

Catheter Associated Urinary Tract Infection Prevention (CAUTI)

- Reassess need for bladder catheter Q shift.
- Secure catheter to thigh to prevent trauma with catheter securement device.
- Disinfect drainage tube connection before reconnection if system is inadvertently disconnected.
- Ensure that urine is draining without obstruction or kink.
- Maintain drainage bag below the level of the bladder bag without contacting the floor.
- Protect drainage bag valve from contamination when bag is emptied.
- Maintain perineal hygiene routine.
- Change Foley catheter if positive urine culture obtained.

For catheter insertion technique and specimen collection please reference LHSC Nursing Practice Manual.

References:

CPSI Canadian Patient Safety Institute. (n.d).UTI Evidence Informed Practices. Retrieved July 9, 2018 from <http://www.patientsafetyinstitute.ca/en/toolsResources/Hospital-Harm-Measure/Improvement-Resources/UTI/Pages/UTI-Evidence-Informed-Practices.aspx>CPSI

Canadian Patient Safety Institute. (n.d). Hospital Harm Improvement Resource UTI. Retrieved July 9, 2018 from <http://www.patientsafetyinstitute.ca/en/toolsResources/Hospital-Harm-Measure/Improvement-Resources/UTI/Pages/default.aspx>APIC Implementation Guide (n.d.).

Guide to Preventing Catheter Associated Urinary Tract Infections. Retrieved July 10, 2018 from http://apic.org/Resource_/EliminationGuideForm/0ff6ae59-0a3a-4640-97b5-eee38b8bed5b/File/CAUTI_06.pdf