

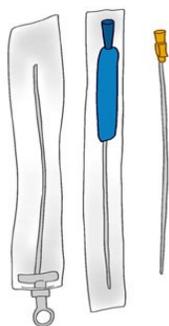
What is it?

Clean intermittent catheterization (CIC) is a procedure used to empty the bladder when a person cannot do so on their own. Conditions that commonly cause this can include congenital conditions like spina bifida, or accidents resulting in spinal cord injury. A small catheter is inserted through the urethra and into the bladder as ordered by the doctor, usually at least every 3-6 hours. CIC is important in preventing infection, leakage and potentially serious kidney damage.

What are the steps?

In the school setting, soap and water are used to clean the area prior to the procedure. Other cleaning techniques may be ordered by the doctor. It is best to do the procedure in a private, well lit, easily accessible area. Always explain the steps to the child. As the child ages, encourage active participation in the process.

- ⇒ Locate urethra either by visualizing it, or by touch if child participates.
- ⇒ Insert the lubricated end of catheter into urethra about 2-3 inches. You may feel some resistance just prior to entering the bladder as the catheter passes the sphincter.
- ⇒ For males, hold the penis upright. Insert the lubricated catheter about 4-6 inches. You may have to lower the penis as you slowly insert the catheter.
- ⇒ Once urine begins to flow, advance about 1 inch. Hold the catheter in place until urine flow is complete. Gently press on abdomen or encourage the child to sit forward to be sure urine is emptied.
- ⇒ As you slowly remove the catheter, pinch the tube and pull in a downward motion to prevent urine backflow.



Supplies include

- Catheter
- Gloves
- Lubricant
- Washcloth or wipe
- Urine collection container

Suggested school accommodations

Keep communication open with family and caregivers. Inviting the caregiver into the school setting can reinforce technique and familiarize the nurse with the child's CIC routine. This will help to reinforce the correct technique and promote independence with the program. Using the correct anatomical terminology is also encouraged.

Gender: _____

Catheter brand: _____

Size: _____

Length: _____

Schedule: _____

What should I monitor?

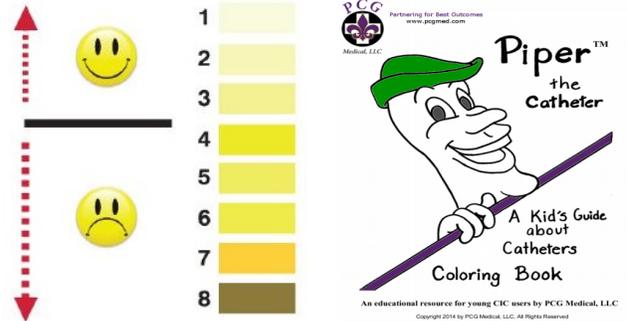
Monitor and report problems including:

- Fever
- Back pain
- Abdominal pain
- Pain or burning during CIC
- Changes in urine output

Daily recording could include:

- Urine output amount
- Urine color
- Clarity
- Urine odor
- Fluid intake

Resources for kids



SHNIC school nurses information:

Specific health issues for individual health care plans

- Diagnosis/reason for catheterization at school
- Current medication list, note any medications that might affect the color of urine, odor or amount
- Orders for scheduled times, catheter size and type
- Baseline of color, consistency, and amount of urine during catheterization
- Foster independence of student including setting up supplies and dictating steps
- Note student's ability to self-cath or encourage participation
- Note and/or document incontinence between cath times
- Document latex allergy
- Positioning of student during catheterization
- History of urinary tract infections
- Accommodations for field trips
- Flexible schedule allowing missed school work to be reinforced
- Building of best cath times, within order limits, around missing the least core academic time
- Fluid intake goals, encourage access to fluids throughout the day
- Parameters of when physician is to be notified regarding output amount, color or temperature, fever, etc.

Resources & Manuals

American Academy of Pediatrics- Clean intermittent catheterization

<https://www.healthychildren.org/English/health-issues/conditions/chronic/Pages/Clean-Intermittent-Catheterization.aspx>

When Your Child Needs Clean Intermittent Catheterization (CIC)

<http://www.uofmchildrenshospital.org/healthlibrary/Article/40115>