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Decreasing Intermittent Catheterization: Urinary Retention Clock Pie Chart Protocol

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ABSTRACT

A rehabilitation nurse becomes an advocate and ensures positive communication between the interdisciplinary team. Nurses often have patients with the diagnoses of acute urinary retention. My goal as a nurse resident was to establish a series of interventions to prevent the need for intermittent catheterization.

A patient with an indwelling catheter or the need of intermittent catheterization can interrupt therapy and prolong a patient's stay. In addition an indwelling catheter can place the patient at risk for further complications such as UTI or urethral perforation.

I incorporated a Urinary Retention clock pie chart with multiple interventions every two hours. Those interventions included, ensuring adequate fluids, bladder massaging, auditory stimulation, toileting and patient education.

Pre and post-data was gathered for comparison. The final results of my residency project demonstrated increase awareness within the nursing staff on alternative methods prior to intermittent catheterization and the reduced amounts of intermittent catheterization.

References:

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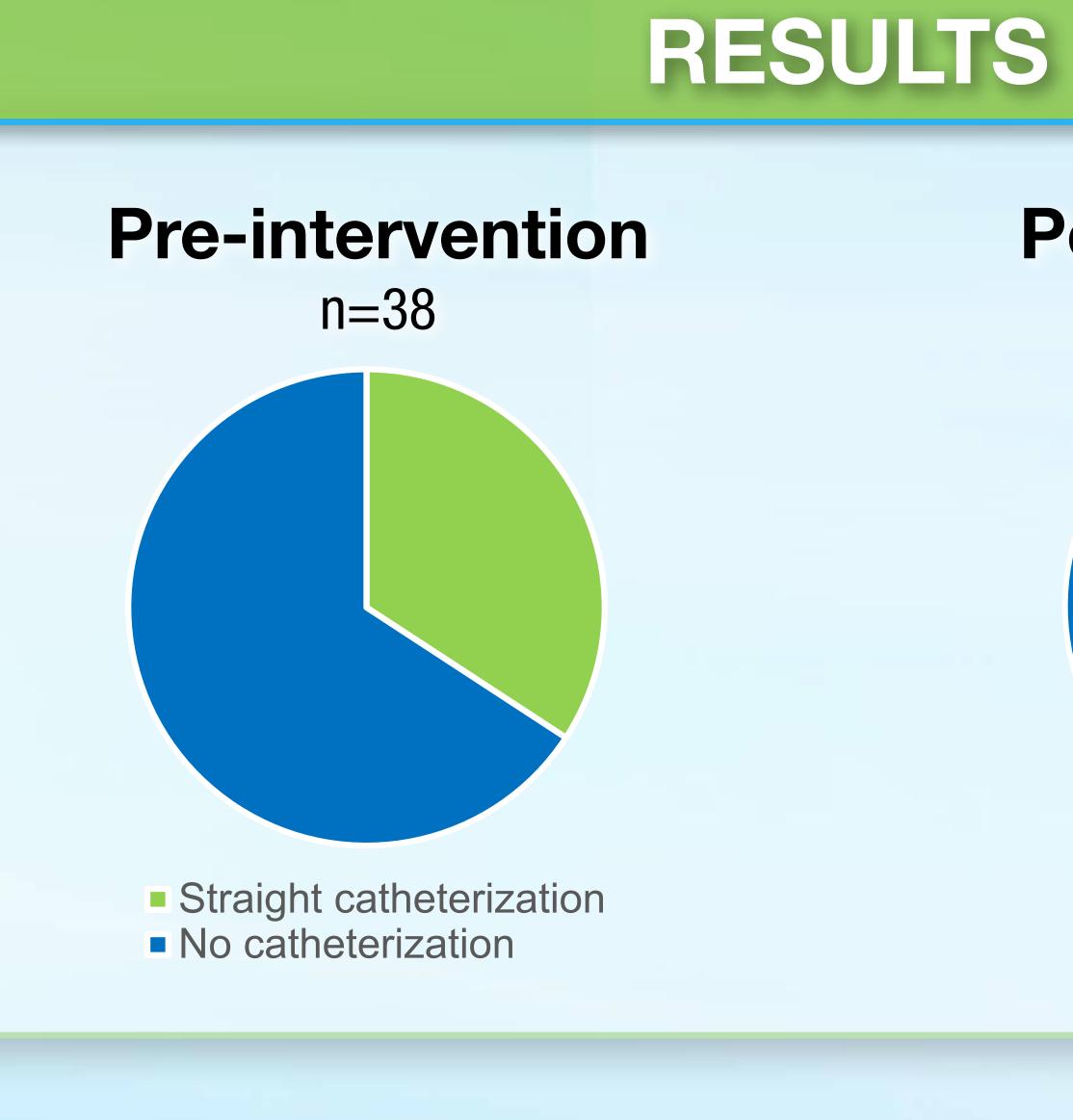


LITERATURE

- Urinary retention is traditionally treated with an indwelling urethral catheter or intermittent catheterization. (Johansson, et al, 2010)
- Urethral catheterization is connected with risk of complications such as urinary tract infection (UTI), trauma, urethral perforation, stricture, bleeding, fistula and increases in discomfort. (Johansson, et al, 2010)
- Once a catheter enters the bladder, the incidence of bacteriuria rises by about 3-7% per day. (Johansson, et al, 2010)
- In many clients, when interventions are utilized to decrease the amount of residual urine, it can eventually lead to the tapering of catheterization. (Carpenito-Moyet, 2004, pg. 366-371

URINARY RETENTION PROTOCOL

- Upon admission identify patient's at risk for urinary retention using bladder scanner.
- If patient meets criteria of retention of equal to or greater than 350 ml place urinary retention protocol in patient's room.
- Initiate protocol every two hours to promote bladder emptying
- Educate patient on the use of protocol to avoid intermittent catheterization
- Educate nursing staff on the use of clock pie chart protocol







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Post-intervention n=20 Straight catheterization No catheterization

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