# USE OF "BLADDER BUNDLES"

Aseptic insertion and proper maintenance is paramount

Bladder ultrasound may avoid indwelling catheterization

Condom or intermittent catheterization in appropriate patients

Do not use the indwelling catheter unless you must!

Early removal of the catheter using reminders or stop-orders appears warranted.

# **MEDICAL INDICATIONS FOR A URINARY CATHETER**

- Management of acute urinary retention or bladder outlet obstruction.
- Urine output measurement in critically ill patients.
- During surgery to assess fluid status.
- During and following specific surgeries of the genitourinary tract or adjacent structures.
- Management of hematuria associated with clots.
- Management of immobilized patients...
- Management of patients with neurogenic bladder.
- Management of open wounds located in the sacral or perineal regions in patients who are incontinent.
- Intravesical pharmacologic therapy (eg, bladder cancer).
- Improved patient comfort for end of life care.
- Management of patients with urinary incontinence following failure of conservative, behavioral, pharmacologic and surgical.

# URINARY CATHETER INSERTION BUNDLE

## Hand Washing

• First and most important preventative measure

### Avoid unnecessary urinary Catheters

• Criteria for foley catheter has been met

### Insert urinary catheters using aseptic technique

- Utilize appropriate hand hygiene practice, Insert catheters using aseptic technique and use sterile equipment
- Use as small a catheter as possible that is consistent with proper drainage to minimize urethral trauma

### Review urinary catheter necessity daily and remove promptly

• Keeping foley catheter in place greater than 48 hours puts patient at risk for infection

# **URINARY CATHETER MAINTENANCE BUNDLE**

#### Hand hygiene

*f*Hands are decontaminated immediately before and after each episode of patient contact using the correct hand hygiene technique.

#### Catheter hygiene

- Catheter site cleaned regularly as stated in local policy.
- f Catheter is emptied a minimum of twice daily into clean container.

### Sampling

All samples obtained using aseptic technique, via the catheter sampling port.

### Drainage bag position

- Above floor but below bladder level to prevent reflux or contamination.
- f Closed urinary drainage system intact or only disconnected as per manufacturers instructions

### **Catheter manipulation**

**f**Examination gloves worn to manipulate a catheter, manipulation should be preceded and followed by hand decontamination.

### Catheter needed?

fReview need for catheter daily

JDocument Date and time of removal of catheter, operator undertaking removal and with signature