



Making the difference

Protocol for Intermittent Catheterisation



PROTOCOL FOR INTERMITTENT CATHETERISATION

This is a clean procedure and only used if it is in individual health care plans

Only staff with appropriate training may facilitate. Consent must be written and dated by parents.

Equipment: Disposable Gloves
Wet Wipes
Catheter – pupils prescribed one
Dish to Collect Urine
Ensure environment is supportive and appropriate.

1. Tell the child what you are going to do, consider dignity and comfort.
2. Child may be best lying down although some can do this while still in their wheelchair or whilst sat on the toilet.
3. Wash your hands. Get equipment ready. Pour some water inside catheter to activate the lubrication. Put gloves on.
4. Using wet wipes, clean the genital area. Place dish between patient's thighs ready to collect urine. If sat on toilet make sure catheter drains into the toilet.
5. Hold penis or vagina with one hand, insert catheter. Gently introduce catheter until urine begins to flow.
6. When flow has stopped, remove catheter gently.
7. Dispose of urine and all equipment. Use a new catheter each time.

Observe what the urine looks like:

- If it is very concentrated and dark in colour this suggests the child needs to take more fluids.
- If urine is 'thick' and smelly (fishy) this suggests urinary tract infection. Parents must be informed.
- If you see blood in the urine, this may suggest slight irritation or infection. If not clear within 2-3 days, child should see GP.