SAINT JOSEPH VILLA

INDWELLING URINARY CATHETER CARE – CNA Staff

1. Wash your hands and don gloves prior to handling the catheter, drainage system or bag.
2. Check the perineum and urinary meatus during am and pm care for any signs of inflammation.
3. Cleanse the perineum and urinary meatus with soap and water or a perineal rinse as part of am and pm care and after each bowel movement or incontinence episode.
4. Cleanse the perineum from front to back and cleanse the catheter away from the meatus.
5. Be sure the catheter is properly anchored to prevent accidental tears of the urinary meatus.
6. Be sure the catheter, drainage system and bag are properly positioned to maintain urine flow.
7. Empty the collection bag each shift or more often as indicated. Use a separate container for each resident and avoid touching the spigot to the container.
8. Record urinary output.
9. Report the following to the nurse responsible for the resident’s care:
   a. Any sign or symptom of urinary tract infection (UTI): fever; change in urine, such as a foul odor or bloody/cloudy appearance; change in the resident’s mental or physical status
   b. No urine output or decreased urine output
   c. Leakage of urine
   d. Complaints of urinary related pain
10. Exercise caution with mobility and positioning of the resident to prevent accidental removal.

INDWELLING URINARY CATHETER CARE – RN / LPN Staff

1. Wash your hands and don gloves prior to handling the catheter, drainage system or bag.
2. Use aseptic insertion technique.
3. Maintain a sterile continuously closed system.
4. Irrigate catheter as ordered prn blockage and leakage.
5. Change catheter as ordered prn blockage and leakage.
6. Change catheter bag as indicated (leakage, sediment, odor, etc.).
7. Report changes in the resident’s condition to the physician.
8. Assess the resident for continued use of the indwelling catheter on a regular basis.
9. Update plan of care as indicated.

9/2009