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What interventions are effective in reducing the prevalence of Catheter Associated Urinary Tract Infections?

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ABSTRACT

Background and Objective: Catheter Associated Urinary Tract Infection (CAUTI) is one of the most prevalent, costly, and morbid hospital acquired infections (HAIs). Indwelling catheters are one of the most used devices within the hospital setting with 25%-30% of patients having a catheter placed during their stay. The main purpose of this study is to evaluate various forms of literature to determine the most effective ways to prevent CAUTI.

Literature Review: Various bundle approaches were reviewed with main interventions being proper aseptic insertion, collection bag kept lower than the bladder, daily rounds discussing the benefits and risks of discontinuation of the catheter, and proper education to the patient, family, and caregivers. Other interventions not included in a bundle approach were the use of external collection devices, proper indications, and changing culture within the unit to decrease infection rates. A qualitative study regarding contextual barriers and CAUTI incidence was also included.

Methods: A group of nurses across various floors including medical-surgical, intensive care, labor and delivery, and mother-baby will be tasked with gradual implementation of various strategies to reduce the prevalence of CAUTI within their patient population. The interventions will include streamlined standardized documentation, review of proper indication and discontinuation on daily rounds with providers, use of external collection devices when appropriate, proper cleaning techniques, and the use of stabilization devices as well as keeping the collection bag below the level of the bladder. The goal of this project is to reduce the number of CAUTIs within their assigned patient populations.

Evaluation: Evaluation of results would include analysis of each intervention as they would be introduced gradually on a time-based manner. This would allow for evaluation of each

intervention and analysis of efficacy. Based on literature, the implementation of these interventions should reduce the incidence of CAUTIs drastically in facilities that do not already have these interventions as protocol.