

Chapter 22

ELIMINATION OF URINE

PROCEDURE FOR GIVING PERINEAL CARE WITH CATHETER:

1. Gather necessary equipment.
2. Wash your hands. Put on gloves.
3. Explain what you are going to do.
4. Provide privacy.
5. Client should be in supine position with legs apart; place towel or bed protector under buttocks.
6. Cover client with towel or blanket then remove top sheet.
7. Check catheter and drainage bag for leaks, kinks, level of bag, color and character of urine; ensure that it is securely attached to bed frame.
8. Expose the perineal area.
 - a. Separate the labia of the female client and gently wash around the opening of the urethra with soap and warm water.
 - b. If the male client is uncircumcised, gently pull back the foreskin and wash around the opening of the urethra with soap and warm water.
9. Wash the catheter tubing from the opening of the urethra outward four inches or farther if needed. Do not pull on the catheter.
10. Using a clean washcloth, continue washing and rinsing the perineal area. Dry the perineal area (follow procedure in Chapter 16 Perineal Care).
11. Remove bed protector and blanket or towels. Place soiled linens in appropriate container.
12. Remove and dispose of gloves. Wash hands.
13. Make the client comfortable.
14. Record observations and report anything unusual to the supervisor/nurse.