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## **American Association of Critical-Care Nurses updates clinical guidelines to prevent catheter-associated urinary tract infections**

*Pre- and post-catheterization assessments crucial to preventing infection*

**ALISO VIEJO, Calif.** – Jan. 18, 2012 – Urinary tract infections account for nearly 40 percent of hospital-acquired infections in acute care hospitals, triggering increased hospital costs and higher patient morbidity and mortality rates. Compounding the toll of these infections, Medicaid, Medicare and many other payers no longer reimburse costs related to treatment because of their presumed preventability.

A new American Association of Critical-Care Nurses ([AACN](#)) [Practice Alert](#)<sup>™</sup> stresses the use of pre- and post-catheterization assessments to gauge proper catheter use and to monitor early signs of infection. This alert is the latest in a collection of [evidence-based guidelines](#) issued by AACN to standardize practice and update nurses on new advances and trends.

AACN expects nursing units to:

- Develop written guidelines for urinary catheterization, including indications for indwelling urinary catheterization and ensuring that catheter placement is limited to patients who meet indications.
- Stock devices and supplies, and be aware of techniques that offer alternatives to indwelling catheters (e.g., condom catheters, penis pouches, bladder scanner, incontinence products).
- Design and implement standards and training programs for catheter insertion and manipulation.
- Review daily the need for continued catheterization for all patients.
- Develop systems to ensure prompt removal of catheters when their use is no longer indicated.
- Implement infection surveillance programs that include unit-based urinary catheter days and rates of CAUTIs.
- Develop action plans to address needed improvements.

Based on available evidence, the expected practice related to preventing CAUTIs is to:

- Assess patient for accepted indications and alternatives prior to placement of any indwelling urinary catheter.
- Adhere to aseptic technique for placement, manipulation and maintenance of indwelling urinary catheters.

- Document all instances of indwelling urinary catheters including insertion date, indication and removal date.
- Discontinue indwelling urinary catheters as soon as indications expire.

Supported by authoritative evidence, AACN Practice Alerts™ seek to ensure excellence in practice and a safe and humane work environment. Topics address both nursing and interprofessional activities of importance to patients in acute or critical care environments.

AACN [Practice Alerts](#)™ can be downloaded free of charge from AACN's [website](#).

**About the American Association of Critical-Care Nurses:** Founded in 1969 and based in Aliso Viejo, Calif., the American Association of Critical-Care Nurses (AACN) is the largest specialty nursing organization in the world. AACN joins together the interests of more than 500,000 acute and critical care nurses and claims more than 240 chapters worldwide. The organization's vision is to create a healthcare system driven by the needs of patients and their families in which acute and critical care nurses make their optimal contribution. To learn more about AACN, visit [www.aacn.org](http://www.aacn.org), connect with the organization on Facebook at [facebook.com/aacnface](https://facebook.com/aacnface) and follow AACN on Twitter at [twitter.com/aacnme](https://twitter.com/aacnme).

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