



Know How. Perineal and Catheter Care. Documents and forms provided here are available through the online Continence Management Program. Enrolled members, please log on to print forms, access tools and view additional educational courses and materials.





ALWAYS CONTINENT

Clinical Decision Tree for Perineal Skin Care

OCCASIONALLY INCONTINENT

MDS 3.0 Section H0300 & H0400—Continence (for the required lookback period)

FREQUENTLY INCONTINENT

ALWAYS INCONTINENT NOT RATED
Resident had

Considerations		erations	CONTINUENT	Less than 7 episodes of incontinence or 1 episode of bowel incontinence	7 or more episodes of urinary incontinence or 2 or more episodes of bowel incontinence, but at least 1 episode of continent voiding or bowel movement	No episodes of continent voiding or continent bowel movements	a catheter (indwelling, condom), urinary ostomy, or no urine output or bowel movement for the entire 7 days			
		M0150-ls	this resident at ris	k of developing press	ure ulcers? No = 0					
	Intact Skin	Cleansing	Wipes, any Soothe	& Cool or Remedy Clean	ser					
		Moisturize/ Protect	Soothe & Cool Moisturizer	Soothe & Cool or Reme	Soothe & Cool or Remedy Preventative Barriers N/A					
	ıtact	M0150-ls	M0150—Is this resident at risk of developing pressure ulcers? Yes = 1							
	=	Cleansing	Wipes, any Soothe & Cool or Remedy Cleanser							
		Moisturize/ Protect	Remedy Moisturizer	Soothe & Cool or Reme	othe & Cool or Remedy Preventative Barriers N/A					
M0150—Is this resident at risk of developing pressure			re ulcers? No = 0							
;	Reddened, Chapped Skin	Cleansing	Wipes, any Soothe	& Cool or Remedy Cleanser						
		Moisturize/ Protect	Soothe & Cool Moisturizer	Remedy Dimethicone Barriers or Soothe & Cool INZO	Soothe & Cool INZO or Rer Nutrashield or Hydraguar		N/A			
-	g, C	M0150-ls	this resident at ris	k of developing press	ure ulcers? Yes = 1					
:	Sedden	Cleansing	Wipes, any Soothe	& Cool or Remedy Clean	ser					
•		Moisturize/ Protect	Remedy Moisturizers	Remedy Dimethicone Barriers or Soothe & Cool INZO	Soothe & Cool INZO or Rer Nutrashield or Hydraguar		N/A			

Chart Continued on next page...

Considerations		O ALWAYS CONTINENT	1 OCCASIONALLY INCONTINENT Less than 7 episodes of incontinence or 1 episode of bowel incontinence	FREQUENTLY INCONTINENT 7 or more episodes of urinary incontinence or 2 or more episodes of bowel incontinence, but at least 1 episode of continent voiding or bowel movement	ALWAYS INCONTINENT No episodes of continent voiding or continent bowel movements	A NOT RATED Resident had a catheter (indwelling, condom), urinary ostomy or no urine output or bowel movement for the entire 7 days			
y, Ready-	Cleansing	Cleansing Remedy Cleansers							
Dry, Ready	Moisturize/ Protect	Remedy Moisturizer	Remedy Moisturizer						
	M0150-ls	O—Is this resident at risk of developing pressure ulcers? No = 0							
	Cleansing	Remedy Cleansers							
Macerated Skin	Moisturize/ Protect	Soothe & Cool or Remedy Protectant with Zinc Oxide							
erat	M0150—Is	this resident at risk of developing pressure ulcers? Yes = 1							
Mac	Cleansing	Remedy Cleansers							
	Moisturize/ Protect	Remedy Protectant with Zinc Oxide							
Denuded Skin	Cleansing	Remedy Cleaners							
Denud	Moisturize/ Protect	Remedy Nutrashie	Remedy Nutrashield						
Fungal	Cleansing	Remedy Antimicro	bial Cleanser						
Fun	Moisturize/ Protect	Soothe & Cool Crea	m or Remedy Antifung	al Powder or Cream					

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Clinical Decision Tree for Bathing

MDS 3.0 Section G0120—Bathing Self-Performance

Considerations		INDEPENDENT No help provided	SUPERVISION Oversight help only	PHYSICAL HELP Limited to transfer only	PHYSICAL HELP In part of bathing activity	TOTAL DEPENDENCE
	M0150-ls	this resident at ris	sk of developing pre	essure ulcers? No = 0		
	Cleansing	Soothe & Cool or R	emedy Cleansers			No Rinse Soothe Cool and Remedy Cleansers
t Skin	Moisturize/ Protect	Soothe & Cool or R	emedy Moisturizers			
Intact	M0150-ls	this resident at ris	sk of developing pre	ssure ulcers? Yes = 1		
=	Cleansing	Remedy Cleansers				No Rinse Remedy Cleansers
	Moisturize/ Protect	Remedy Moisturize	ers			

M0150—Is this resident at risk of developing pressure ulcers? **No = 0** No Rinse Soothe & Dry, Ready-to-Tear Skin Cleansing Remedy Cleansers Cool and Remedy Cleansers Soothe & Cool or Remedy Moisturizers

M0150—Is this resident at risk of developing pressure ulcers? Yes = 1 No Rinse Remedy Cleansing Remedy Cleansers Cleansers Moisturize/ Remedy Moisturizers

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Catheter Care Guidelines

Tas	Task		Demonstrated Date/Initials	Comments
1	Assemble supplies.			
2	Greet resident (address by name and introduce yourself).			
3	Provide explanations to resident before beginning and throughout procedure.			
4	Apply gloves before beginning catheter care.			
5	Place incontinence pad under buttocks before beginning procedure.			
6	Apply no-rinse cleansing spray or foam (or use an all-inclusive cleansing wipe).			
7	Use washcloth to clean around the catheter at the insertion site.			
8	Use new wipe for each washing stroke, wiping from front to back.			
9	Cleanse catheter, washing away from body and down the catheter about 3 inches.			
10	Dry entire perineal area from front to back after completing cleansing of each area.			
11	Anchor the catheter comfortably.			
12	Leave tubing coiled on bed without kinks, obstructions, or loops of tubing hanging over the side of bed.			
13	Remove incontinence pad at the completion of procedure.			
14	Clean and store equipment at completion of procedure and leave work area tidy.			
15	Utilize standard (universal) precautions throughout procedure, including hand washing at the beginning and end of task.			
16	Promote resident comfort throughout procedure.			
17	Promote resident rights throughout procedure.			
18	Promote resident safety throughout procedure.			

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Clinical Education

Catheter Care—Skill Review Validation Form

Emi	oloyee's Name:		Date:	
	,			
Tas	sk	Reviewed Date/Initials	Demonstrated Date/Initials	Comments
1	Assemble supplies.			
2	Greet resident, address by name and introduce self.			
3	Provide explanations to resident before beginning and throughout procedure.			
4	Apply gloves before beginning catheter care.			
5	Place incontinence pad under buttocks before beginning procedure.			
6	Apply no-rinse cleansing spray or foam (or use an all-inclusive cleansing wipe).			
7	Use washcloth to clean around the catheter at the insertion site.			
8	Use new wipe for each washing stroke, wiping from front to back.			
9	Cleanse catheter, washing away from body and down the catheter about 3 inches.			
10	Dry entire perineal area from front to back after completing cleansing of each area.			
11	Anchor the catheter comfortably.			
12	Leave tubing coiled on bed without kinks, obstructions or loops of tubing hanging over the side of bed.			
13	Remove incontinence pad at the completion of procedure.			
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18 Promote resident safety throughout procedure.



Clinical Education

Perineal Care, Female—Skill Review Validation Form

Е	Employee's Name:		Date:		
	Task	Reviewed Date/Initials	Demonstrated Date/Initials	Comments	
	1 Assemble supplies.				
	2 Greet resident, address by name and introduce self.				

2	Greet resident, address by name and introduce self.		
3	Provide explanations to resident before beginning and throughout procedure.		
4	Apply gloves before beginning perineal care.		
5	Replace soiled pad under resident's buttocks before beginning perineal care.		
6	Apply no-rinse cleansing spray or foam (or use an all-inclusive cleansing wipe).		
7	Pass over urinary meatus with first stroke of wash cloth or cleansing wipe.		
8	Use new wipe for each washing stroke.		
9	Wipe from front to back with all washing and strokes.		
10	Cleanse all skin folds of perineal area, front and back.		
11	Dry entire perineal area from front to back after completing cleansing of each area.		
12	Position resident on side for cleansing of buttocks and rectal area.		
13	Cleanse and dry rectal and buttocks area.		
14	Leave resident on dry underpad or adult containment device at completion of procedure.		
15	Clean and store equipment at completion of procedure and leave work area tidy.		
16	Utilize standard (universal) precautions throughout procedure, including hand washing at the beginning and end of task.		
17	Promote resident comfort throughout procedure.		
18	Promote resident rights throughout procedure.		

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19 Promote resident safety throughout procedure.



Using Aseptic Technique for Urinary Catheter Insertion Guidelines

Procedure for Insertion of Indwelling Catheter

- 1. Wash hands.
- **2.** Explain procedure to resident.
- **3.** Place female patient in the supine position and drape appropriately with knees bent, hips flexed and feet resting about 2 feet apart. Place male patient in the supine position with legs extended and thighs slightly apart.
- 4. Put on gloves and cleanse the genital area and perineum with appropriate cleanser; rinse and dry.
- 5. Discard gloves. Wash hands.
- 6. Open catheter tray using aseptic technique. Prepare sterile field.
- 7. Place moisture-proof pad under patient's buttocks, plastic side down.
- 8. Put on sterile gloves.
- **9.** Position fenestrated drape over the perineal area.
- **10.** Open swabstick package and set aside on sterile field. Lubricate the distal tip of the catheter. Attach the sterile water syringe to the balloon port; inflate balloon to assure patency. For balloon deflation, simply remove plunger pressure; do not draw back plunger.

11. Female Patients:

- a. Separate labia using nondominant hand. Maintain hand position until catheter is inserted and balloon is ready to be inflated.
- b. Using dominant hand, cleanse skin with swabsticks working anterior to posterior, using one swab for each side of the labia, one for the urethral meatus. Dispose of swab away from sterile field after single stroke.
- c. Introduce well-lubricated catheter into urethral meatus using aseptic technique. Ask patient to bear down to help relax sphincter. Continue to advance catheter until urine begins to flow. If catheter is inadvertently inserted into the vagina, leave it there as a landmark, then begin the procedure again using new supplies.

12. Male Patients:

- a. Hold the penis with nondominant hand. Maintain hand position until catheter is inserted and balloon is ready to be inflated.
- b. Using dominant hand, clean the glans, starting at the urinary meatus and working outward in a circular motion. Repeat with new swab. Dispose of swab away from sterile field after single stroke.
- c. Position the penis perpendicular to patient's body and apply light, upward traction with nondominant hand. Introduce well-lubricated catheter into urethral meatus using aseptic technique. Ask patient to bear down to help relax sphincter. Continue to advance catheter until urine begins to flow.
- **13.** Once urine flow is established, insert catheter another 1 to 2 inches to assure that the balloon is out of the urethra and in the bladder. Inflate balloon and remove syringe.



Never force a catheter during insertion.

If there is continued resistance, discontinue the procedure and notify the physician.



Continued on next page...

- **14.** Gently pull catheter until inflation balloon is snug against bladder neck.
- **15.** Secure catheter to patient.
- **16.** Position drainage bag below the level of the bladder, making sure the tubing is not kinked and the bag does not have contact with the floor.
- **17.** Remove gloves, dispose of equipment appropriately and wash hands.
- **18.** Document the date, time, size of catheter inserted, amount of water in balloon, patient's response to procedure and assessment of urine.

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Clinical Education

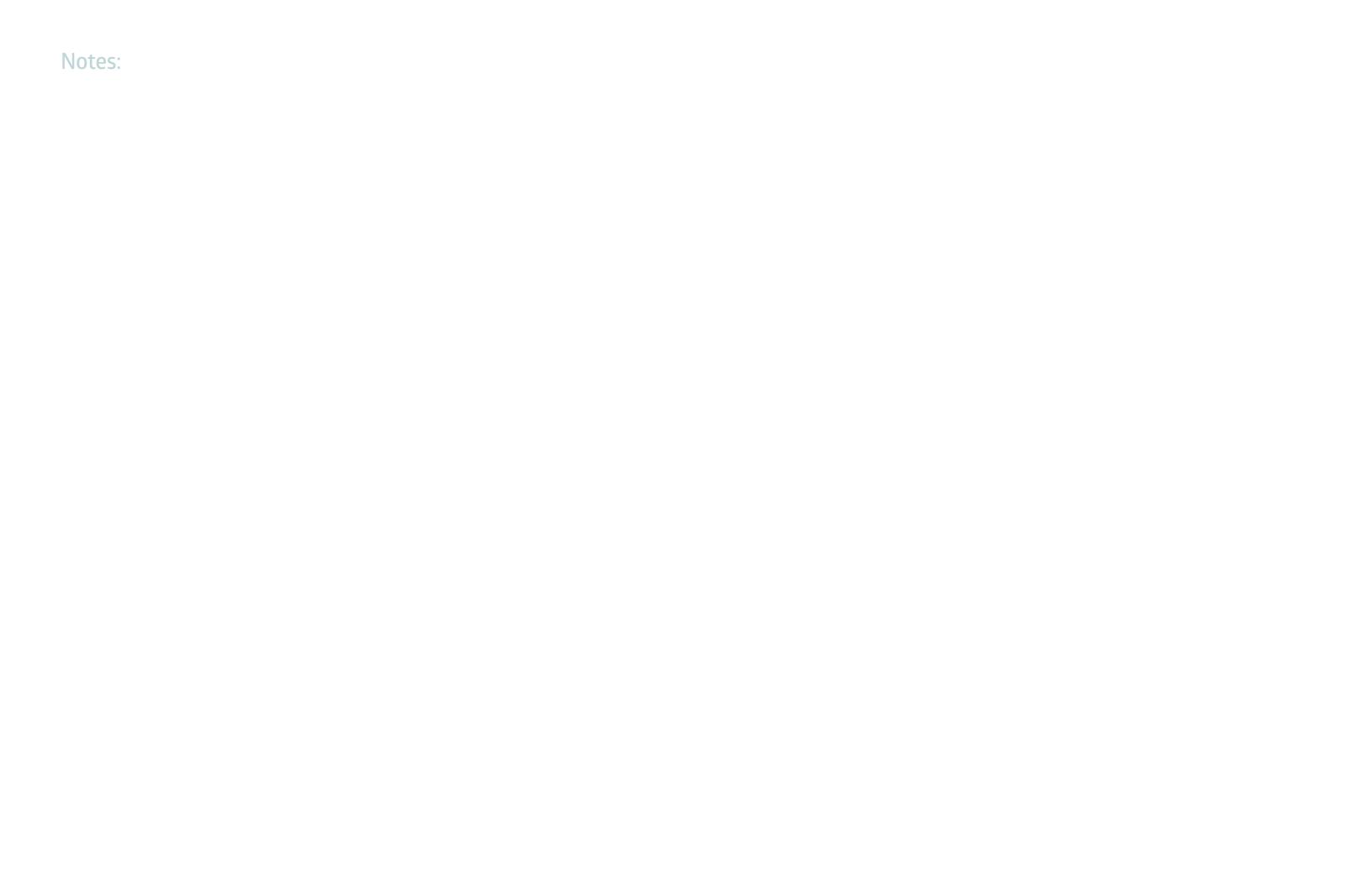
Perineal Care, Male—Skill Review Validation Form

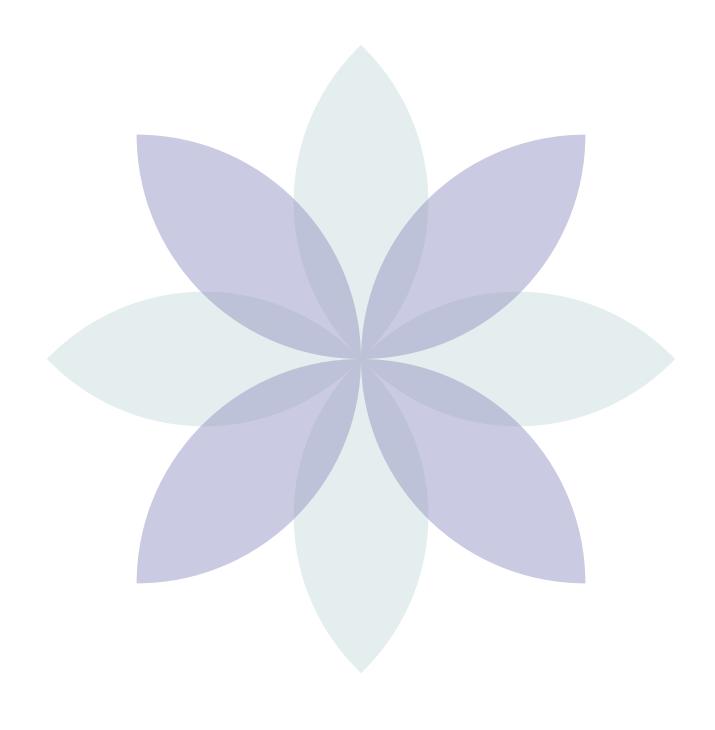
Employee's Name: Date:

Tas	Task		Demonstrated Date/Initials	Comments
1	Assemble supplies.			
2	Greet resident, address by name and introduce self.			
3	Provide explanations to resident before beginning and throughout procedure.			
4	Apply gloves before beginning perineal care.			
5	Replace soiled pad under resident's buttocks before beginning perineal care.			
6	Apply no-rinse cleansing spray or foam (or use an all-inclusive cleansing wipe).			
7	Wipe around the meatus and the glans in a circular motion.			
8	Use new wipe for each washing stroke.			
9	Cleanse all skin folds of perineal area, front and back, including scrotum.			
10	Pat dry entire perineal area from front to back after completing cleansing of each area.			
11	Position resident on side for cleansing of buttocks and rectal area.			
12	Cleanse and dry rectal and buttocks area.			
13	Leave resident on dry underpad or adult containment device at completion of procedure.			
14	Clean and store equipment at completion of procedure and leave work area tidy.			
15	Utilize standard (universal) precautions throughout procedure, including hand washing at the beginning and end of task.			
16	Promote resident comfort throughout procedure.			
17	Promote resident rights throughout procedure.			
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Notes:	Notes:







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