# General Urologicals Utilization Study Checklist

## Cost Considerations

- **Standardize to one manufacturer**
  - Purchasing from 5 manufactures

- **Standardize trays**
  - Purchasing 16 different trays with & without catheters

## Utilization Considerations

- **Implement written guidelines/policies for insertion/discontinuation of Foley catheters**

- **Limit insertion of Foley catheters for select patients/procedures**
  - Remind clinical staff of appropriate indications
  - Require doctor’s order for catheter insertion
  - Require end date/daily documentation of catheter need and maintenance

- **Limit urine meter for hourly urine monitoring only (critically ill, renal failure)**

- **Stock urine meter kits in critical care areas, not general med/surg floors**
  - 43% of foley tray spend is in trays with urimeters

- **Limit antimicrobial/antibacterial/silver alloy catheters to patients with highest risk of infection only (long-term catheterization)**
  - 68% of spend is on treated catheters

- **Always use closed catheter system**

- **Encourage use of external catheters or intermittent catheters for appropriate patients; assess urinary retention with bladder ultrasound or scanner prior to intermittent**
  - Only 1% of total spend

- **Limit coude tip catheters for difficult insertions**
  - 3% of catheters are coude tip

- **Limit temperature-sensing catheters to patients that need continuous temperature monitoring**
  - 6% of spend is on temperature monitoring products