

Guidance at a Glance – Urinary Catheter Care

These guidelines support the delivery of care in community and social care settings. This guidance reflects best practice/national guidelines.

A urinary catheter is a thin flexible hollow tube which drains urine from the bladder into a drainage bag. It is inserted either into the urethra or through a hole made in the abdomen (suprapubic). The catheter is held in place by a small balloon filled with sterile water.

At least 23% of all infections are due to a urinary tract infection (UTI) and of those, 80% are due to the use of urinary catheters. All service users with urinary catheter are at increased risk of acquiring a UTI and the longer a catheter is in place the greater the risk. Good infection control practices are essential to prevent infection. It is also important that the need for the urinary catheter should be reviewed by a registered nurse on a regular basis.

Routine personal hygiene for service users, such as a daily bath or shower, is important to maintain catheter hygiene. For service users that are unable to bathe or shower, staff should wash the genital area including around the catheter at least twice daily with soap and water. For female service users, it is important to wash the genital area from front to back to prevent contamination from the anal area.

EMPTYING A CATHETER BAG

A catheter drainage bag should not be emptied more often than necessary as this increases the risk of infection. However, the bag must be emptied before it becomes completely full to avoid back flow of urine into the bladder. To prevent the risk of infection it is essential to follow good practice.

- Always wear PPE
- Clean the tap on the drainage bag to reduce the risk of transmission of infection.
- Empty the urine into a single use container.
- Avoid contact between the tap on the drainage bag and the container to prevent contamination and infection.
- Urine should be disposed of into a sluice or toilet.

CHANGING AN CATHETER BAG

Catheter bags, including leg bags, should be sterile and changed accordingly to the manufacturer's instructions. To reduce the risk of infection it is essential to follow good practice.

- Always wear PPE.
- When detaching the used bag from the catheter, to prevent contamination and infection, do not touch the end of the catheter or the end of the tube on the new catheter bag.
- Empty the urine from the bag and dispose of the bag as non-infectious/offensive waste. In a service user's own home, double wrap the bag and dispose of as household waste.
- Always record when catheter bag is changed.

OVERNIGHT DRAINAGE BAGS

If a service user has a leg bag during the day and additional larger linked drainage bag (night bag) should be used for overnight use. The night bag should be attached to the leg bag to keep the original system intact.

- Always wear PPE
- Attach the night bag to a stand to ensure that the drainage tap is not touching the floor, to prevent contamination of the tap.
- In a healthcare setting, wipe the leg bag drainage tap with an alcohol wipe to reduce the transmission of infection. In a service user's own home, it is not necessary to wipe the tap.
- When removing the cap from the new night bag tube, to prevent contamination and infection, do not touch the end before attaching it to the drainage tap on the leg bag
- Night bags are single use only and should be disposed of on removal and should not be used again.

National Institute for Health and Care Excellence (2017) healthcare associated infections: prevention and control in primary and community care. Available from: <https://www.nice.org.uk/guidance/CG139/chapter/1-Guidance> [accessed on 30.08.19]

Loveday et al (2014). epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England. *Journal of Hospital Infection* 86S1 (2014) S1–S70