

Using Catheter Protocols in the Prevention of Urinary Tract Infections

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Introduction

- Why did we develop this tool?
 - An indwelling catheter increases the risk of developing a urinary tract infection (UTI)
 - Rehabilitation focus
 - Enhanced quality of life for patients
 - A catheter may be considered a one point restraint
 - No catheter is the best!

Standard Intermittent Bladder Catheterization Clinical Protocol

PATIENT HEALTH INFORMATION

TRANSCRIPTION
AND RN NOTES

Patient Population

Patients who have:

- Complete inability to void
- Low urinary output related to bladder dysfunction
- Urine residual volume greater than 400 mL on bladder scan (Ultrasound) assessment

Exclusion criteria; patients with:

- Significant urethral stricture disease
- Known false urethral passages
- Previously requiring catheterization by a Urologist

Implementation Considerations

Patient or substitute decision maker has received education related to the procedure

Clinical Protocol Orders

- Bladder Ultrasound using a bladder scanner every 6 hours and PRN
- If residual volume indicated by bladder scanner is greater than 400 mL, perform an intermittent catheterization
- If residual volume is greater than 200 mL and less than 400 mL consider bladder scanning in 2 hours to avoid over distension and discomfort
- If residual volume is greater than 200 mL and less than 400 mL, may catheterize if patient is uncomfortable and unable to void

Lab Investigations

- If patient exhibits signs and symptoms of urinary tract infection, follow Medical Directive for Urinalysis Point of Care Testing. Contact physician after Urinalysis Point of Care Testing.

Termination of Clinical Protocol

- Contact physician to discontinue clinical protocol if an indwelling urinary catheter is inserted or post void residuals are consistently less than 150 mL for 5 days

Protocol

- Physicians need to order the protocol
- The following are considered:
 - Complete assessment
 - Underlying complications
 - Previous damage
 - Clear exclusion criteria for use

Clinical Practice

- Provides some autonomy for nurses
 - Judgement
 - Clinical decision-making
- Impact on patient outcomes
 - Decrease risk of UTI
 - Decrease risk of complications

Conclusion

- This is one example of a catheter protocol
- Many other resources available, important to find something that suits the needs of the organization

- Questions?