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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<th>Essential steps</th>
<th>Key points and precautions</th>
<th>Child Specific</th>
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<tr>
<td>1. Assemble equipment in an appropriate private location for administration of the procedure.</td>
<td>Provide privacy. Avoid unnecessary exposure.</td>
<td>This step will prevent undesired moisture from soiling the surface beneath the students.</td>
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<td>2. Wash hands thoroughly.</td>
<td>Have an adequate light source available.</td>
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<td>3. Have the pupil lie on his or her back, with the knees flexed and separated.</td>
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<td>4. Place a protective pad under the pupil’s buttocks.</td>
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<td>5. Open the catheterization tray using the appropriate sterile technique.</td>
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<td>6. Open the sterile wrap to provide a sterile field.</td>
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<td>7. Open a sterile catheter package and drop the catheter onto the sterile tray if a catheter is not included in the tray.</td>
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<td>8. Put on sterile gloves.</td>
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<td>9. Drape the pupil.</td>
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<td>10. Open the antiseptic solution and pour it over cotton balls in the tray.</td>
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<td>11. Open the packet of lubricating jelly and squeeze it onto the sterile surface.</td>
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<td><strong>Follow these steps for females:</strong>&lt;br&gt; a. Hold the labia open&lt;br&gt; b. Cleanse each labia with an antiseptic-soaked cotton ball, using a downward stroke.&lt;br&gt; c. Cleanse the urinary meatus with a third antiseptic-soaked cotton ball, using a downward stroke.&lt;br&gt; d. Lubricate the tip of the catheter.&lt;br&gt; 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.</td>
<td><strong>Key points for females</strong>&lt;br&gt;To prevent infection, stoke downward only once using a clean cotton ball for each stroke. Continue holding the labia open until the catheter is inserted.</td>
<td>Do not use force. Instruct the pupil to breathe deeply to relax the perineal muscles and overcome resistance to entry.</td>
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<tr>
<td><strong>Follow these steps for males:</strong>&lt;br&gt; a. Hold the penis upright and at right angles to the pupil’s body when the catheter is inserted.&lt;br&gt; b. Hold the end of the penis between the thumb and forefinger and cleanse the</td>
<td><strong>Key points for males</strong>&lt;br&gt;This position will straighten the anterior urethra.</td>
<td>Use a clean cotton ball for each stroke.</td>
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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.

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

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.


17. Wash hands.

18. Record, on the SPHCS log, the procedure and the appearance and amount of urine.

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