

Clean Intermittent Catheterization

PROCEDURAL GUIDANCE

1. Verify student orders are current. Note the brand/type and size of catheter (Fr) and frequency of procedure.
2. Explain procedure using developmentally appropriate teaching strategies. Consider self-management goals and encourage participation as appropriate.
3. Perform hand hygiene. Place the supplies on a clean surface. Open packages and maintain standard precautions. Do not touch the part of the catheter to be inserted.
 - a. Catheter
 - b. Urine collection device
 - c. Lubricant (water-soluble, if not pre-lubricated)
 - d. Wipes or appropriate cleaning supplies
 - e. Gloves
 - f. Mirror (if applicable)
4. Position the student comfortably. Catheterization can be done sitting, standing, or lying down for males. Lying down with knees bent in a froglike position or sitting with legs spread apart is recommended for females.
5. Perform/assist with catheterization and monitor student tolerance:

Female catheterization: Separate the labia with the thumb and forefinger (non-dominant hand) and locate the urethral opening. With the other hand, clean the genital area by wiping from front to back. Gently insert tip of the catheter until urine begins to flow (about 2-4 inches). Advance another ½ inch and allow urine to flow.

Male catheterization: Gently grasp the penis (non-dominant hand) and hold upright to straighten the urethral opening. If the student is uncircumcised, gently pull back the foreskin until the opening of the urethra is visible. Clean the tip of the penis. Gently insert the tip of the catheter until urine begins to flow (about 6-8 inches). Once the catheter is inserted, you may need to lower the penis as you continue to insert the catheter. Advance the tube another ½ inch and allow urine to flow.

6. Encourage the student to bear down, reposition, or gently press on the abdomen to help empty the bladder.
7. As urine flow stops, briefly pull back on the catheter. Pulling the catheter slightly allows pockets of urine to drain. Slowly remove the catheter in a downward motion.

OTHER CONSIDERATIONS FOR CARE

- Encourage relaxation and deep breathing exercises to help the student relax the bladder as the catheter is inserted.
- Some resistance is normal as the catheter passes the sphincter to enter the bladder. Never force the catheter.
- A variety of catheters are available (e.g., self-contained system, hydrophilic) and may not require separate lubricant.
- An unscented towelette, baby wipe, or a washcloth with soap and water is recommended unless specific products are ordered.
- Note any physical positioning restrictions. A PT/OT evaluation may be helpful.
- Always use anatomical names when referring to body parts.
- CIC should be performed at least every 3-4 hours.
- Report unusual leakage and changes in insertion resistance, urine color, odor, and amount.