

Catheter Care Awareness Week



Tip of the day

Identifying CAUTI risk factors starts with you.

Day 1: Know when to insert an indwelling catheter

- **TIP:** Only insert an indwelling (Foley) catheter when absolutely necessary¹
 - Follow your organization's policy for indwelling catheter indications for use and remove as soon as it is no longer indicated¹
- **STAT:** Up to 25% of hospitalized patients receive a urinary catheter during their stay, but as many as 50% may not have an appropriate indication^{1,2}

1. Patel, P. K., Advani, S. D., Kofman, A. D., Lo, E., Maragakis, L. L., Pegues, D. A., Pettis, A. M., Saint, S., Trautner, B., & Yokoe, D. S. (2023). Strategies to prevent catheter-associated urinary tract infections in acute-care hospitals: 2022 update. *Infection Control & Hospital Epidemiology*, 44(8), 1209–1231. <https://doi.org/10.1017/ice.2023.137>

2. Centers for Disease Control and Prevention. (2024, April 15). Catheter-associated urinary tract infection basics. <https://www.cdc.gov/uti/about/cauti-basics.html>



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Day 2: Maintain with Care

- **TIP:** Keep the catheter and drainage system closed and unobstructed.¹ Avoid disconnecting the system unless necessary^{1,2}
- **STAT** A 2009 study by Madeo, Barr, & Owen found that proper use and maintenance of a preconnected, closed catheter system was shown to reduce CAUTI rates by 41%.

1. Patel, P. K., Advani, S. D., Kofman, A. D., Lo, E., Maragakis, L. L., Pegues, D. A., Pettis, A. M., Saint, S., Trautner, B., & Yokoe, D. S. (2023). Strategies to prevent catheter-associated urinary tract infections in acute-care hospitals: 2022 update. *Infection Control & Hospital Epidemiology*, 44(8), 1209–1231. <https://doi.org/10.1017/ice.2023.137>
2. Madeo, M., Barr, B., & Owen, E. (2009). A study to determine whether the use of a preconnect urinary catheter system reduces the incidence of nosocomial urinary tract infections. *Journal of Infection Prevention*, 10(2), 76–80. <https://doi.org/10.1177/1757177408093500>



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Day 3: Remove Promptly

- **TIP:** Remove indwelling catheters as soon as it's no longer needed.¹ Consider nurse-driven protocols or reminders in the EMR to encourage timely removal¹
- **STAT:** Each day a catheter remains in place increases the risk of infection by 3-7%¹

1. Patel, P. K., Advani, S. D., Kofman, A. D., Lo, E., Maragakis, L. L., Pegues, D. A., Pettis, A. M., Saint, S., Trautner, B., & Yokoe, D. S. (2023). Strategies to prevent catheter-associated urinary tract infections in acute-care hospitals: 2022 update. *Infection Control & Hospital Epidemiology*, 44(8), 1209–1231. <https://doi.org/10.1017/ice.2023.137>



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Day 4: Engage the Team

- **TIP:** Consider working in pairs and using checklists during indwelling catheter insertion to assist in streamlining workflow and to monitor for potential contamination during placement¹
- **STAT:** Contamination of the sterile field or catheter may occur over 25% of the time a catheter is inserted²

1. Patel, P. K., Advani, S. D., Kofman, A. D., Lo, E., Maragakis, L. L., Pegues, D. A., Pettis, A. M., Saint, S., Trautner, B., & Yokoe, D. S. (2023). Strategies to prevent catheter-associated urinary tract infections in acute-care hospitals: 2022 update. *Infection Control & Hospital Epidemiology*, 44(8), 1209–1231. <https://doi.org/10.1017/ice.2023.137>

2. Centers for Disease Control and Prevention. (n.d.). Catheter-associated urinary tract infection (CAUTI) prevention. <https://www.cdc.gov/infection-control/media/pdfs/Strive-CAUTI104-508.pdf>



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Day 5: Develop a bladder scanning algorithm to address postoperative urinary retention (POUR)¹

- **TIP:** Nurse-directed intermittent catheterization and bladder scanning may be an appropriate alternative to indwelling catheters for patients experiencing POUR¹
- **STAT:** Postoperative urinary retention is a common complication following surgery and the incidence varies widely from 5%-70% depending on definition of POUR being used, patient demographics, surgery and anesthesia type and perioperative fluid therapy protocols²

1. Patel, P. K., Advani, S. D., Kofman, A. D., Lo, E., Maragakis, L. L., Pegues, D. A., Pettis, A. M., Saint, S., Trautner, B., & Yokoe, D. S. (2023). Strategies to prevent catheter-associated urinary tract infections in acute-care hospitals: 2022 update. *Infection Control & Hospital Epidemiology*, 44(8), 1209–1231. <https://doi.org/10.1017/ice.2023.137>

2. Çakmak, M., Yıldız, M., Akarken, İ., et al. (2020). Risk factors for postoperative urinary retention in surgical population: A prospective cohort study. *Journal of Urological Surgery*, 7(2), 144–148. <https://jurology.org/articles/risk-factors-for-postoperative-urinary-retention-in-surgical-population-a-prospective-cohort-study/jus.galenos.2020.3544>

