



QUICKCHANGE WRAP TO PREVENT HAPI FROM USE OF FOLEY CATHETER & INCONTINENCE

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Background

Patients with incontinence have an increased risk of perineal dermatitis or incontinence associated dermatitis (IAD), pressure injury (PI), hip fracture and falls if no containment measures or strategies are employed.

Indwelling Foley Catheter (FC) are designed and utilized in an effort to contain urine and to reduce the patient's comorbid conditions. However, continued FC use has been proven to cause urethral erosion, creating injury in the form of a mucosal pressure injury (MPri). Condom catheters are external collection devices utilized in the inpatient setting to contain urine when an indwelling catheter is not appropriate. Condom catheter use also has documented cases of skin irritation and MPri development. Although skin irritation and MPri rarely occur in the use of these urine containment products, their use increases the risk of bleeding at the edges of the urethra and development of a urinary tract infection. Depending on the severity of injury, surgical intervention and reconstruction may be required. In addition, penile erosion in male patients can cause psychological pain due to disfigurement.

Nurses from Wound Ostomy Service Team and Wound Ostomy Resource Team gathered together to address the following issues:

- Male patients developing MPri with the use of Foley catheter
- Male patients developing HAPI due to urinary incontinence

Significance: January to early May the Hospital Acquired Pressure Injury (HAPI) occurrences demonstrated 3 MPri to the penis due to FC use & 9 HAPI due to incontinence. Urinary incontinence is one indication for FC use. The hospital's IAD incidence rate in 2017 was 36-38% with HAPI rate of 9 to 12% in the same year.

METHOD

- 3 units from the hospital volunteered to trial a different absorbent external collection device (QuickChange Wrap)
- Nurses in the volunteer units were given the freedom to use the QuickChange Wrap for male incontinent patients or current practice. Nurses who used the QuickChange Wrap completed a survey form.
- 39 patients were observed during the trial period

PICO

Problem: MPri, IAD, and Catheter Associated Urinary Tract Infection (CAUTI) occurrence in male patients with urinary incontinence

Intervention: Use of QuickChange Wrap as an alternative for Foley catheter, condom catheter, or adult brief use

Comparison: Current male incontinence care

Outcome: Reduce incidence of HAPI from IAD, decrease MPri and CAUTI from FC use; Decrease nursing time in changing the patient's brief

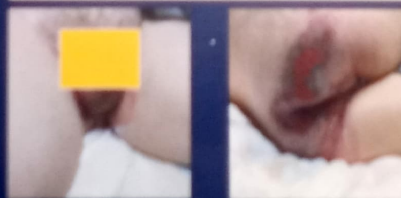
INCLUSION CRITERIA FOR TRIAL

- Male incontinent patients
- Male patient who does not qualify for FC but needs urinary containment device
- Male patients who need adult briefs for urinary containment

EXCLUSION CRITERIA FOR TRIAL

- Patients who are continent
- Patients who have a projectile urinary stream

NURSES EVALUATION OF QUICKCHANGE WRAP



USAGE & COST COMPARISON

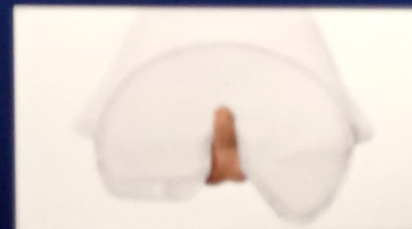
	Female	Male	\$10,000 US
Condom Catheter	1000	1000	\$1,000.00
QuickChange Wrap	800	800	\$1,000.00

CAUTI INCIDENCE



RESULT

Observation	Frequency
Number of patients during trial that used QuickChange Wraps	39
Number of patients who developed HAPI when in QuickChange Wraps	0
Number of patients during trial that did not use QuickChange Wraps	0
Number of patients who developed HAPI and did not use QuickChange Wraps	0



Discussion

- Out of the 39 patients observed, 30 of the patients had QuickChange Wraps utilized by their nurses while 9 opted to use adult briefs alone.
- 0% of the patients with QuickChange Wraps developed any HAPI or IAD
- 100% of the patients without the QuickChange Wrap developed HAPI from incontinence
- Nurses that used the QuickChange Wraps for their patients strongly agreed that it assisted in managing their patient's urinary incontinence and help preserve their patient's skin integrity
- Nurses reported that nursing time utilized to change a QuickChange Wrap is less than using adult brief or managing a Foley catheter

Conclusions

- Incidence of HAPI from IAD during trial decreased on units that volunteered to be part of the trial
- Use of Foley catheter did not reduce during trial
- Incidence of CAUTI was low during trial
- Nurses felt that time needed in changing a patient's QuickChange Wrap is less than when patient is using a brief
- QuickChange Wraps are another resource that nurses can utilize for their male incontinent patient to preserve patient's skin and are a viable alternative to the use of condom catheter and adult brief

References

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