

## **Mosby: Mosby's Nursing Video Skills**

### **Procedural Guidelines for Performing Perineal Care for a Male Patient**

1. Verify the health care provider's orders.
2. Gather the necessary equipment and supplies.
3. Perform hand hygiene, provide privacy.
4. Introduce yourself to the patient and family if present. Explain the procedure and its importance in preventing infection.
5. Identify the patient using two identifiers, such as name and date of birth or name and account number, according to agency policy. Compare these identifiers with the information on the patient's identification bracelet.
6. Bring the bed to the appropriate working height. Apply clean gloves.
7. Check the water temperature.
8. Perineal care for a male patient:
  - a. If the patient is able to maneuver and handle a washcloth, allow him to cleanse the perineum on his own.
  - b. Note any restrictions or limitations on the patient's positioning. Help the patient into a supine position. Place a waterproof pad under the patient's buttocks.
  - c. Drape the patient with a bath blanket placed over the abdomen.
  - d. Wash, rinse and thoroughly dry the upper thighs. Cover the thighs with a bath towel. Raise the bath blanket to expose the patient's genitalia.
  - e. Gently raise the penis, and place the bath towel underneath. Gently grasp the shaft of the penis. If patient is uncircumcised, retract the foreskin. If patient has an erection, defer the procedure until later.
  - f. Wash the tip of the penis at the urethral meatus first. Using a circular motion, cleanse from the meatus outward. With a separate section of the washcloth, continue until the tip of the penis is clean.
  - g. Rinse and dry the tip of the penis gently and thoroughly. If the patient is uncircumcised, return the foreskin to its natural position.
  - h. Gently cleanse the shaft of the penis and the scrotum by having the patient abduct his legs. Pay special attention to the underlying surface of the penis. Lift the scrotum carefully, and wash the underlying skin folds.
  - i. Rinse and dry the area thoroughly, from front to back.
  - j. Observe the perineal area for redness, swelling, irritation, discharge, or signs of skin breakdown that persist after performing perineal hygiene.
  - k. Remove the towel and bath blanket. Pull the patient's gown down and the blankets up.
9. Help the patient into a comfortable position, and place toiletries and personal items within reach.
10. Dispose of gloves in receptacle.
11. Place the call light within easy reach, and make sure the patient knows how to use it to summon assistance.
12. To ensure the patient's safety, raise the appropriate number of side rails and lower the bed to the lowest position.
13. Perform hand hygiene.

14. Document and report the patient's response and expected or unexpected outcomes.