Decreasing Urinary Tract Infections In Interventional Cardiolgy

The Problem

Urinary Tract Infection (UTI) rate in interventional cardiology inpatients is above national and hospital benchmarks.

Aim/Goal

- Decrease UTI's in interventional cardiology patients.
- Reduce number of indwelling urinary catheters placed for this patient population.
- This practice change would not be expected to increase groin complications in female patients.

The Team

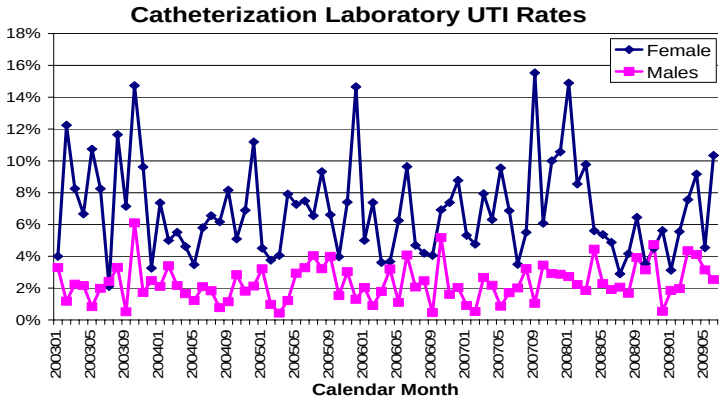
- Cardiovascular Institute Holding Area Nurses
- Cardiac Catheterization Laboratory Nurses and Physicians

The Steps Taken for Practice Change

- Obtained UTI data for inpatients before practice change.
- Literature search/benchmarked practice against other catheterization laboratories (locally and nationally).
- Discussed data and practice changes with staff through journal club, staff meetings and in-services.
- Developed guidelines for appropriate patient selection for placement of indwelling urinary catheters.
- Modified documentation tool to facilitate accurate data related to indwelling catheters – where and when placed in which patients.
- Trial and evaluate alternate product – female urinals.

Progress to Date

- Practice change discussed with all Interventional Cardiology staff, Farr 3 Nurse Manager and Clinical Nurse Specialist.
- Guidelines are being utilized in holding area and catheterization laboratory.
- Catheterization Laboratory documentation tool has been modified to capture accurate data – being utilized appropriately by catheterization laboratory nursing staff.
- Female urinal trial in place.



Next Steps/What Should Happen Next

- The data shall be accurately collected related to placement of indwelling urinary catheters for the first quarter of 2010.
- The data shall be reviewed to evaluate the effect of all practice changes on UTI's and groin complications in Interventional Cardiology patients.
- The data and outcomes shall be shared with all staff in department.
- The process will be reevaluated at that time to identify opportunities for further interventions.

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