CAUTI Infection in Acute Care Setting

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Background: Catheter Associated Urinary Tract Infections (CAUTIs) is one of the most common and costly hospital acquired infections (HAI) within the acute care setting that prolong the length of stay and negatively affect patient health outcomes. **Purpose:** This evidence-based practice project aimed at addressing the question: Within the acute care setting, what nursing interventions are effective in preventing CAUTI? **Methods:** PRISMA was utilized, and various peer-reviewed literatures have been appraised using the John Hopkins Evidence-Based Practice Tools to determine the most effective interventions to reduce the prevalence of CAUTI within the adult acute care setting. **Results:** Implementation of a nurse-driven protocol is part of a multimodal strategy to measurably decrease catheter utilization and CAUTI rates. Other parts of the multimodal strategy include daily evaluation, several interventions, and continued education on catheter utilization. Layering of interventions leads to adoption of measures that prevent CAUTI. Interventions included various bundle approaches. Considering alternatives to indwelling urinary catheters, proper cleaning techniques, aseptically inserting catheters for appropriate criteria only, removing catheters as soon as possible, improved urine specimen collection, enhanced care measures for critical care patients and the use of stabilization devices as well as keeping the collection bag below the level of the bladder to prevent the backflow of urine. **Conclusion:** CAUTI is preventable through several measures that upkeep sterility. Evaluation and close monitoring are essential in order to lower prevalence of CAUTI in the acute care setting. The multimodal approach addresses CAUTI in its preliminary stages by evaluating its necessity. Proper catheter care and interventions can ultimately reduce CAUTI.