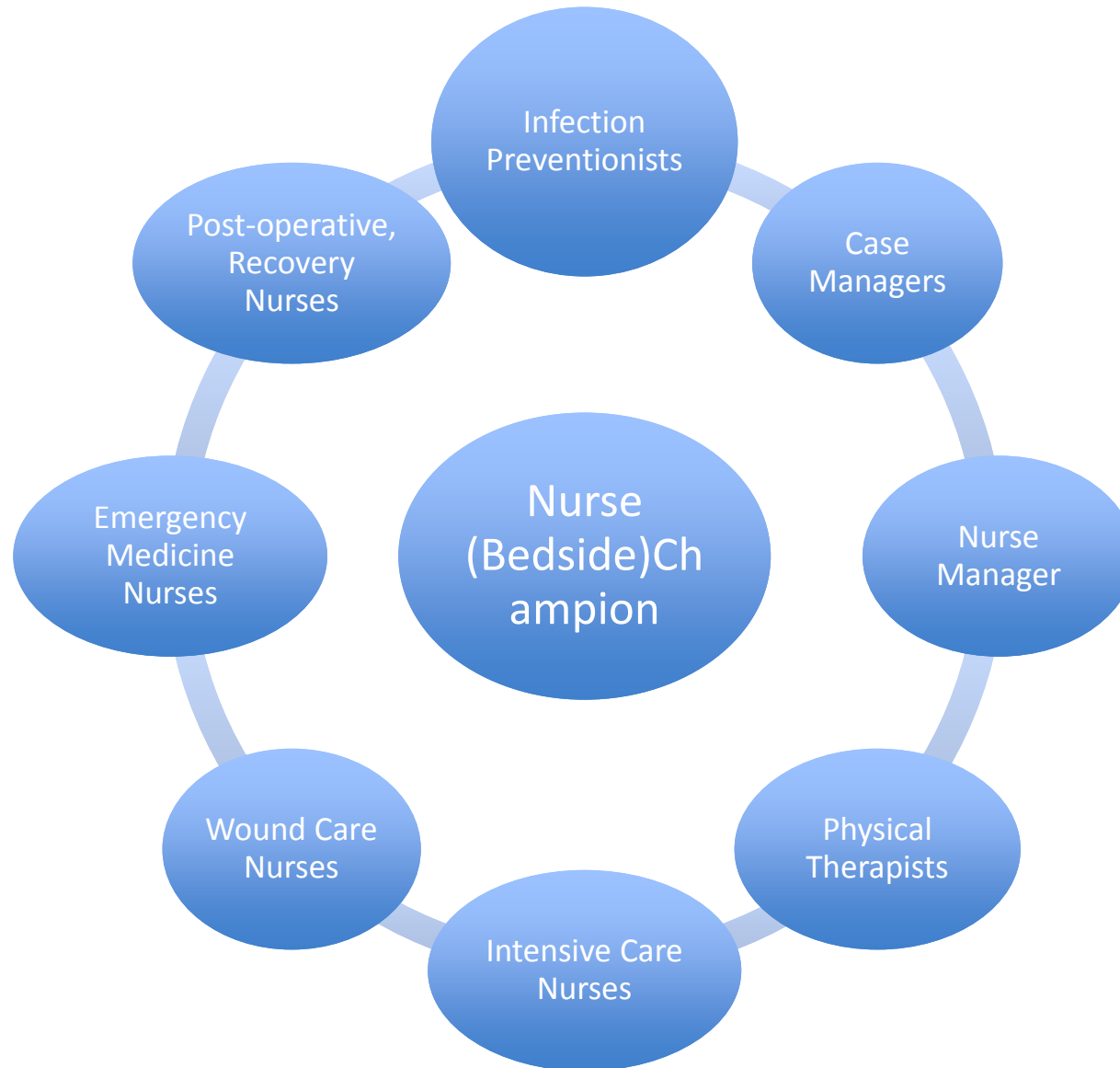


The Bedside Nurse...and Supporters



Nurse Supporters: Reasons for Them to Support the Champion

Infection preventionists	Case managers
<ul style="list-style-type: none">• Reduce CAUTI.• Reduce antibiotic use.• Reduce potential of increased resistance and <i>Clostridium difficile</i> disease.	<ul style="list-style-type: none">• Less complications (mechanical or infectious)= lower cost• Early removal of catheter may reduce length of stay
Nurse manager	Physical therapists
<ul style="list-style-type: none">• Leader and supporter to the bedside nurse (empowers the nurse)• Makes the appropriate urinary catheter use a priority and a safety issue• Addresses any barriers encountered by the bedside nurse	<ul style="list-style-type: none">• The urinary catheter reduces mobility in patients: one point restraint.• Rapid recovery (improvement in ambulation) may be hampered by the catheter (in addition to the other associated risks).

Nurse Supporters: Reasons for Them to Support the Champion

Intensive care unit (ICU) nurses	Wound care nurses
<ul style="list-style-type: none">• A significant opportunity is present upon transfer from the ICU to discontinue no longer needed urinary catheters.• ICU nurse transferring the patient may evaluate catheter need before transfer out of the unit and discontinue unnecessary catheters.	<ul style="list-style-type: none">• Urinary catheter use increases immobility, which in turn results in an increased risk of pressure ulcers.• Wound care nurses may help in advising the bedside nurse on methods to reduce skin breakdown in patients with incontinence without using urinary catheters
Emergency medicine (ED) nurse	Post-operative recovery nurses
<ul style="list-style-type: none">• Up to half of the patients are admitted through the emergency department (ED).• Inappropriate urinary catheter placement is common in the ED.• Promoting appropriate placement of urinary catheters in the ED will reduce inappropriate use hospital-wide.	<ul style="list-style-type: none">• Urinary catheters are commonly placed preoperatively for fluid management during the surgery.• Post-operative recovery nurses evaluate the catheter for continued need and promptly remove no longer catheters.