


Evaluation of Inability to Void:	
Poor Pump (Detrusor Muscle)	vs. Blocked Outlet (Sphincters or Compression)
Action Step	Possible Medical Reasons
Review Meds	α -cholinergics, narcotics, Ca-Ch Blockers, α -agonists
Review Med Hx	Diabetes with neuropathy, sacral / subsacral cord, B12 deficiency, GU surgery or radiation, BPH, MS, constipation / impaction
Physical Exam	Prostate exam, women-pelvic for prolapsed bladder, rectocele, cystocele; GU for obstructive lesion, all-sacral roots S2-4—anal wink & bulbocavernosus reflexes, rectum for impaction
Postvoiding Residual	Perform in evaluation of patient's inability to void, and repeated after catheter removal with voiding trial. (Can use hand-held bladder scanner to measure rather than catheter.)
Catheter Troubleshooting:	
Trouble placing: <ol style="list-style-type: none"> 1. Use lidocaine gel to decrease spasm at sphincter 2. Insert with slight torque while patient exhales 3. Try larger lumen 3. Coude (stiffer) 	
Leakage around catheter: <ol style="list-style-type: none"> 1. Flush catheter 2. Check for infection 3. Decrease balloon inflation 4. Decrease lumen size 	



Foley Catheter Use


UT Southwestern Medical Center
• Adapted from: CHAMP: Foley Catheters/Voiding, Catherine DuBeau, MD, Geriatrics, University of Chicago

Only 4 Indications for Foley Use:

1. Retention / inability to void (see reverse)
2. Urinary Incontinence AND
 - Open stage 4 sacral or perineal wound
 - Palliative care
3. Urine output monitoring AND
 - ICU - frequent / urgent monitoring needed
 - Patient unable to collect urine
4. After general or spinal anesthesia

Why minimize catheter use?

- a. Infection risk:**
 - 5% risk of infection per day of use
 - Causes 40% of nosocomial infections
 - More people die from hospital-acquired infections than from auto accidents and homicides combined
- b. Morbidity**
 - Internal Catheters
 - Associated with delirium/falls
 - Urethral & meatal injury
 - Fever
 - Polymicrobial bacteruria
 - External (condom/Texas) Catheters
 - Penile cellulitis / necrosis
 - Urinary retention
 - Bacteruria & infection
- c. Foleys are uncomfortable / painful**
- d. Limits mobility (tether)**
- e. Cost (immediate and cost associated with above complications)**



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