Background

- 73% of catheterized inpatients were elderly, of which up to 43.9-54% were improperly used.
- The improper use of indwelling catheters increased the length of hospital stay and the mortality rate.
- Carefully monitor the use of urinary catheter is important to prevent the iatrogenic damage caused by the inappropriate use of urinary catheter.
- No clinical protocol related the urinary catheter bundle care specifically for the elderly patients.

Methods

- In round 1, the experts were asked to rate the importance and agreement level of each draft item and provide additional suggestions for revisions or new items.
- The items without consensus and the suggestions for altered or new items were taken to round 2 together to get final consensus.

Aim

To establish clinical consensus for the protocol of urinary catheter bundle care in hospitalized elderly patient by using the modified Delphi method.

Result

Total 29 items met consensus.

- **Round 1**
  - Item: "If there is no need to assess the residual urine by the bladder scanner or intermittent straight catheters by the opinion of physicians that will be considered as successful removal."

- **Revised Item**
  - "After removal of indwelling catheter, bladder scanner or intermittent straight catheters, urine output ≤ 100cc and the amount of voluntarily void and residual urine > 2:1 will be considered as successful removal."

- **Round 2**

The final consensus of the draft protocol by experts in was 93%

Conclusion

This consensus protocol will help to standardize the urinary catheter bundle care in hospitalized elderly patient, and assist in clinical decision-making for all healthcare professionals.

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