



Urinary Catheter Bundle Management
Guideline

AMRH/IC/GUD/002/Vers.02
Effective Date: April 2022
Review Date: April 2025

Institution Name: Al Masarra Hospital					
Document Title: Urinary Catheter Bundle Management Guideline					
Approval Process					
	Name	Title	Institution	Date	Signature
Written by	Wafa Al Balushi	Infection Control Practitioner	Al Masarra Hospital	24.4.2022	
Reviewed by	Noora Al Zadjali	HOD Infection Control	Al Masarra Hospital	24.5.2022	For:
	Dr. Nada Al Tamtami	HOD Laboratory	Al Masarra Hospital	12 0 6 2 2	
Validated by	Kunooz Al Balushi	Document Manager	Al Masarra Hospital	June 2022	
Approved by	Dr. Bader Al Habsi	Hospital Director	Al Masarra Hospital	2022/06/15	





Content Table:

Acronyms	3
1. Introduction	4
2. Scope	4
3. Purpose	4
4. Definitions	4
5. Guidelines	4-5
6. Responsibility	6
7. Document History and Version Control	6
8. Related Documents	7
9. References.....	7
Appendices	8-11
Appendix 1. Audit Tool	8-9
Appendix 2. Document Request Form	10
Appendix 3. Document Validation Checklist	11



Acronyms

AMRH	Al Masarra Hospital
GCC	Gulf Cooperation Council
HCAI	Healthcare Associated Infection
UTI	Urinary Tract Infection



Urinary Catheter Bundle Management Guideline

1. Introduction

Any infection reported to the Infection Control must meet the GCC definition for a healthcare-associated infection (HCAIs). A bundle is a structured way of improving the processes of care and patient outcomes. It is a small, straightforward set of evidence-based practices generally three to five. That, when performed collectively and reliably, have been proven to improve patient outcomes.

2. Scope

This document is applicable to all healthcare workers of Al Masarra Hospital (AMRH).

3. Purpose

- 3.1 To guide staff in improving urinary catheter management.
- 3.2 To effectively and comprehensively improve patient outcomes with indwelling urinary catheters.
- 3.3 To prevent Urinary Tract Infection (UTI) by implementing well-documented four (4) components of care.

4. Definitions

- 4.1 **Bundle:** a structured way of improving the processes of care and patient outcomes.
- 4.2 **Healthcare-Associated infection (HCAI):** infections that occur while receiving health care, developed in a hospital or other health care facility that first appear 48 hours or more after hospital admission, or within 30 days after having received health care.

5. Guidelines

- 5.1 **Avoid unnecessary urinary catheters.**
 - 5.1.1 Appropriate indication of urinary catheter use in Al Masarra Hospital
 - 5.1.1.1 Urinary Incontinence (leakage)
 - 5.1.1.2 Urinary Retention (not being able to urinate)



5.1.1.3 Prostate problems

5.2.1.4 Dementia

5.2 Insertion Using Aseptic Technique

5.2.1 Perform hand hygiene immediately before and after insertion.

5.2.2 Aseptic Technique of catheter insertion by using:

5.2.2.1 Gloves, a drape, and sponges

5.2.2.2 Sterile or antiseptic solution for cleaning the urethral meatus

5.2.2.3 Single-use packet of sterile lubricant jelly for insertion

5.2.3 Using a small catheter as possible that is consistent with proper drainage to minimize urethral trauma.

5.3 Appropriate Maintenance

5.3.1 Maintain a sterile, continuously closed draining system.

5.3.2 Keep catheter properly secured to prevent movement and urethral traction.

5.3.3 Keep collection bag below the level of the bladder at all the times.

5.3.4 Maintain unobstructed urine flow.

5.3.5 Empty collection bag regularly.

5.3.6 Maintain metal equipment care with routine hygiene (bathing).

5.3.7 Use aseptic technique when the collection system must be replaced.

5.3.8 ***Practice to avoid:***

5.3.8.1 Irrigating catheters, except in cases of catheter obstruction.

5.3.8.2 Disconnecting the catheter from drainage tubing.

5.3.8.3 Replacing catheters routinely.

5.4 Daily review of catheter necessity and prompt removal when unnecessary:

5.4.1 Daily review of catheter necessity should be conducted using criteria for appropriate insertion stipulated in guideline 5.2.



6. Responsibility

6.1 Doctors Shall:

- 6.1.1 Assess the need for insertion of urinary catheter and will write the order for insertion in the progress notes of Al Shifa 3+ system.
- 6.1.2 Write the order for removing the urinary catheter (if discontinued), in Al Shifa 3+ system.
- 6.1.3 Insert the urinary catheter in case of difficult insertion.

6.2 Staff Nurses Shall:

- 6.2.1 Check the doctor's order for insertion of urinary catheter.
- 6.2.2 Inform the Infection Prevention & Control Department (IP&C).
- 6.2.3 Perform hand hygiene immediately before and after the insertion.
- 6.2.4 Perform aseptic technique in urinary catheter insertion.
- 6.2.5 Apply appropriate maintenance of urinary catheter by insuring the continually closed draining system.
- 6.2.6 Maintain adequate record.

7. Document History and Version Control Table

Document History and Version Control			
Version	Description of Amendment	Author	Review Date
1	Initial Release	Wafa Al Balushi	September 2022
2	Review and Update	Wafa Al Balushi	April 2025
Written by		Reviewed by	Approved by
Wafa Al Balushi		Noora Al Zadjali	Dr. Bader Al Habsi



8. Related Documents

8.1 Appendix 1. Audit Tool.

9. References

Title of book/Journal/articles/Website	Author	Year of publication	Page
Healthcare Associated Infections Surveillance Manual	Balkhy,H and El-saed Ramdan,A.	2018	115-117
<i>http://www.ngha.med.sa/English/MedicalCities/AlRiyadh/.../SurveillanceManual2012.pdf</i>	-	2012	-



Appendices

Appendix 1. Audit Tool

Department: _____

Date: _____

S.N.	Audit Process	Standard / Criteria	Yes	Partial	No	N/A	Comment
1.	Observation Interview	Is the sterile disposable catheterization set available?					
2.	Observation Interview	Is the Infection Prevention & Control Department informed?					
3.	Observation Interview	Is the staff performing hand hygiene immediately before and after insertion of urinary catheter?					
4.	Interview Document review	Is there an appropriate indication for urinary catheterization (e.g. urinary incontinence, urinary retention, prostate problems, and Dementia)?					
5.	Observation Interview	Is the staff using aseptic technique while doing the process of inserting catheter? <ul style="list-style-type: none">• Gloves, a drape, and sponges• Sterile or antiseptic solution for cleaning the urethral meatus• Single-use packet of sterile lubricant jelly for insertion					



Urinary Catheter Bundle Management
Guideline

AMRH/IC/GUD/002/Vers.02
Effective Date: April 2022
Review Date: April 2025

6.	Observation Interview	Is the staff maintaining a sterile, continually closed draining system?					
7.	Observation Interview	Is the catheter properly secured to prevent the urethral traction?					
8.	Observation Interview	Is the collecting bag kept below the level of the bladder at all times?					
9.	Observation Interview	Is the staff maintaining an unobstructed urine flow?					
10.	Observation Interview	Is the staff emptying the collecting bag regularly?					
11.	Observation Interview	Is the staff reviewing the necessity of catheter daily?					
12.	Interview Document review	Is all staff trained on urinary catheter bundle management?					



Appendix 2. Document Request Form

Document Request Form			
Section A: Completed by Document Requester			
1. Requester Details			
Name	Wafa Al Balushi	Date of Request	April 2022
Institute	Al Masarra Hospital	Mobile	95821833
Department	Infection Control and Sterilization Service	Email	wafa22oman@gmail.com
The Purpose of Request			
<input type="checkbox"/> Develop New Document	<input checked="" type="checkbox"/> Modification of Document	<input type="checkbox"/> Cancelling of Document	
1. Document Information			
Document Title	Urinary Catheter Bundle Management Guideline		
Document Code	AMRH/IC/GUD/002/Vers.02		
Section B: Completed by Document Controller			
<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Cancelled	<input type="checkbox"/> Forward To:.....	
Comment and Recommendation:			
Name	Kunooz Al Balushi	Date	April 2022
Signature		Stamp	





Appendix 3. Document Validation Checklist

Document Validation Checklist					
Document Title: Urinary Catheter Bundle Management Guideline			Document Code: AMRH/IC/GUD/002/Vers.02		
No	Criteria	Meets the Criteria			Comments
		Yes	No	N/A	
1.	Approved format used				
1.1	Clear title – Clear Applicability	✓			
1.2	Index number stated	✓			
1.3	Header/ Footer complete	✓			
1.4	Accurate page numbering	✓			
1.5	Involved departments contributed	✓			
1.6	Involved personnel signature /approval	✓			
1.7	Clear Stamp	✓			
2.	Document Content				
2.1	Clear purpose and scope	✓			
2.2	Clear definitions	✓			
2.3	Clear policy statements (if any)			✓	
3.	Well defined guidelines and steps				
3.1	Guidelines in orderly manner	✓			
3.2	Guidelines define personnel to carry out step	✓			
3.3	Guidelines define the use of relevant forms			✓	
3.4	Guidelines to define flowchart			✓	
3.5	Responsibilities are clearly defined	✓			
3.6	Necessary forms and equipment are listed	✓			
3.7	Forms are numbered	✓			
3.8	References are clearly stated	✓			
4.	General Criteria				
4.1	Policy is adherent to MOH rules and regulations	✓			
4.2	Policy within hospital/department scope	✓			
4.3	Relevant policies are reviewed	✓			
4.4	Items numbering is well outlined	✓			
4.5	Used of approved font type and size	✓			
4.6	Language is clear, understood and well structured	✓			
Recommendations..... For implementation More revision To be cancelled.....					
Reviewed by: <u>Kunooz Al Balushi</u>			Reviewed by: <u>Ruvilee Ramel-Bueno</u>		

