#52 - PROVIDING CATHETER CARE

(Partner Check-Off)

| | Student:Date: | | | | |
|-----|---|----|------------------------|------------------|----------|
| | | P1 | P2 | P3 | Comments |
| 1. | Performed hand hygiene. | | | | |
| 2. | Provided for patient privacy. | | - L | | J |
| 3. | Introduced self to patient and family. | | - | | |
| 4. | Identified patient using two identifiers, compared identifiers with information on ID bracelet. | | | | ; |
| 5. | Organized equipment needed for perineal care. | | | I I I I | J |
| 6. | Raised bed to appropriate working height, facing the patient, stood on the left side of bed if right handed and on right side if left handed; if side rails in use, lowered side rail on working side of bed and raised side rail on opposite side. | | | | |
| 7. | Applied gloves, positioned waterproof pad under patient's buttocks, covered the patient's upper torso with a blanket and lower extremities with a bed sheet, exposing only the perineal area. | | | | |
| 8. | Removed catheter from securing device, maintained connection with drainage tubing. | | | | |
| 9. | Examined skin around securing device for irritation. | | | | J |
| 10. | For female: used nondominant hand to separate labia when providing female catheter care. | | | | / |
| 11. | For male: used nondominant hand to retract foreskin when necessary, held shaft below glans. | | | | |
| 12. | Assessed urethral meatus and surrounding tissue for inflammation, swelling, discharge, or tissue trauma, asked if patient experienced burning or discomfort. | | | | |
| 13. | Grasped catheter with two fingers of nondominant hand to stabilize it. | | | I I I I | J |
| 14. | Provided perineal hygiene using soap and water, repeated procedure when necessary. | | | | J |
| 15. | Used clean washcloth, cleansed catheter: | | | ļ | · |

I acknowledge I have physically practiced and successfully learned the following skill(s):

| | | | | | I I | I . | l I | l I | |
|------|---|--|------------------------|--------------------------|---------------|------------------|----------------|-------------------------------|--|
| | a. b. | Cleansed tubing with circ avoided pulling catheter t Reapplied catheter to see | ubing. | • | | | | | |
| 16. | | ed catheter and tubing were | | | | | ! ! ! | | |
| 17. | 7. Checked to ensure drainage bag was positioned properly and urine was flowing freely, emptied drainage bag when it was half-full. | | | | | | | | |
| 18. | | ed of all contaminated sup ned hand hygiene. | olies appropriately, r | emoved gloves, | | | | ; | |
| 19. | Helped | I patient to comfortable pos | ition, placed person | al items within reach. | | | L | | |
| 20. | Placed | call light within reach, ens | ured patient knew ho | ow to use it. | · | | ¦ | | |
| 21. | Raised | side rails and lowered bed | I to ensure patient's | safety. | | | | ! ; | |
| 22. | | ded time at which care was 's urine, described condition | | | | | | ! | |
| s = | Satisfa | ctory U = Unsatisfactory | NP = Not Performe | ed *=Must Perform to Pa | ass | L | L | · | |
| Ву . | signing | below I acknowledge that I | witnessed the skill p | performed and the studer | nt successful | lly passe | ed the sk | ill. | |
| Pra | ctice 1: | Evaluator: | | Signature: | | | | | |
| Pra | ctice 2: | Evaluator: | | Signature: | | | | | |
| FIN | AL Stuc | lent Evaluator: | | Signature: | | | | | |