

Decreasing CAUTI's in the ED

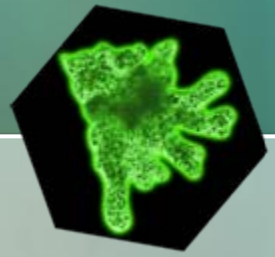
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Alegent Creighton Health

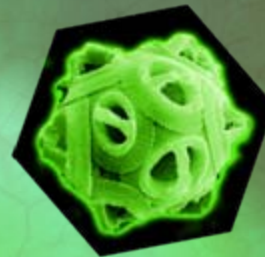
Oct. 7, 2012

Disclosures



The presenter does not have any relevant commercial relationships or conflict of interests to disclose

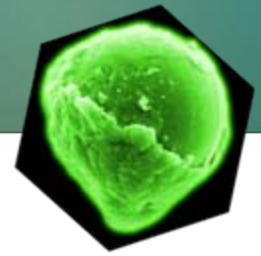
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Geography

- Omaha, Nebraska – Population 400,000
- Level 1 Trauma Center
- 35,000 visits annually
- Academic Medical Center

CAUTI's in the ED



- The Emergency Department was assigned as the cause of a CAUTI in a patient on 1/2/2010.
- Frustration was created, it was just the 2nd day of the year and already getting an infection.
- The ED staff researched and came up with several interventions and embraced the plan to change.

Interventions

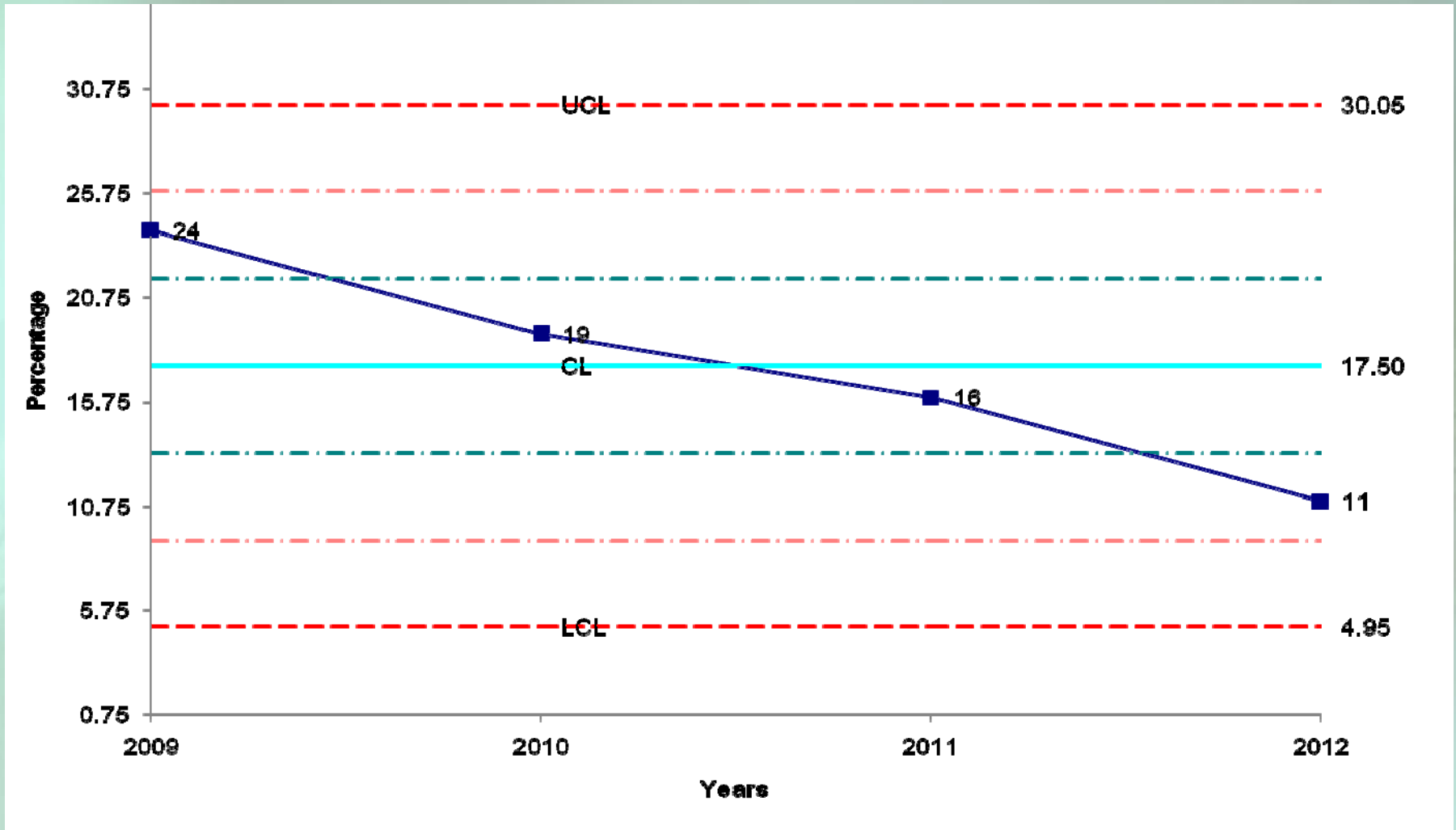
- They researched different processes and products
- Implemented the use of the female urinal
- 2 person technique, never insert a foley alone in case of issues
- Implemented the use of Therawash Silver prior to every catheter placement
- Document date, time, and who inserted on the foley and in the documentation



Interventions continued

- A urine culture was obtained at the time of catheter insertion
- Continuing education and training
- Trainees are not allowed to place foleys until trained and they have observed
- Decrease insertion of foley if no indications

% ED Admitted Patients with Foleys Inserted



Results of our Interventions

- **2009**

7 CAUTI's in the Emergency Department

- **2010**

1 CAUTI in the Emergency Department

- **2011**

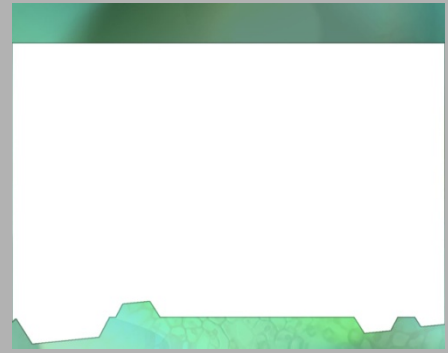
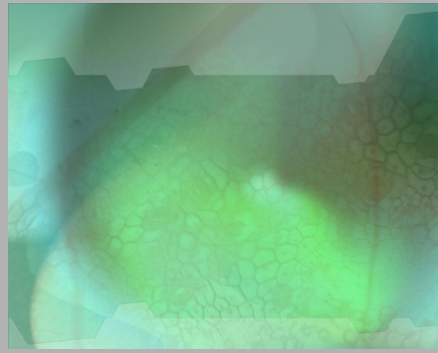
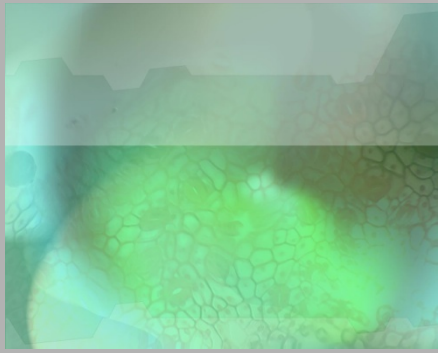
0 CAUTI's in the Emergency Department

- **2012**

0 CAUTI's in the Emergency Department

Barriers and Challenges

- Continuing the education
- Keeping the topic in the minds of the staff
- Finding new ways to celebrate to continue the excitement



Questions

