

**Antelope Valley Union High School District
Dysreflexia Catheterization Procedures**

Dysreflexia / Hyper-reflexia	
A life threatening elevation of blood pressure that may occur in persons with spinal cord injury.	
Always requires a physician order and training by the District Nurse	
What causes dysreflexia? <ul style="list-style-type: none"> • Congenital abnormality or spinal cord injury • Inability to perceive full urinary bladder • Inability to initiate urination • Presence of stool in the rectum • Constricted clothing, especially pants 	What are the signs of dysreflexia? <ul style="list-style-type: none"> • Flushed or reddened skin • Presence of chills and / or goose bumps without fever • “Pounding” or painful headache • Sudden stuffy nose due to constricted blood vessels • Slow pulse of less than 60 beats per minute • Temperature changes above or below the location of spinal cord injury
Why is urinary catheterization necessary? <ul style="list-style-type: none"> • To remove urine from the bladder so that the full bladder does not cause a rise in blood pressure • Allow urine to drain freely without restriction to avoid bladder distension 	Supplies <ul style="list-style-type: none"> • Mechanical blood pressure cuff or blood pressure cuff and stethoscope • Gloves Container or diaper • Catheter • Water soluble lubricant • Diaper wipes or soap and water
Procedure <ul style="list-style-type: none"> □ Read and follow physician orders. Wash hands before assembling supplies. □ Know the student’s normal blood pressure range. Stay with the student. □ Have student sit with head elevated 45 to 90 degrees to decrease the blood pressure in the head. □ Take the student’s blood pressure in one arm and record the results on the Dysreflexia Blood Pressure Log. □ <u>If there is a catheter inserted already</u>, empty the urine from the collection bag. Then, straighten the tubing to remove restrictions. Loosen clothing to prevent restricted urine flow. If the tube has been twisted, allow urine to drain before pinching catheter for 1 minute. Repeat procedure, if needed, to completely drain the bladder. □ <u>If the student needs to be catheterized</u>, insert the catheter according to the student’s Urinary Catheterization Orders signed by the physician. Remove gloves. Wash hands thoroughly. □ Following urine removal, monitor the blood pressure every five minutes until there are four readings in a row that are within the student’s normal range. □ When the blood pressure returns to the student’s normal range for at least 15 minutes, the student may resume regular school activities. □ Remove gloves, wash hands and document the blood pressure readings, catheterization procedure, and the student’s response to the catheterization procedure on Student Log form. □ Report any unusual changes to the parent and District Nurse. 	
When do I call 911? <ul style="list-style-type: none"> • If student’s blood pressure remains greater than their normal range over a fifteen (15) minute period 	