Clean Intermittent Catheterization (CIC) For Females

What it is:

Clean intermittent catheterization (CIC) is a clean, but non-sterile, way to put a rubber or plastic tube (catheter) into the urinary opening (urethra) to empty the bladder.

Why it is done:

Some medical conditions can cause a child to be unable to empty the bladder. When urine remains in the bladder for a long time, bacteria can grow very quickly. CIC helps prevent urinary tract infections by emptying the bladder completely and keeping the over-full bladder from stretching. When CIC is done every three to six hours, the bladder will not over-fill. This may also prevent dribbling and wetting. CIC can help children to be more active and have a better self-image by helping them stay dry.

Where it is done:

You can do CIC in any regular toilet facility or private area. Girls may sit or lie down. Consider the child’s comfort when you choose a place for CIC.
The urinary system:

The kidney filters waste products from the whole body. Waste goes into the urine. Urine drains into the bladder, and is stored there until it leaves the body. When urine drains well into the bladder, the kidneys are protected from infection.

When to catheterize:

To drain the urine well and prevent infection, do CIC regularly.

Your doctor will tell you how often to catheterize your child. As your child gets older, she can learn to do CIC herself. She should follow the same steps you do.

Write the times your child needs to be catheterized here:
☑️ first thing in the morning
☑️ every ______ hours during the day
☑️ when my child goes to bed
☑️ when I go to bed
☑️ other times: ______________________________

If your child has her last drink two hours before bedtime, it may help her stay dry through the night.

Do not wake up a baby at night to do CIC. Instead, catheterize when you and your baby are awake for feedings.

Catheters come in many sizes.

Here are the sizes used by most people, based on age:

<table>
<thead>
<tr>
<th>Age</th>
<th>Catheter Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>newborns</td>
<td>5 French</td>
</tr>
<tr>
<td>infants</td>
<td>8 French</td>
</tr>
<tr>
<td>toddlers and young school-aged</td>
<td>10 French</td>
</tr>
<tr>
<td>preteens</td>
<td>12 French</td>
</tr>
<tr>
<td>adolescents</td>
<td>14 French</td>
</tr>
<tr>
<td>older adolescents and adults</td>
<td>16 French</td>
</tr>
</tbody>
</table>

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To prevent infections:

To prevent infections, have your child drink lots of fluids, wash your hands carefully before and after catheterization, keep supplies clean, and keep the area around the urinary opening clean.

How to do a Clean Intermittent Catheterization:

What you need:
- catheter, size ______ French
- something to store the catheter in when not using it, like a toothbrush holder or clean plastic bag
- soap and water, soap towelettes or cotton balls with soap
- urine container
- water-soluble lubricant (like K-Y Jelly)
- clean gloves (If your child can do CIC without help, you do not need gloves.)

What to do:

It is best to have your child help with clean intermittent catheterization as much as she is able, while you watch. This gives your child independence, control and a better self-image. Explain to your child what you are doing as you are doing it.

1. Have all the supplies you need near and ready to use.

2. Clean your hands with soap and water for 15 to 30 seconds. Rinse, then dry your hands with clean paper towels.

If your hands are not visibly dirty, you can use alcohol-based hand rub to clean them using the following steps:
   1. Put enough alcohol-based hand rub to fill the palm of your hand.
   2. Spread the hand rub over all parts of your hands.
   3. Rub hands until dry.
3. Put on clean gloves.

4. Put your child in position for catheterization.

5. Arrange your child’s clothes so they do not get wet.

6. Put water-soluble lubricant on the first two inches of the catheter.

7. Find the urinary opening. If your child catheterizes herself, she may use a mirror in the beginning. Once she learns where the opening is, she will not need a mirror to find it.

8. Separate and hold the labia open with fingers. Use the towelettes or soapy cotton balls to wash around the urinary opening (urethra). Wash three times, from front to back, once down each side and once down the middle of the labia. Use a clean towelette or cotton ball each time.

9. Put the urine container in place to catch the urine, or have your child sit on the toilet.

10. Gently slide the catheter into the urinary opening until urine starts to flow. Never force the tube. If you have trouble passing the tube, stop and call your child’s doctor.

11. Let all the urine flow out, either into the urine container or the toilet.

12. Have your child bear down a few times with the catheter still in place. This helps to empty all the urine from the bladder.
13. Slowly start to take out the catheter. If urine starts to flow again, stop until the flow of urine stops.

14. Pinch the catheter, and keep it pinched while you take it out. This keeps urine from flowing back into the bladder.

15. After you take out the catheter, wipe across the urinary opening with a towelette or toilet paper. This will prevent odors.

16. Praise your child for her help and return her clothing to its normal position.

17. Wash the catheter with soap and water. Rinse the inside of the catheter with clear water, dry it, and put it back into a clean, dry container.

18. If you used a urine container, empty it in a toilet. Wash and dry the container.

19. Take off the gloves, and throw them out. Clean and dry your hands.

20. If your doctor wants you to keep records, write down the time and the amount of urine.

Problem-Solving

• If urine leaks around the catheter, try using a larger catheter.

• If the tip of the catheter will not slide into the urinary opening, do not force it. Try using a smaller-sized catheter.

• Bleeding from the urinary opening can be caused by trauma during the catheterization. If this occurs, stop the catheterization and call your doctor.

• Trouble passing the catheter can be caused by a tight muscle (increased sphincter tone) due to anxiety or spasm. Check the catheter placement. If it is in the vagina, use a clean catheter and try again. If you still cannot pass the catheter, call your doctor.
• No urine on catheterization may mean the catheter is not in the right place. Check the placement of the catheter. It may also mean the bladder is empty. Have your child drink more fluids.

Call your child’s doctor if you see signs of a urinary tract infection:
— blood in urine
— fever
— increased wetting
— chills
— bladder spasms
— pain or tenderness over lower back

Care of the Catheter

What you need:
☐ catheter
☐ something to keep the catheter in, like a toothbrush holder or clean plastic bag
☐ soap
☐ clean gloves
☐ tap water

What to do:
• Wash the catheter with soap and water. Rinse the inside of the catheter with clear water. Let it dry before you store it in a clean container.

• Every night, let the catheter air dry on a clean surface.

• Every night, wash the container you use to store and carry the catheter. Use soap and water, and let it air dry. If you use a plastic sandwich bag to store the catheter, use a new bag each day.

• One catheter can last one to three months. If the catheter becomes too soiled to use, or becomes hard to put in, throw it out and use another one.
Bring the catheter and supplies everywhere you go. Stick to the catheterization schedule to avoid infections and wetting. CIC can help children be normally active and have a better self-image by helping them stay dry.

**Now that you’ve read this:**

☐ Show your nurse or doctor how you will catheterize your child. (Check when done.)

☐ Tell your nurse or doctor how you will keep the catheter clean. (Check when done.)

☐ Tell your nurse or doctor when you need to call the doctor’s office. (Check when done.)

☐ yes  ☐ no  See the handout: *Latex Allergy, #249*

If you have any questions or concerns,

☐ call your child’s doctor or  ☐ call _______________________________
Clean Intermittent Catheterization (CIC) For Girls

Name of Health Care Provider: _______________________________
Date returned: ___________  ☐ db

Family Review of Handout

Health care providers: Please teach families with this handout.
Families: Please let us know what you think of this handout.

Would you say this handout is hard to read?  ☐ Yes  ☐ No
easy to read?  ☐ Yes  ☐ No

Please circle the parts of the handout that were hard to understand.

Would you say this handout is interesting to read?  ☐ Yes  ☐ No
Why or why not?

Would you do anything differently after reading this handout?  ☐ Yes  ☐ No
If yes, what?

After reading this handout, do you have any questions about the subject?  ☐ Yes  ☐ No
If yes, what?

Si usted desea esta información en español, por favor pídesela a su enfermero o doctor.

#1730
Is there anything you don’t like about the drawings? □ Yes □ No

If yes, what?

What changes would you make in this handout to make it better or easier to understand?

Please return your review of this handout to your nurse or doctor or send it to the address below.

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Thank you for helping us!