

CATHETER MANAGEMENT

Single
Point
Lesson

Residents with a urinary catheter in place are at an increased risk of acquiring an infection. Bacteria can enter the urethra at the point where the catheter enters the body. Nurses must always assess clinical need for a catheter. The date of catheter insertion and the indication for catheterisation should be recorded in the residents notes. Clinical need for a catheter should be reviewed regularly. Plan for early removal if possible.

Always wash hands before and after catheter care and use gloves.



Managing the drainage system

The drainage bag or catheter valve should be connected to the catheter at all times, except when changing the bag. This 'closed system' reduces the risk of infection.

At night, the special night drainage bag should be added without breaking the closed system.

The drainage bag should be kept lower than the bladder to allow urine to drain.

The bag should not be allowed to touch the floor because this can increase the infection risk. Catheter bag stands should be used.

The drainage bag should be emptied regularly to maintain the flow of urine.

Nursing care

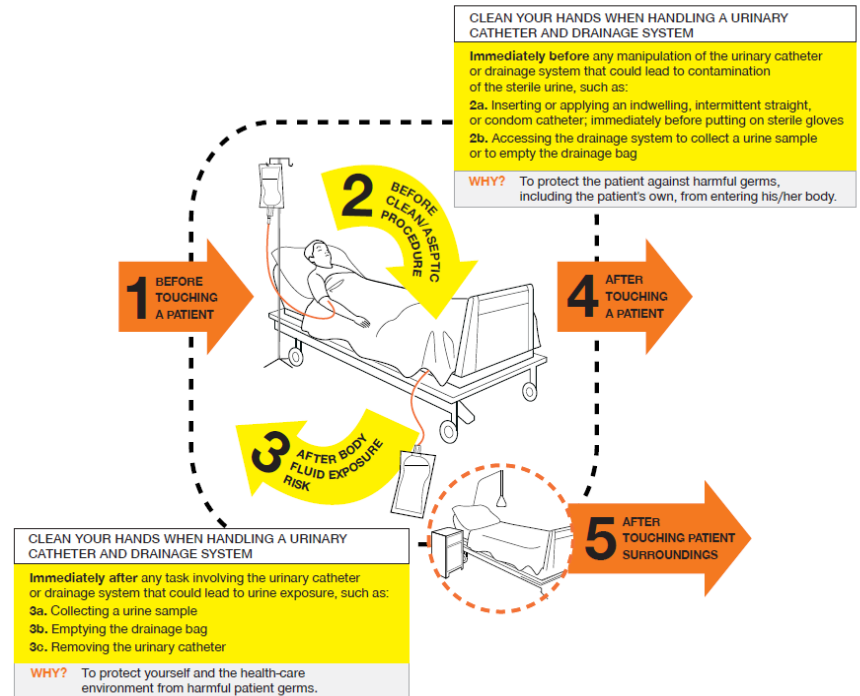
- Check Fluid intake and output
- Observe colour of urine.
- Catheter is secure and positioned correctly.
- The point at which the catheter enters the body should be cleaned daily with soap and water.
- Check no faecal contamination at meatal site.
- Observe for signs of Infection.
- Potential latex allergy.

If resident becomes pyrexial (38o C or above) or shows signs of urinary tract infection seek medical advice.

Collect sample

Samples should always be obtained from the sampling port, not from the urine in the bag

My 5 Moments for Hand Hygiene Focus on caring for a patient with a Urinary Catheter



5 KEY ADDITIONAL CONSIDERATIONS FOR A PATIENT WITH A URINARY CATHETER

- Make sure that there is an appropriate indication for the indwelling urinary catheter.
- Use a closed urinary drainage system, and keep it closed.
- Insert the catheter aseptically using sterile gloves.
- Assess the patient at least daily to determine whether the catheter is still necessary.
- Patients with indwelling urinary catheters do not need antibiotics (including for asymptomatic bacteriuria), unless they have a documented infection.