Care plan

HOUDINI - make that catheter disappear

Name: ADD STICKER
DOB:
NHS number:

Clinical indication

Haematuria- clots and heavy
Obstruction/catheterised by a urologist (retention) –
Bladder scan amount: mL
Urology/gynaecology/perianal surgery/prolonged surgery
Decubitus ulcer - to assist the healing of a perianal/sacral wound in an incontinent patient
Input/output – monitoring accurate < hourly or acute kidney injury when oliguric
Nursing at the end of life
Immobilisation – neurogenic bladder – unstable fracture or neurological impairment (where all other methods of toileting are contraindicated)
Other

In patients with dementia or delirium, always avoid indwelling urinary catheters – even – if there is a strong indication for insertion and consider the use of intermittent self/carer catheterisation.

Verbal consent given	Yes	No	NA
If unable to consent, MCA best interests completed	Yes	No	NA
Admitted with passport/existing catheter	Yes	No	NA
Patient advice leaflet given/information explained and given	Yes	No	NA
Passport/card given	Yes	No	NA
Confirmed latex allergy (if yes, use all silicone catheter)	Yes	No	NA

Insertion

Date and time of insertion:
Print name and role of person responsible for catheter insertion decision:
Signature:

Aseptic non touch technique used including hand hygiene	Yes	No	
Urethral meatus/genitals cleaned with normal saline pre procedure	Yes	No	
Foreskin replaced	Yes	No	NA

Type of catheter:
Reference number:
Size:

ADD STICKER

Always use the smallest size of catheter that will be effective. In females insert the catheter 2.5cm beyond the point of urine flow before inflating the balloon, to help prevent urethral trauma.

Sterile anaesthetic lubrication used	mL
Residual amount	mL
Balloon type/mL in balloon	
Catheter securing device used	
Drainage bag used	yes ☐ no ☐ type:
Date of use and expiry on catheter bag	
Expected duration/date of removal	
If patient has a catheter assessed as long term or retention unknown cause then referral to other health professionals considered: yes ☐ no ☐ NA ☐	

Don't inflate balloon pre insertion or until urine drains.

Revised and reprinted January 2021
Review January 2024 Ref: SC/UROL/0230121
NSI415

Male/Female Catheterisation Procedure Safety Checklist

Team Brief & Start completed Yes ☐ No ☐

SIGN IN & TIME OUT – Before start of intervention

Has patient identification been confirmed? Yes ☐ No ☐

Has consent been confirmed? Yes ☐ No ☐

Has the procedure been confirmed? Yes ☐ No ☐

Procedure recorded as:

Has patient allergies been checked? Yes ☐ No ☐

Please record allergies:

Has medication been checked? Yes ☐ No ☐

Please record any anti-coagulants:

Is all equipment available? Yes ☐ No ☐

SIGN OUT – Before the clinician leaves the Procedure Room /Area

Has the procedure been recorded? Yes ☐ No ☐

Has the documentation been completed? Yes ☐ No ☐

Have all instruments, swabs and sharps counts been completed? N/A ☐ Yes ☐ No ☐

Have any equipment problems been identified that need to be addressed? Yes ☐ No ☐

Please record any equipment concerns:

Have you checked that the catheter is correctly placed? Yes ☐ No ☐

Were there any concerns with post-procedural care? Yes ☐ No ☐

Please record details of concerns with post-procedural care:

Please insert patient Addressograph here

Date:

Signature:

Print name:

Designation:

Care plan

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ADD STICKER

Catheters in for more than 48 hours double the chance of CAUTI.

The risk of CAUTI increases 3-7% for each day the IDC remains in place.

Suspect a CAUTI? Don't dipstick the urine in a patient with an indwelling urinary catheter. Send a sample using the needle free sampling port using ANTT. Do not use bladder washouts routinely.

Circle your answer

Day and date	Continued indication	Meatal cleansing (genital area)	Hand hygiene and clean gloves used	Emptied into a clean container	Catheter secure, bag below the bladder, tube not kinked	Connection not broken – closed sterile circuit or valve use	Hydration encouraged	Constipation managed
1	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
2	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
3	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
4	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
5	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
6	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
7	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
8	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
9	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								
10	H O U D I N I (O)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Notes								

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AT JD STICKER

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