included in the tray)
 - 3. Protective pads

Catheterization: Sterile – Procedure

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	Essential steps	Key points and precautions	Child Specific
a	ssemble equipment in an ppropriate private location for	Provide privacy. Avoid unnecessary exposure.	
	dministration of the procedure. Vash hands thoroughly.	Have an adequate light source available.	
b	ave the pupil lie on his or her ack, with the knees flexed and eparated.	a, and a	
4. P	lace a protective pad under the upil's buttocks.	This step will prevent undesired moisture from soiling the surface beneath the students.	
	pen the catheterization tray using ne appropriate sterile technique.		
6. O	pen the sterile wrap to provide a terile field.		
d tr	pen a sterile catheter package and rop the catheter onto the sterile ray if a catheter is not included in ne tray.		
	Put on sterile gloves.		
	Orape the pupil.		
	Open the antiseptic solution and		
•	our it over cotton balls in the		
	ay.		
j€	Open the packet of lubricating elly and squeeze it onto the sterile urface.		
12. F	ollow these steps for females: . Hold the labia open	Key points for females	
	Cleanse each labia with an antiseptic-soaked cotton ball, using a downward stroke.	To prevent infection, stoke downward only once using a clean cotton ball for each stroke.	
C.	. Cleanse the urinary meatus with a third antiseptic-soaked cotton ball, using a downward stroke.	Continue holding the labia open until the catheter is inserted.	
d	. Lubricate the tip of the catheter.		
e.	inches (3.8 cm) into the urinary meatus, and place the other end into the collection tray. If slight resistance is felt, it may help to twist the catheter.	Do not use force. Instruct the pupil to breathe deeply to relax the perineal muscles and overcome resistance to entry.	
	Follow these steps for males: Hold the penis upright and at right angles to the pupil's body	Key points for males This position will straighten the anterior urethra.	
b	when the catheter is inserted. Hold the end of the penis between the thumb and forefinger and cleanse the	Use a clean cotton ball for each stroke.	

- meatus using a circular motion.
- c. Holding the penis upright, exert slight pressure to widen the opening.
- d. Lubricate the tip of the catheter.
- e. Insert the catheter about 1 1/2 inches (3.8 cm) into the urinary meatus, and place the other end into the collection tray. If slight resistance is felt, it may help to twist the catheter. The pull on the penis can be increased as the catheter is withdrawn slightly then pushed ahead until urine flows.
- 14. Pinch the catheter when the flow of urine ceases and withdraw gently and slowly.
- 15. Make certain that the pupil is dry and comfortable.
- 16. Discard disposable equipment and waste materials.
- 17. Wash hands.
- 18. Record, on the SPHCS log, the procedure and the appearance and amount of urine.

Do not use force. Instruct the pupil to breathe deeply to relax the perineal muscles and overcome resistance to entry.

Report and record and changes in the urine's color, appearance, or odor to the school nurse.