



Healthcare-Associated Infections (HAIs)

Frequently Asked Questions about Catheter-associated Urinary Tract Infections

What is a urinary catheter?

An indwelling urinary catheter is a drainage tube that is inserted into the urinary bladder through the urethra, is left in place, and is connected to a closed collection system. Alternative methods of urinary drainage may be employed in some patients. Intermittent (“in-and-out”) catheterization involves brief insertion of a catheter into the bladder through the urethra to drain urine at intervals. An external catheter is a urine containment device that fits over or adheres to the genitalia and is attached to a urinary drainage bag. The most commonly used external catheter is a soft flexible sheath that fits over the penis (“condom” catheter). A suprapubic catheter is surgically inserted into the bladder through an incision above the pubis.

What is a urinary tract infection?

A urinary tract infection (UTI) is an infection that involves any of the organs or structures of the urinary tract, including the kidneys, ureters, bladder, and urethra. Some of the common symptoms of a urinary tract infection are burning or pain in the lower abdomen (that is, below the stomach), fever, burning during urination, or an increase in the frequency of urination. UTIs are the most common type of healthcare-associated infection (HAI) and are most often caused by the placement or presence of a catheter in the urinary tract.

What is a catheter-associated urinary tract infection (CAUTI)?

A catheter-associated urinary tract infection (CAUTI) occurs when germs (usually bacteria) enter the urinary tract through the urinary catheter and cause infection. CAUTIs have been associated with increased morbidity, mortality, healthcare costs, and length of stay. The risk of CAUTI can be reduced by ensuring that catheters are used only when needed and removed as soon as possible; that catheters are placed using proper aseptic technique; and that the closed sterile drainage system is maintained.

Can CAUTIs be treated?

Yes, most CAUTIs can be treated with antibiotics and/or removal or change of the catheter. The healthcare provider will determine the best treatment for each patient.

What are some of the things that hospitals are doing to prevent CAUTIs?

Hospitals should follow the recommendations in the [2009 CDC Guideline for Prevention of Catheter-associated Urinary Tract Infections](#). The guideline emphasizes the proper use, insertion, and maintenance of urinary catheters in different healthcare settings. It also presents effective quality improvement programs that healthcare facilities can use to prevent CAUTIs.





What can patients do to help prevent CAUTI?

Patients with a urinary catheter can take the following precautions to prevent CAUTI:

- Understand why the catheter is needed and ask the healthcare provider frequently if the catheter is still needed.
- If the patient has a long-term catheter, they must clean their hands before and after touching the catheter.
- Check the position of the urine bag; it should always be below the level of the bladder.
- Do not tug or pull on the tubing.
- Do not twist or kink the catheter tubing.

Resources for healthcare professionals:

The following online resources provide more information about CAUTI:

- [Guideline for Prevention of Catheter-associated Urinary Tract Infections, 2009](#)
- [IDSA Guidelines](#) 
- [NHSN – National Healthcare Safety Network](#)
- [Strategies to Prevent Catheter-Associated Urinary Tract Infections in Acute Care Hospitals: 2014 Update](#) 
- [Institute for Healthcare Improvement Prevent CAUTI How-to guide](#) 
- [APIC Guide to the Elimination of CAUTI](#)  [PDF – 42 pages] 