

Frequency of Long-Term Urinary Catheter Replacement in Continuing Care Settings

Situation	Saskatchewan Infection Prevention and Control was asked to make a recommendation on the frequency of replacing long-term urinary catheters in continuing care settings.
Background	Routinely changing indwelling urinary catheters when there is no medical reason (i.e. no evidence of infection or obstruction) increases the incidence of urinary tract infections in patients, residents and clients. Currently there are inconsistent practices in the frequency of indwelling urinary catheter replacement, which may adversely affect care outcomes.
Assessment	In Canada, manufacturers recommend changing indwelling urinary catheters when clinically indicated and routinely every 30 days in order to comply with licensing requirements of indwelling devices ¹ . This is contrary to expert opinion and best practice guidelines which recommend long-term urinary catheter replacement should be based on clinical indications such as infection or evidence of obstruction(encrustations/blockage/leakage, etc.) , when the closed system has been compromised, or as per the recommended usage by the long-term catheter manufacturers (usually every 12 weeks). ^{2,3,4}
Recommendations	
<p>Continuing Care Facilities should choose one of the following options regarding urinary catheter change frequency:</p>	
<p>1. Follow best practice guidelines and change urinary catheters when there is a clinical indication or before 12 weeks. Use a maintenance bundle checklist and catheter change record to determine individual care requirements, based on previous problems with blockages and encrustations.</p>	
<p>OR</p>	
<p>2. Follow the manufacturers' licensing requirements that recommend changing urinary catheters when medically indicated and routinely every 30 days. Develop tools to promote best practice and to identify whether there is a need for a catheter change prior to 30 day change date.</p>	
<p>Additional Recommendations:</p>	
<p>1. Carefully evaluate the need for an indwelling urinary catheter on regular basis and consider using other types of long-term devices or incontinence products.</p>	
<p>2. Complete a maintenance bundle checklist daily on each client with a long-term indwelling catheter and incorporate the information into the client's health record and care plan as required.</p>	
<p>3. If urine drainage problems are identified, refer to a decision flow chart to determine what steps should be taken and record in the client's record.</p>	
<p>4. Develop a client specific care regimen by tracking and reviewing the information collected on the catheter change record.</p>	

5. If CAUTI is suspected, change catheter prior to collecting a urine for C&S as per the protocol in the provincial [UTI guideline](#).

References

1. Winnipeg Regional Health Authority, Infection Prevention & Control Manual, "Urinary Catheter Change Frequency", January 10, 2013. [<http://www.wrha.mb.ca/extranet/ipc/files/manuals/community/7.2.3.pdf> - retrieved July 2015]
2. National Clinical Guideline Centre (NCGC), "Infection: prevention and control of healthcare-associated infections in primary and community care: Chapter 10 - Long term urinary catheters", NICE Clinical Guideline Centre 2012, The Royal College of Physicians, London. Pp 116-149. [http://www.ncbi.nlm.nih.gov/books/NBK115271/pdf/Bookshelf_NBK115271.pdf -retrieved July 2015]
3. Strategy for the Control of Antimicrobials Resistance in Ireland (SARI), "Guidelines for the Prevention of Catheter-Associated Urinary Tract Infection", Dublin, Ireland: Health Protection surveillance Centre, October 2011). [<https://www.hpsc.ie/A-Z/MicrobiologyAntimicrobialResistance/InfectionControlandHAI/Guidelines/File,12913,en.pdf> -retrieved October 2012].
4. Gang V, Cobussen-Boekhorst H, Farrell J, Gea-Sánchez M, Schwennesen T, Vahr S and Vandewinkel C, "Evidence-based Guidelines for Best Practice in Urological Health Care: Catheterisation – Indwelling catheters in Adults", (Arhem, NL, European Association of Urology Nurses: February 2012). [http://www.nursing.nl/PageFiles/11870/001_1391694991387.pdf - October 2012].

Additional Resources used in Appendices

- Bard®, "A Guide for Patients – May 2013, v2", Bard Medical, UK, 2013. [<http://www.bardmedical.co.uk/Resources/Products/Documents/UK%20Web%20Site/Patient%20Guide.pdf> - retrieved July 2015]
- Canterbury Continenence Forum, "Catheter Care Guidelines 2013", CDHB Nursing Policies and Procedures, Canterbury District Health Board, New Zealand [<https://www.cdhb.health.nz/Hospitals-Services/Health-Professionals/CDHB-Policies/Nursing-Policies-Procedures/Documents/Catheter-Care-Guidelines.pdf> - retrieved May 2015].
- Turner B, Dickens N, "Long-term catheterisation", Primary Health care. 21, 4, 32-38, May 2011. [<http://journals.rcni.com/doi/pdfplus/10.7748/phc2011.05.21.4.32.c8495> retrieved July 2015].

Correspondence: Patient Safety Unit

Saskatchewan Ministry of Health

3475 Albert Street

Regina, SK S4S 6X6

PatientSafety@health.gov.sk.ca

OR: provincialinfectioncontrolgroup@saskatoonhealthregion.ca