

# Prevention of Catheter-Associated Urinary Tract Infections



# Evidence-based Best Practices for CAUTI Prevention

- Perform hand hygiene before and after catheter insertion or manipulation
- Use urinary catheters only when necessary and for the shortest time possible
- Assess catheter use at least daily and remove as soon as possible
- Ensure only properly trained individuals who know aseptic technique are responsible for insertion of catheters and their maintenance (this includes all healthcare personnel and caregivers)



# Evidence-based Best Practices for CAUTI Prevention

- Maintain unobstructed urine flow by keeping
  - the catheter and collection tube free from kinking
  - the collection bag below the level of the bladder at all times
- Empty the collection bag regularly using a separate clean container for each patient
- Utilize alerts or reminders to remove unnecessary catheters
- Implementing guidelines or protocols for nurse-initiated removal of unnecessary urinary catheters
- Ensure education and performance feedback of staff regarding appropriate use of urinary catheters, hand hygiene, and catheter care



# Appropriate Indications for a Urinary Catheter

- Critically ill patients
- Surgical patients undergoing urologic or prolonged surgery
- Patients who have received large-volume infusions or diuretics during surgery
- Patients whose urinary output needs to be closely monitored
- Patients who have bladder obstruction, prolonged immobilization, or patients needing additional comfort in end-of-life care



# Inappropriate Use of a Urinary Catheter

- Catheters should not be used:
  - as a substitute for nursing care of patients with incontinence
  - for patient or healthcare provider convenience
  - as a means for obtaining urine for culture or other diagnostic tests
  - for an extended period of time after surgery