

## 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