



## Prevent Catheter-Associated Urinary Tract Infections.

## ·····Remember ······

A urinary catheter is indicated only for:

- Perioperative use in certain specified surgeries\*;
- Accurate measurement of urinary output in critically ill patients (intensive care);
- Management of acute urinary retention or obstruction;
- Promoting healing of pressure ulcers in incontinent patients; or
- Improved patient comfort for end-of-life care.

\*Genitourinary surgeries, surgeries of prolonged duration, surgeries requiring large-volume infusions or diuretics, and surgeries requiring intraoperative monitoring of urinary output.





## Get the catheter out to avoid a UTI.

Remember to discuss urinary catheter removal with physician\*:

- 1. By post-op day 2 for surgical patients\*\*, with day of surgery being day zero
- 2. When a patient is able to get out of bed
- 3. When a patient is transferred to another patient unit
- 4. When a patient is hemodynamically stable—vasopressors are discontinued
- \* If urinary catheter is not removed, there should be documentation as to reason for continuation.
- \*\* SCIP Inf. 9 criteria from the Specifications Manual for National Hospital Inpatient Quality Measures for Surgical Patients

## http://qio.ipro.org

This material was prepared by IPRO, the Medicare Quality Improvement Organization for New York State, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents do not necessarily reflect CMS policy. 10SOW-NY-AIM7.1-13-31