

Urinary catheters may be used for residents who have urinary blockages or who need assistance in emptying their bladders. Inserting and maintaining urinary catheters appropriately helps prevent catheter-associated urinary tract infections (UTIs).

Point your phone's camera at the QR code for a toolkit of resources to reduce catheter-associated UTIs in nursing homes.



Infection Prevention Checklist



1. **Rounding.** It is important to routinely check urinary catheter insertion and maintenance practices and provide feedback. Provide direct feedback to staff in real-time so that practices can be adjusted as needed and in summary to staff and leadership. Things to look for while rounding include:
 - a. Resident has an appropriate indication for the catheter
 - b. Catheter insertion
 - Perform hand hygiene before putting on gloves
 - Use sterile equipment including: sterile gloves, drape, sponges, antiseptic solution, and single-use packet of lubricant jelly
 - Use aseptic technique to insert the catheter. If aseptic technique is broken, replace the catheter and tubing aseptically with sterile equipment.
 - Secure the catheter to prevent movement.
 - c. Catheter maintenance
 - The catheter bag is below the bladder
 - The catheter is not touching the floor
 - The catheter is secured
 - Tubing is free of loops and kinks
 - Tubing is free of pooling urine/backflow
 - Closed drainage system is maintained
2. **Hand Hygiene and Personal Protective Equipment:**
 - a. Healthcare personnel should perform good hand hygiene before inserting the catheter and before and after any manipulation of the catheter or catheter site.
 - b. Follow Enhanced Barrier Precautions (<https://www.cdc.gov/long-term-care-facilities/hcp/prevent-mdro/ppe.html>) for residents with urinary catheters, including wearing gown and gloves during care or use of the urinary catheter as well as during other high-contact resident care activities.
3. **Education and Competency:**
 - a. Ensure all healthcare personnel performing urinary catheter insertion and/or maintenance have appropriate training and competency.
4. **Routine Hygiene:** The area around the catheter should be cleaned routinely, according to facility policy (e.g., daily or once per shift, after bowel movements).

5. Removal:

- a. If the resident has a temporary catheter, evaluate daily if the resident still needs the catheter. Each day a urinary catheter remains in place increases the risk of catheter-associated urinary tract infection (CAUTI).
- b. Take steps to remove the catheter when the resident no longer meets an appropriate indication; remove per facility policy.

Urinary Catheters: How to Share the News



1. To the resident and those authorized to receive health information: You (or your loved one) currently has a urinary catheter. *[Explain why the catheter is in place. If temporary, mention that the care team will be assessing daily to make sure it's still needed and will remove it as soon as possible].* Make sure to not tug or pull on the tubing. We will be checking the catheter frequently to make sure it is working properly and that you are not showing any signs of infection. We will be cleaning our hands before and after touching the catheter. Please remind us if we forget.
2. To healthcare workers: This resident has a urinary catheter. Enhanced Barrier Precautions are needed, which means wearing a gown and gloves during high-contact resident care activities including care or use of the catheter. Focus on good catheter care and follow the maintenance bundle, like securing the catheter tubing, making sure the tubing does not have any kinks or loops, and keeping the catheter bag below the bladder at all times. *[If a temporary catheter, mention that the catheter's necessity should be questioned daily; remove catheter per facility policy].*

Additional Resources



VDH Long-Term Care Settings page: <https://www.vdh.virginia.gov/haiar/ip/infection-prevention-resources-by-setting/long-term-care-settings/>

- Infection prevention resources on various topics including urinary tract infections and Enhanced Barrier Precautions

Health Services Advisory Group: <https://www.hsag.com/ip-train-the-trainer>

- UTI prevention tools including adherence monitoring tools, risk assessment, nursing signs and symptoms assessment, posters, and recorded trainings

AHRQ Catheter Do's and Don'ts: <https://www.ahrq.gov/haier/quality/tools/cauti-ltc/modules/resources/tools/prevent/do-dont.html>

- Resource for best practices and what to avoid when maintaining a catheter in long-term care