

**Parent Consent and Authorized Healthcare Provider Authorization for
Management of Intermittent Catheterization at School and School-sponsored Events**

Name:		Teacher/ Grade:		Site:		DOB:	
Type of Catheter:		Procedure Type:	<input type="checkbox"/> Modified Sterile (sterile catheterization supplies)				
Size:			<input type="checkbox"/> Clean <input type="checkbox"/> Other: _____				
Latex Allergy:	<input type="checkbox"/> Yes <input type="checkbox"/> No						
Catheterization Supply Maintenance							
Supply Use:	<input type="checkbox"/> Single use <input type="checkbox"/> Clean catheter and reuse, duration of use: _____						
Cleaning Technique (if reused)	<input type="checkbox"/> Rinse with only water <input type="checkbox"/> Wash with soap & water, then rinse <input type="checkbox"/> Other: _____						
Lubricant:	<input type="checkbox"/> Self-lubricating Catheter <input type="checkbox"/> Water soluble lubricant, type: _____						
Urinary Output							
Measure Urinary Output:	<input type="checkbox"/> Yes <input type="checkbox"/> No						
Water Intake							
Measure Water Intake:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Water Intake at School:	<input type="checkbox"/> Unrestricted <input type="checkbox"/> Limit Water Intake to: _____				
Catheterization:							
Level of Dependence:	<input type="checkbox"/> Full Assist, student needs staff to complete catheterization procedure						
	<input type="checkbox"/> Moderate Assist, student needs staff to assist with procedure (i.e. providing supplies, assisting as needed)						
	<input type="checkbox"/> Mild Assist, student needs prompts or cues to complete procedure properly, no hands-on support						
	<input type="checkbox"/> No Assist (Independent), student requires no staff assistance						
Frequency	<input type="checkbox"/> PRN <input type="checkbox"/> Schedule, times: _____						
Perineal Cleansing Products:	<input type="checkbox"/> Unscented wet wipes <input type="checkbox"/> Cotton ball and soap <input type="checkbox"/> None <input type="checkbox"/> Other: _____						
Additional Medical Orders							

Authorized Healthcare Provider Authorization for Management of Intermittent Catheterization In School Setting

My signature below provides authorization for the above written orders. I understand that all procedures will be implemented in accordance with state laws and regulations. I understand that specialized physical healthcare services may be performed by unlicensed designated school personnel under the training and supervision provided by the school nurse. This authorization is for a maximum of one year. If changes are indicated, I will provide new written authorization. Authorizations may be faxed.

MD/DO/PA Name (printed):			Stamp: (or address and phone)	
MD/DO/PA Signature:		Date:		

I (we) the undersigned, the parent(s)/guardian(s) of the above named pupil, request that the specialized physical healthcare service, clean intermittent catheterization, be administered to my (our) child in accordance with state laws and regulations. I will:

1. provide the necessary supplies and equipment;
2. notify the school nurse if there is a change in child's health status or attending authorized healthcare provider; and
3. notify the school nurse immediately and provide new written consent/authorization for any changes in the above authorization.

I (we) give consent for the school nurse to communicate with the authorized healthcare provider when necessary.
I (we) understand that I (we) will be provided a copy of my child's completed Individualized Healthcare Plan (IHP).

Parent/Guardian Signature:		Date:	
District Nurse Signature:		Principal Signature:	

Intermittent Self-Catheterization Standard Healthcare Procedure—Clean Technique

Student:		DOB:		Date:	
School:		Teacher:		Grade:	
Purpose	1. To empty the bladder at appropriate intervals. 2. To prevent bladder distention and reflux. 3. To remove residual urine.		4. To maintain continence, control odors and prevent breakdown of skin. 5. To support pupil's independence in activities of daily living.		
Equipment and Supplies	1. Clean, disposable catheter per physician's orders 2. Lubricant per physician's orders 3. Pupil-specific cleansing supplies, per physician's orders 4. Receptacle to store reusable catheter 5. Cleaning supplies/reusable catheter		4. Leak-proof plastic bag for discard of disposable catheters 5. Receptacle to collect urine and measure output, if ordered 6. Clean, disposable, non-latex gloves (if trained designated staff is assisting pupil) 7. Separate receptacle labeled with pupil's name to hold all of equipment. 8. Other:		
PROCEDURE					
Essential Steps-Suction Set Up			Key Points and Precautions-Suction Set Up		
1. Pupil washes hands with soap and water.			1. Standard Precautions Designated staff assistant also washes hands.		
2. On a clean surface covered by a paper towel, assemble equipment: catheter, small amount of lubricant (if ordered) and cleansing supplies.					
3. Sex-specific procedures for urethral catheterization <u>A. Female</u> 1. Sit on toilet with hips forward or face backwards; may also stand with one foot on toilet edge. 2. Hold labia apart using two fingers of non-dominant hand. Wash urethral area with a downward stroke, wiping from front to back. 3. Locate urethral opening by applying pressure with a third finger. 4. Release pressure on urethra but do not move finger. 5. Pick up catheter with other hand; lubricate tip. 6. Hold catheter about ½ inch from tip between thumb and index finger. Use second finger to support catheter. Tip catheter slightly upward and insert into urethra until urine begins to flow.			3. Sex-specific steps <u>A. Female</u> 1. Position of pupil during catheterization depends on sex and disability. Pupil could also recline on appropriate treatment table or cot. 3. Using a magnifying hand mirror may help. 6. Place other end of catheter in collection receptacle or toilet. The bladder may take 10–30 seconds to empty.		
3. Sex-specific procedures for urethral catheterization <u>B. Male</u> 1. Sit on toilet or in wheelchair; may also stand in front of toilet. 2. Grasp shaft of penis with non-dominant hand and hold it almost straight. Maintain grasp on penis until catheterization is complete. If not circumcised, pull back foreskin. 3. Cleanse the meatus: make circular strokes outward starting at the meatus. 4. Pick up catheter with other hand; lubricate tip. 5. Insert catheter into urethra and advance until urine flows. Advance catheter one more inch.			3. Sex-specific steps <u>B. Male</u> 1. Position of pupil during catheterization depends on sex and disability. 5. Place other end of catheter in collection receptacle or toilet. If resistance is felt, slightly increase traction on penis and apply a steady, gentle pressure on the catheter.		
4. Hold catheter in place until urine stops flowing. When urine flow stops, pinch catheter and withdraw it slowly and gently.			4. It is essential to completely empty the bladder. Uncircumcised male pupil: pull foreskin over the glans after catheter is removed.		

If urine flow starts again as catheter is being withdrawn, stop withdrawing catheter until urine flow stops.	
5. Wash hands with soap and water.	5. Standard Precautions for prevention of infection
6. Clean catheter according to authorized healthcare provider's orders if catheter will be re-used. a. Rinse catheter well in water, running water through catheter. b. Dry catheter and fold inside clean, dry paper towel. Place in clean, dry plastic bag to be taken home for additional cleaning. c. Rinse and dry urine receptacle, if appropriate.	6. If catheter is disposable, discard in a plastic trash bag. _____
7. Wash hands with soap and water.	
8. Document procedure on Catheterization Daily Log or another form, as determined by school nurse.	8. If student is being assisted or supervised by trained designated staff, document procedure on Catheterization Daily Log, including color, odor and appearance of urine as indicated.

Intermittent Catheterization Standard Healthcare Procedure—Modified Sterile Technique*

*modified sterile technique: use of sterile equipment in a setting not dedicated to sterile procedures

Student:		DOB:		Date:	
School:		Teacher:		Grade:	
Purpose	1. To empty the bladder at appropriate intervals. 2. To prevent bladder distention. 3. To remove residual urine. 4. To reduce risk of bacterial contamination.		5. To reduce the risk of urinary tract infection. 6. To maintain continence, control odors and prevent breakdown of skin. 7. To instill medication into the bladder (administered by licensed nurse only)--requires medication form.		
Equipment and Supplies	1. Sterile catheterization tray 2. Sterile non-latex gloves 3. Sterile forceps 4. Sterile water-soluble lubricant 5. Collection receptacle 6. Sterile cotton balls		7. Antiseptic solution 8. Sterile disposable catheters size, per physician's orders 9. Protective pad 10. Clean disposable non-latex gloves 11. Other:		

PROCEDURE

Essential Steps-Suction Set Up	Key Points and Precautions-Suction Set Up
1. Wash hands thoroughly. Explain procedure to pupil.	1. Standard Precautions
2. Assemble the equipment in a private location appropriate for administration of the procedure.	2. Provide privacy; avoid unnecessary exposure. Have adequate light source available.
3. Place a clean protective pad under pupil's buttocks.	3. This step prevents soiling surface beneath the student and keeps contamination to a minimum.
4. Open catheterization tray using sterile technique. Do not to touch sterile equipment or inside surface of tray.	4. Sterile equipment ensures that no microorganisms are introduced into the bladder.
5. Open the sterile wrap to provide a sterile field.	
6. If a catheter is not included in tray, open a sterile catheter package and drop the catheter onto the sterile tray.	
7. Put on sterile, non-latex gloves.	7. After donning sterile gloves, <u>do no touch any non-sterile object.</u>
8. Open the antiseptic solution found on sterile tray; pour it over cotton balls on the tray.	8. Use a new, sterile cotton ball for each cleansing stroke.
9. Open the packet of water-soluble lubricant. Squeeze it onto the sterile surface.	
10. Sex-specific procedures for urethral catheterization <u>A. Female</u> 1. Have female pupil lie on her back with knees flexed and separated. 2. Hold the labia open to visualize urinary meatus. 3. Pick up antiseptic-soaked cotton ball with forceps. Cleanse each labium using a <u>downward</u> stroke and a clean cotton ball for each stroke. Cleanse urinary meatus with a clean antiseptic-soaked cotton ball using a downward stroke.	10. Sex-specific steps <u>A. Female</u> 1. The female urethra is short and straight. 2. Continue holding labia open until catheter is inserted. <u>This hand is no longer sterile.</u> 3. This step can be repeated 3-4 times if enough sterile cotton balls are included on the tray. Adequate cleansing of the urinary meatus prevents the introduction of bacteria into the bladder when the catheter is inserted. 4. Place other end into the collection receptacle.

<p>4. Lubricate the tip of the catheter.</p> <p>5. Holding the catheter 3 inches from the tip, insert it gently into the urinary meatus, downward and backward 1—2 inches, until urine begins to flow. If slight resistance is felt, rotate the catheter gently.</p>	<p>5. Continue holding the labia open until the catheter is inserted. Do not use force. Instruct pupil to breathe deeply to relax the perineal muscles and overcome resistance to entry.</p>
<p>10. Sex-specific procedures for urethral catheterization</p> <p><u>B. Male</u></p> <p>1. The male pupil may either sit up or lie down. Hold the end of the penis between the thumb and forefinger upright below the glans, at a 45° to 90° angle to pupil's body.</p> <p>2. Pick up antiseptic-soaked cotton ball with forceps. Cleanse the glans using a circular motion, beginning at the urethral opening and moving away from the meatus toward the base of penis.</p> <p>3. Holding the penis upright at right angle to pupil's body, exert slight pressure to widen the opening.</p> <p>4. Lubricate the tip of the catheter.</p> <p>5. Holding catheter near tip, insert it into the urinary meatus until urine begins to flow. Advance catheter a short distance. If slight resistance is felt, twist the catheter. The pull on the penis can be increased as the catheter is withdrawn slightly, and then pushed ahead until urine flows.</p>	<p>10. Sex-specific steps</p> <p><u>B. Male</u></p> <p>1. If the pupil is not circumcised, retract the foreskin. Maintain grasp until procedure completed. <u>This hand is no longer sterile.</u></p> <p>2. Use a clean cotton ball for each circular stroke and discard.</p> <p>4. Place other end into collection receptacle.</p> <p>5. Do not use force. Instruct pupil to breathe deeply to relax the perineal muscles and overcome resistance to entry.</p>
<p>11. Hold catheter in place until urine stops flowing. When flow stops, advance catheter slightly. If no urine flows, withdraw catheter slightly and rotate. When no more urine flows, pinch catheter and withdraw it gently and slowly.</p>	<p>11. It is essential to empty the bladder completely. Rotating the catheter ensures that the openings have reached all areas of the bladder. It is also helpful to have the student bear down a couple of times with the catheter in place.</p>
<p>12. Remove and discard gloves, wash hands and put on clean, non-sterile gloves.</p>	<p>12. Wear disposable gloves for handling used equipment.</p>
<p>13. Measure the urine, if required, and discard in toilet. Rinse the receptacle. Observe urine for any signs of abnormality (color, odor, sediment, concentration, and amount).</p>	<p>13. Discard rinse water in toilet. Spray sink used for rinsing with disinfectant.</p>
<p>14. Discard disposable equipment and waste materials.</p>	<p>14. Place items in leak-proof plastic bag, and then discard in trash.</p>
<p>15. Remove and discard gloves; wash hands.</p>	<p>15. Standard Precautions</p>
<p>16. Ensure that the pupil is dry and comfortable; assist with dressing, if necessary.</p>	
<p>17. Record on the catheterization log: date, time, amount and appearance of urine, other comments as needed.</p>	<p>17. Record any changes in the urine's color, appearance or odor. Contact school nurse and/or parent to report any changes in characteristics of the urine or problems with procedure.</p>

Intermittent Catheterization Standard Healthcare Procedure—Clean Technique

Student:		DOB:		Date:	
School:		Teacher:		Grade:	
Purpose	1. To empty the bladder at appropriate intervals. 2. To prevent bladder distention and reflux. 3. To remove residual urine.		4. To maintain continence, control odors and prevent breakdown of skin. 5. To instill medication into the bladder. (administered by licensed nurse only). Requires medication form to be completed.		
Equipment and Supplies	1. Clean, disposable catheter size, per physician's orders 2. Lubricant per physician's orders 3. Pupil-specific cleansing supplies, per physician's orders 4. Receptacle to collect urine and measure the output, if ordered 5. Receptacle to store reusable catheter Cleaning supplies/reusable catheter:		6. Leak-proof plastic bag for discard of disposable catheters 7. Protective pad 8. Non-latex disposable gloves 9. Container labeled with pupil's name to hold equipment. 10. Other:		

PROCEDURE

Essential Steps-Suction Set Up	Key Points and Precautions-Suction Set Up
1. Assemble equipment in a private location appropriate for administration of the procedure.	1. Provide privacy; avoid unnecessary exposure. Have adequate light source available.
2. Explain procedure to pupil.	2. Use developmentally appropriate communication.
3. If pupil is lying down or sitting on a solid surface, place a clean, protective pad under the pupil's buttocks to minimize contamination.	3. This step prevents soiling the surface beneath the pupil.
4. Wash hands thoroughly. Put on gloves.	4. Standard Precautions ensure a clean procedure. If pupil does procedure unassisted, gloves are not needed.
5. Prepare pupil's cleansing materials (cotton balls, 4X4s, wipes). Place lubricant on protective pad or clean surface.	5. For self-lubricating catheter, add water to catheter package according to manufacturer's instructions.
6. Sex-specific procedures for urethral catheterization A. Female 1. Have female pupil lie on her back with knees flexed and separated. If able, she may sit on toilet with legs opened wide. 2. Hold labia open. 3. Cleanse each labium and the urinary meatus. Stroke downward only once, using a <u>clean</u> cotton ball, gauze pad or wipe for each stroke. 4. Lubricate the tip of the catheter (non-lubricated type). 5. Holding catheter 3 inches from the tip, insert it gently into urinary meatus, downward and backward 1–2 inches, until urine begins to flow. If slight resistance is felt, rotate catheter gently.	6. Sex-specific steps A. Female 1. The female urethra is short and straight. 2. This step allows visualization of urinary meatus. 3. This technique prevents infection. 4. Place other end of catheter into collection tray or over toilet. 5. Continue holding the labia open until the catheter is inserted. Do not use force. Instruct pupil to breathe deeply to relax perineal muscles & overcome resistance to entry.
6. Sex-specific procedures for urethral catheterization B. Male 1. The male pupil may sit up, lie down or stand. 2. Hold the end of the penis at a 45 to 90 degree angle between the thumb and forefinger. Cleanse the glans using a circular motion, beginning at the urethral	6. Sex-specific steps B. Male 1. A male pupil who self-catheterizes may prefer to stand at the toilet. 2. If the pupil is not circumcised, retract the foreskin.

<p>opening and moving away from the meatus toward the base of the penis.</p> <p>3. Holding the penis upright, exert slight pressure to widen the opening.</p> <p>4. Lubricate the tip of the catheter (non-lubricated type).</p> <p>5. Hold the penis below the glans, upright and at right angle to the pupil's body.</p> <p>Insert the catheter gently into the urinary meatus until urine begins to flow. If slight resistance is felt, twist the catheter.</p> <p>The pull on the penis can be increased as the catheter is withdrawn slightly, and then pushed ahead until urine flows.</p>	<p>4. Place other end into collection tray or over toilet.</p> <p>5. Do not use force. Instruct the pupil to breathe deeply to relax the perineal muscles and overcome resistance to entry.</p>
<p>7. Hold the catheter in place until urine stops flowing. When flow stops, advance catheter slightly.</p> <p>If no urine flows, withdraw catheter slightly and rotate. When no more urine flows, pinch the catheter and withdraw it gently and slowly.</p>	<p>7. It is essential to empty the bladder completely. Rotating the catheter ensures that the openings have reached all areas of the bladder.</p> <p>It is also helpful to have the pupil bear down a couple of times with the catheter in place.</p> <p>If male is not circumcised, pull the foreskin over the glans after catheter is removed.</p>
<p>8. Remove and discard gloves, wash hands and put on clean gloves.</p>	<p>8. Wear disposable gloves for handling used equipment.</p>
<p>9. Measure the urine, if required, and discard in toilet. Rinse the receptacle. Discard rinse water in toilet. Observe urine for any signs of abnormality (color, odor, sediment, concentration, and amount).</p>	<p>9. Spray sink used for rinsing with disinfectant.</p>
<p>10. Discard disposable equipment and waste materials.</p>	<p>10. Place items in leak-proof plastic bag, and then discard in trash.</p>
<p>11. If the catheter is sent home for use, rinse it with water or a prescribed solution, dry with paper towels and place in leak-proof receptacle.</p>	<p>11. Catheter cleaned and stored at school, per physician's orders</p>
<p>12. Remove and discard gloves. Wash hands.</p>	<p>12. Standard Precautions</p>
<p>13. Ensure that the pupil is dry and comfortable. Assist with dressing, if necessary.</p>	
<p>14. Record on catheterization procedure log: date, time, amount and appearance of urine.</p>	<p>14. Record any changes in the urine's color, appearance or odor.</p> <p>Contact school nurse and/or parent to report any changes in characteristics of the urine or problem with procedure.</p>