

LOS ANGELES UNIFIED SCHOOL DISTRICT
Office of the Chief Medical Director
District Nursing Services

CLEAN SELF-CATHETERIZATION
(Also to be used for stoma)

I. GENERAL GUIDELINES

Catheterization is a procedure that involves the insertion of a hollow tube (catheter) into the urethra, past the sphincter muscle and into the bladder. Urine flows through the catheter and the bladder is emptied.

A. PURPOSE

1. To empty the bladder at appropriate intervals
2. To prevent bladder distension and reflux
3. To maintain continence, control odors and prevent skin breakdown
4. To support student's independence in activities of daily living

B. PERSONNEL

1. Student under direct or indirect supervision of school nurse.
2. Student under supervision of trained designated school personnel.

C. EQUIPMENT

1. Provided by parent:
 - a. Catheter as ordered by licensed health care provider
 - b. Towelettes
 - c. Water soluble lubricant
 - d. Magnifying hand mirror as needed
 - e. For reusable catheter
 - i. Syringe
 - ii. Liquid detergent
 - iii. Receptacle to store reusable catheter (i.e. plastic baggie, or toothbrush container)
 - f. Receptacle to collect urine and measure output, if ordered
2. Provided by school:
 - a. Aluminum foil
 - b. Plastic bag for disposal of waste
 - c. Clean disposable non latex gloves
 - d. Mild Cleansing Soap and cotton balls if not using towelettes
 - e. Container labeled with student's name to hold equipment

II. PROCEDURE

ESSENTIAL STEPS	KEY POINTS AND PRECAUTIONS
<ol style="list-style-type: none"> 1. Student should wash hands with soap and water. 	<p>Designated staff should also wash hands and wear gloves.</p>
<ol style="list-style-type: none"> 2. Assemble equipment on aluminum foil on clean flat surface-catheter, small amount of lubricant, cleansing supplies towelettes. 	<p>Encourage student to wear gloves.</p>
<p>3A. FOR FEMALE</p> <ol style="list-style-type: none"> a. The student may lie down or sit on toilet with hips forward or face backwards or may also stand with one foot on toilet. b. Hold labia apart using two fingers of non-dominant hand. c. Wash urethral area with towelette or cotton balls soaked with mild cleansing soap using downward stroke; wiping from front to back. d. With the third finger, locate urethral meatus by applying pressure. e. Release pressure on urethra but do not move finger. f. Pick-up catheter with dominant hand; lubricate tip. g. Hold catheter about ½ inch from tip between thumb and index finger. Tip catheter slightly upward and insert into urethra until urine begins to flow. 	<p>Position of student varies depending on disability. Student may also recline on appropriate treatment table or cot.</p> <p>Front to back wiping prevents contamination.</p> <p>Student may use hand mirror to locate urethral opening.</p> <p>If catheter is not self-lubricating, lubricate generously. Place other end of the catheter in collection receptacle or toilet.</p>
<p>3B. FOR MALE</p> <ol style="list-style-type: none"> a. Sit on toilet or in wheelchair, may also stand in front of toilet. b. Hold shaft of penis straight with non-dominant hand. If not circumcised pull back foreskin. c. Cleanse the meatus with towelette(s); make circular strokes outward starting at the meatus. d. Pick up catheter and lubricate. e. Insert catheter into urethra and advance until urine flows; advance catheter one more inch. 	<p>Position of student during catheterization depends on disability. Maintain hold on penis at 45 to 90 degree angle until procedure is ended.</p> <p>If resistance is felt, slightly increase traction on the penis and apply steady gentle pressure on the catheter. Encourage student to relax and take deep breaths. Place other end of catheter in collection receptacle or toilet.</p>

ESSENTIAL STEPS	KEY POINTS AND PRECAUTIONS
<p>3C. FOR STOMA</p> <ul style="list-style-type: none"> a. Cleanse area around stoma with soap and water. b. Lubricate tip of catheter. c. Insert catheter into the stoma until urine flows. Insert catheter approximately ½ to 1 inch further. 	<p>Place other end of the catheter in collection container.</p> <p>Follow specific orders of licensed health care provider for irrigation if necessary.</p>
<p>4. Hold catheter in place until urine ceases to flow. When urine flow stops, pinch and remove the catheter.</p>	<p>It is essential to completely empty the bladder.</p> <p>Pinching prevents backward flow of urine from catheter.</p> <p>Uncircumcised male student: pull foreskin over the glans after catheter is removed.</p>
<p>5. If catheter is disposable, discard in a plastic bag. If catheter is reusable, wash outside of catheter to remove remaining lubricant. Fill syringe with detergent solution and flush through catheter.</p>	
<p>6. Rinse and flush catheter well with clean water using syringe.</p>	
<p>7. Dry catheter and store inside clean dry paper towel. Rinse and dry urine receptacle, if used.</p>	<p>The catheter and storage container should be clean and dry.</p>
<p>8. Remove gloves if worn and wash hands.</p>	
<p>9. Dispose of waste materials and disinfect surfaces.</p>	<p>Universal precautions require all waste material be double bagged.</p>
<p>10. Document procedure if student requires supervision.</p>	<p>If student is being assisted or supervised by trained designated staff, document procedure, including appearance of urine, color and odor if present and response of student.</p>

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Date



Rosina Franco, MD
Senior Physician, Student Medical Services



Ron Tanimura, Ed.D
Director, Student Medical Services



Sosse Bedrossian, MSN, MA, RN, FNP
Director, District Nursing Services

REFERENCES:

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