A literature review was performed between the months of August 2018 to December 2018 on the necessity of using female incontinence catheters. Ten articles were reviewed focusing on bed-bound, incontinent women. Research was performed for Spencer Hospital looking at the various ways to decrease the usage, decrease catheter-associated urinary tract infections (CAUTIs), and decrease skin breakdown from incontinence. Through the research, it was found that a large proportion of catheters are used when they are unnecessary. Indwelling catheters present a large risk for CAUTIs, or if there is not one used, the risk for skin breakdown from incontinence is high. Results found the use of a physician reminder system helps to keep track of the usage of indwelling catheters and prevents them from being left in too long. A daily reminder system for bedside nurses is also recommended by the research. The literature review also found the use of PureWick External Female Catheters to be implemented in incontinent, bed-bound women. Research proves these devices provide more comfort, better sleep, less skin breakdown, and less CAUTIs. In addition, these have proven to help in the healing process for women to regain control of their bladder.

Clinical Question
In inpatient incontinent females, how do external female catheters compare to internal catheters in reducing adverse effects?

Purpose and Significance
The purpose of this research is to determine the effectiveness of the female external urinary catheter to manage urinary incontinence in bed-bound women without catheterization to reduce urinary catheter days, CAUTIs, skin breakdown and decubitus ulcers.

Abstract
The Johns Hopkins appraisal system method was used to appraise the level and quality of evidence of the literature review.

Results
- Literature suggested that the use of external female catheters has a positive impact on incontinent women and decreases adverse effects like skin breakdown and infection.
- Indwelling catheters are placed inappropriately at an alarming rate.
- Daily reminder systems of how long an indwelling catheter has been placed and whether to continue its use are effective.
- Physician reminder system to check if renewal of catheter order is still needed.
- Any less invasive technique (pouch, straight catheterization, external catheter) reduces risk of infection.
- With each day an indwelling catheter is used, the risk for infection rises 3-7%.
- Purewick has a 99.9% efficacy of urine capture and did not cause further skin breakdown or irritation.
- External catheters help skin stay dry, captured drainage output, collected urine for color and clarity, and prevented wound injury.

Proposed Interventions
- Use external female catheters on bed-bound female patients.
- Physician reminder system with automatic stop orders after 48 hours.
- Daily assessment tools for indwelling female catheters.

Conclusion
- The implementation of a physician reminder and daily reminder system will bring awareness to the physicians and nurses about the necessity of indwelling urinary catheters.
- Alternatives can be used to prevent CAUTIs: urinary pouch, straight catheterization, and external catheters.
- The external female catheter provides effectiveness in decreasing CAUTIs and adverse effects related to incontinence.
- Nurses play a large role in bringing awareness to physicians about patient indwelling urinary catheter as well as implementing an alternative to the indwelling urinary catheter for incontinent inpatient females.

References