Interactive Activity: Urinary Catheter Care and Maintenance Skits

Interactive skits help to reinforce proper urinary catheter care and maintenance

**Supplies**

- Medical mannequin or volunteer
- Bed or chair
- Indwelling urinary catheter with drainage bag
- Catheter securement device
- Colored water to simulate urine
- Urine receptacle
- Paper towels
- Personal Protective Equipment (e.g. gloves, gowns)
- Hand hygiene products (soap & water or alcohol-based hand sanitizer)
- Waste bin
- Prizes

**Directions**

1. Prepare the urinary catheter by placing colored water into catheter tube/drainage bag.
2. Use your medical mannequin or ask for a volunteer to lie in bed or sit in chair.
3. Using the catheter securement device attach the catheter to the leg of the mannequin or volunteer to simulate placement of a catheter (do not actually insert).
4. Using the list below, act out each short skit. Have fun with it!
5. At the end of each skit, ask the audience what you should have done differently. Consider giving each person with a correct answer a small prize.

*Available in TIP Toolkit, Pages 85-88*
Skits

1. **Situation:** Nurse/nurse aide enters into the resident’s room to check on them (improvise conversation, perhaps the call light was on). Without first performing hand hygiene, the nurse/nurse aide touches the resident (e.g. on the leg or shoulder), then leaves the room without performing hand hygiene.

   **What should have been done differently?** Nurse/nurse aide should have performed hand hygiene before and after touching the resident.

2. **Situation:** Nurse/nurse aide enters into the resident’s room to check on them. The nurse/nurse aide performs hand hygiene, checks and touches the urinary catheter drainage bag, and says something like “It looks like we need to empty out your drainage bag. I’ll be right back to empty it.” The nurse/nurse aide then places the catheter bag back to where it was, performs hand hygiene and leaves the room.

   **What should have been done differently?** Nurse/nurse aide should have put on gloves and a gown before touching the urinary drainage bag. The drainage bag may be contaminated with multi-drug resistant organisms (MDROs) and using gloves and gowns can reduce the amount of contamination of the nurse/nurse aids hands and clothing.

3. **Situation:** Nurse/nurse aide enters into the resident’s room to check on them (improvise conversation). The nurse/nurse aide performs hand hygiene, dons PPE, checks and touches the urinary catheter drainage bag, and says something like “It looks like we need to empty out your drainage bag. I’ll be right back to empty it.” The nurse/nurse aide then places the drainage bag up on the bed or on the floor, performs hand hygiene, removes PPE, and leaves the room.

   **What should have been done differently?** The catheter drainage bag should be placed below the level of the bladder (not up on the bed) to prevent urine traveling up the catheter to the bladder, and prevent the tubing from becoming kinked. The drainage bag should also be placed up off of the floor where it may become contaminated.

4. **Situation:** Nurse/nurse aide enters into the resident’s room to empty out the resident’s catheter drainage bag, and performs hand hygiene and dons PPE. The nurse/nurse aide uses a receptacle/graduate with no label on it from the bathroom, empties out the urine, rinses out the receptacle and leaves it in the bathroom.

   **What should have been done differently?** The receptacle/graduate should be labeled with resident’s name to ensure that it is not used for another resident’s urine. This could cause cross-contamination of MDROs from one resident’s catheter to another.

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5. **Situation:** Nurse/nurse aide enters into the resident’s room to empty out the resident’s catheter drainage bag, and performs hand hygiene and dons PPE. The nurse/nurse aide obtains a receptacle/graduate with labeled with the resident’s name on it from the bathroom. As the nurse/nurse aide empties the drainage bag, they touch the spigot on the bag to the side of the graduate/receptacle. Then, they empty out the receptacle, rinse out the receptacle, remove their gloves and gown, perform hand hygiene, and leave the room.

**What should have been done differently?** *The spigot of the catheter should not touch the receptacle opening. This could cause cross-contamination of MDROs from the receptacle to the resident’s drainage bag.*

6. **Situation:** The nurse aide informs the nurse that the resident’s catheter isn’t draining any urine into the drainage bag. The nurse enters into the resident’s room to check on the resident’s catheter. She/he performs hand hygiene, dons PPE, and inspects the catheter tubing and drainage bag. The nurse notes there is no urine in the bag. She/he decides to check and see if there is any blockage in the tubing and disconnects it from the bag. She/he sees that the tubing is clear, reconnects the tubing to the bag. She/he removes her PPE, and leaves the room, planning to return in a while to re-check on the resident.

**What should have been done differently?** *The closed drainage system was broken. Maintaining a closed drainage system helps to prevent contamination of the catheter tubing and drainage bag from travelling up to the bladder. After any breaks in the system, the catheter and collecting system should be replaced. Also, the nurse did not perform hand hygiene after removal of PPE. Hand hygiene after removal of PPE can kill or remove bacteria that may have contaminated the nurse’s hands during the removal.*