

Care homes with nursing

Urinary catheter passport

Important: This document must accompany the resident when they are admitted to hospital and must be returned with the resident when they are discharged back to the nursing home.

To be completed by nursing staff. All healthcare workers must record details of urinary catheterisation in the sections below as well as the appropriate nursing / medical records.

Resident's name		DOB
Nursing home		NHS no.
Catheter risk assessment score		
Reason for catheterisation		
Date of first catheterisation	<input type="checkbox"/> Urethral catheter	<input type="checkbox"/> Supra pubic catheter (please tick)
Catheter type and size	Affix label here if available	
Planned duration before catheter changes		
Any problems experienced during catheterisation?		
Does the resident have their catheter changed in the nursing home or in hospital? Give details if changed in hospital.		
Type of fixation device, leg bag and night bag used		
Date referred		
Refer to the Continence Urology and Colorectal Service if the resident has, or develops, any of the following:		
<ul style="list-style-type: none"> • current / previous Staphylococcus aureus or MRSA colonisation / infection in any body site • trauma / haematuria at catheterisation • frequent catheter associated UTIs or UTIs from catheter changes • purulent discharge at catheter entrance site (please obtain swab for M C and S) • catheter risk assessment score of 50 or over • ongoing catheter problems • meets the criteria for trial without catheter or intermittent catheterisation which needs specialist input 		
Date, name and signature		
Has prophylactic antibiotics been prescribed for all catheter removals and/or insertions?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Please state reason for prophylaxis (i.e MRSA colonised in urine)		
Name, dose and administration details of prescribed prophylactic antibiotics		
Date, name and signature		

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Urinary catheter product guide

Correct product specification reduces the risk of catheter complications such as trauma and catheter associated urinary tract infection (CAUTI).



Catheter material	
Hydrogel coated latex	Not latex free. For use up to 12 weeks. First line choice for residents with no latex allergy.
100% silicone or Hydrogel coated silicone	Both latex free catheters for residents with latex allergy. For use up to 12 weeks. Silicone catheters have an increased risk of urethral / supra pubic site trauma. Rationale for use must be clearly documented.
PTFE Teflon coated latex	Not latex free. For use up to 28 days.

Drainage bags	
Drainage bags must be adequately supported to reduce the risk of trauma and catheter complications. Use either 2 elastic straps, an elastic sleeve or a floor / bed stand.	
Leg bags	Should be long enough to allow the bag to be below the level of the bladder when standing and sitting. Ideally attach to the calf (not thigh or knee).
Night bags	Should be single use.
5-7 day 2 litre bags	Should be used when residents are on continued bed rest.

Catheter fixation products	
Should be used (in addition to drainage bag support). Reduces the risk of trauma and catheter complications. Must be fitted correctly to ensure does not pull catheter taught or kink / squash catheter tubing (see photo examples opposite).	
Strap devices	Ensure does not slip down leg.
Adhesive devices	Must use skin protection wipes (if supplied with product) to reduce skin reactions from adhesive.

References:

Leeds Community Healthcare NHS Trust. Urinary Catheterisation: Adults and Children (Urethral, Supra Pubic and Intermittent) Policy and Standard Operating Procedures (SOPs) 2015
Royal Collage of Nursing (2012), Catheter care Guidance for Nurses, RCN London

Adult catheter size	
Male	Ch 12-14
Female	Ch 12
Supra pubic	Ch 14-16

Adult catheter length	
Male	Must be standard length.
Female	Female or standard length (standard length more appropriate for larger or hoisted females).
Supra pubic	Standard length usually appropriate. Female length can be used.

Adult balloon size	
Always follow the catheter manufacturer's instructions / information on balloon size.	
10mls	General size used.
5mls	Some adults catheters have 5ml balloons.
Larger balloon sizes	Have increased risk of trauma and catheter complications are not advisable.

Catheter maintenance solutions	
Risk of causing CAUTI, trauma and complications. Should not be used to unblock a catheter. Blocked catheters should be removed / changed.	
Solution S (saline)	Not recommended unless under specialist direction.
Solution G and solution R (acidic solutions)	Use only if encrustation to catheter lumen or tip diagnosed. Rational and regular evaluation must be documented. Seek advice from CUCS.

