

the trauma the child experiences, some parents may fear that the procedure affects the daughter's virginity. To correct this misconception, the family may benefit from a detailed explanation of the genitourinary anatomy, preferably with a model that shows the separate vaginal and urethral openings. The nurse can also indicate that catheterization has no effect on virginity.

### Safety Alert

Do not advance the catheter too far into the bladder. Knotting of catheters and tubes within the bladder has been reported in several case studies. Feeding tubes should not be used for urinary catheterization because they are more flexible, longer, and prone to knotting compared with commercially designed urinary catheters (Kilbane, 2009; Levison and Wojtulewicz, 2004; Lodha, Ly, Brindle, et al, 2005; Turner, 2004).

Suprapubic aspiration is mainly used when the bladder cannot be accessed through the urethra (e.g., with some congenital urologic birth defects) or to reduce the risk of contamination that may be present when passing a catheter. With the advent of small catheters (5- and 6-French straight catheters), the need for suprapubic aspiration has decreased. Access to the bladder via the urethra has a much higher success rate than suprapubic aspiration, in which success depends on the practitioner's skill at assessing the location of the bladder and the amount of urine in the bladder.

Suprapubic aspiration involves aspirating bladder contents by inserting a 20- or 21-gauge needle in the midline approximately 1 cm (0.4 inch) above the symphysis pubis and directed vertically downward. The nurse prepares the skin as for any needle insertion, and the bladder should contain an adequate volume of urine. This can be assumed if the infant has not voided for at least 1 hour or the bladder can be palpated above the symphysis pubis. This technique is useful for obtaining sterile specimens from young infants because the bladder is an abdominal organ and is easily accessed. Suprapubic aspiration is painful; therefore, pain management during the procedure is important (see [Atraumatic Care](#) box).

### Atraumatic Care