

23rd World Nursing and Healthcare Conference

July 10-12, 2017 Berlin, Germany

The use of inpatient care bundle to lower catheter-associated urinary tract infection in an academic medical center

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Urinary tract infections are the most common infection sites in many hospital care-related infections, accounting for about 30-40% of all medical care-related infections, of which about 90% are associated with long-term indwelling catheters. Therefore, we conducted pre and post-test quasi experimental study and a longitudinal study at the medical center in the South of Taiwan. The design of care bundle is to reduce the number of days of urinary catheter retention and urinary catheter associated with urinary tract infection and improves the quality of medical care, including the checklists of catheter placement and prevention of daily care for urinary tract infection. The intervention started from November 2015 till December 2016 and we audited the practice of intervention monthly in each unit at least in two patients. We compared the infective rate of catheter-associated urinary tract infection before and after the intervention. The rates with daily catheter population density for the catheter-associated urinary tract infection infectious was 5.1‰ before the implementation of combined intervention measures, and the infection rate decreased to 3.7‰ ($P < 0.00$) after intervention. Care bundle has significantly improved the infection rate; therefore, it is important to educate healthcare professionals the concept of catheter-associated urinary tract infection and to audit the clinical practice of catheter placement and daily care which can result in the improvement of patient safety and quality care.

Biography

Shu-Hui Lin has completed her Master's degree from School of Nursing, Fooyin University and has worked in the Department of Infection Control, Kaohsiung Medical University Hospital, Kaohsiung Medical University. She has published three articles in domestic journals and one paper in international journals. Currently, she also delivers lectures in the Nursing School.

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