

BERGEN COMMUNITY COLLEGE
DIVISION OF HEALTH PROFESSIONS
DEPARTMENT OF NURSING

NUR 282

LEVEL II

ADULT HEALTH NURSING - B

COURSE OUTLINE

4 CREDITS

LECTURE: 4 HOURS PER WEEK

CLINICAL: 10 HOURS PER WEEK
CLINICAL CONFERENCE: 2 HOURS PER WEEK

FOR USE DURING THE FALL 2010 and
SPRING 2011 SEMESTERS ONLY

TABLE OF CONTENTS
NUR 282
ADULT HEALTH NURSING

Course Description.....4

Course Learning Outcomes.....4

Level Requirements4

Course Requirements.....5

Course Evaluation5

Required Texts6

Related WEB Resources6

CAI.....7-8

Evolve Learning System for NUR 282.....9

Course Outline.....10-17

Skills for Nursing Practice / General Guidelines18

Foley Catheterization – Female or Male19-22

ALL POLICIES AND COURSE REQUIREMENTS ARE SUBJECT TO REVISION ON A SEMESTER BY SEMESTER BASIS. STUDENTS WILL BE NOTIFIED OF ANY REVISION(S) AT THE BEGINNING OF THE SEMESTER IN WHICH THE POLICY OF REQUIREMENTS IS/ARE TO BE IMPLEMENTED DURING THE FIRST MEETING OF THE APPROPRIATE NURSING CLASS.

NUR-282, Adult Health Nursing - B

COURSE DESCRIPTION

This course is a second level course in the nursing sequence which focuses on the health care of individuals and families who have needs related to nutrition and elimination. Students will use the nursing process in a variety of health care settings to assist individuals and families achieve optimum health. This course runs for half the semester concurrently with NUR 281. Students may elect to take either course before the other.

4 lec., 12 lab., 7.5 weeks, 4 credits

PREREQUISITES: NUR 181, NUR 182, NUR 183, BIO 109, AND PSY 101

CO-REQUISITES: BIO 209, PSY 106, AND NUR 281

Course Learning Outcomes

1. Provides care based on Orem's self-care model to one or two individuals with deficits in USCRs – Food/Fluid and Elimination.
2. Applies nursing care that reflects the developmental capabilities of individuals.
3. Engages in therapeutic and professional communication techniques when interacting with individuals, families and other health team members.
4. Implements nursing care based on biological, psychological, sociological, cultural, spiritual and economic factors that influence the health of individuals.
5. Selects nursing activities that support personal, professional and educational development.
6. Behaves in a professional, ethical and legal manner effecting nursing practice in the current health care environment.
7. Applies skills in nursing care through the use of a variety of technological resources.
8. Demonstrates critical thinking by reasoning, analyzing, synthesizing and evaluating information in clinical situations in relation to care of individuals with deficits in Food/Fluid and Elimination.
9. Utilizes pharmacological concepts in the clinical and classroom setting to correctly calculate drug and solution problems. Passes the Level II Pharmacological Math Computation Exam (PMCE) with a score of 80% or higher.
10. Constructs and implements a teaching plan based which meets the educational needs of an individual.

LEVEL REQUIREMENT

Passing a Pharmacological Math Computation Exam (PMCE) with a score of 80% is a level requirement. The PMCE is comprise of 10 questions and will be given in the first course of each level. If the student does not attain the required 80% passing grade, he/she will be provided two retake opportunities within the confines of that course. Failure to achieve an 80% in the PMCE will result in an "F" for the course in which the test was administered. Calculators may be used at Level II.

COURSE REQUIREMENTS

- A. 14 Case Studies on Evolve Learning System (see page 6)
- B. The following course requirements are submitted to your clinical instructor:
- 2 Nursing Care Plans with Assessment of Basic Conditioning Factors. The nursing diagnosis in each nursing care plan will address Orem's Universal Self Care Requisite of FOOD or ELIMINATION (due dates to be determined by clinical instructor).
 - 1 Process Recording (due date to be determined by clinical instructor).
 - 1 Teaching Plan (topic, methodology and due date to be determined by clinical instructor).

COURSE EVALUATION

A.	Theory grade: Three unit tests worth	75%
	One Final exam worth	<u>25%</u>
	Total	100%

A grade of C+ is required for passing theory portion of course (see grading scale on page 3).

- B. Clinical and Clinical Conference Attendance and Absence Policy
- All students will be reminded at the beginning of each clinical experience that they are required to attend ALL clinical laboratory AND clinical conference meetings or be in jeopardy of receiving a failing clinical grade.
 - In order to pass clinical, the final grade must reflect an average of 3.0 or greater on all areas of the clinical evaluation. A student who receives a cumulative grade of less than 3.0 on areas will not pass the clinical component and will receive a final grade of "F" in the clinical nursing course regardless of the theory grade. Attendance is a part of the scoring of the clinical grade. In the category regarding professional behaviors, the following rules apply:
 1. No absences = rating of 4
 2. One absence = rating of 3
 3. Two absences = rating of 2 and a make-up assignment
 4. Three absences = rating of 1 and failure of course

Exceptional circumstances for clinical absences may be reviewed by the clinical instructor, team and Program Director at the request of the student.

A student should not call the College to report an absence. Faculty will inform students of the procedure to follow to report an absence for clinical laboratory or conference.

- C. Satisfactory demonstration on foley catheterization skill validation.
- D. Adherence to Nursing Program attendance policy (see Nursing Student Handbook).

- E. In order to pass the course, the student must receive:
- Theory grade of C+
 - Pass the Evaluation of Clinical Performance
 - Pass the Foley Skill Validation
 - Pass with 80% or greater the Pharmacology Math Computation Exam (PMCE)

A = 89.5% and above
B+ = 84.5 to 89.4%
B = 79.5% to 84.4%
C+ = 74.5% to 79.4%
F = 74.4% and below
(Refer to Student Handbook)

REQUIRED TEXTS

All textbooks from previous courses: NUR 181, NUR 182, and NUR 183.

NUR 281/282

Lutz and Przytalski. Nutrition and Diet Therapy. F.A. Davis, 5th edition, 2010.

ISBN: 13-978-0-8036-2202-9

Brunner & Sudarth, Textbook of Medical-Surgical Nursing, Lippincott, 12th edition
(2 volume) ISBN: 978-0-7817-8590

RELATED WEB RESOURCES

Pharmacology Math

www.bergen.edu/faculty/ntimme/

www.bergen.edu/faculty/cpolnyj/

NUR 282
Computer Assisted Instruction
(Room B-307 & Library)

1. Click on Start (bottom left of screen)
2. Click on All Programs
3. Click on Level 2
4. Click on NUR 282

Adult Health Nursing Concepts and Skills

Hematologic

Mrs. Byrd – Iron Deficiency Anemia

Gastrointestinal

Mr. Lewis – Peptic ulcer and gastrectomy

Mrs. Banks – Pancreatitis

Mr. Gold – Intestinal obstruction

Endocrine

Susan Smith – Diabetic ketoacidosis

Hepatic Biliary

Mrs. Bella – Cirrhosis of the liver

Mr. Reyes – Hepatitis

Mrs. Winter – Gallbladder and cholecystectomy

Genitourinary

Mr. Sumo – Prostatic hyperplasia

Sara – Urinary tract infection

Mr. Young – Renal colic and nephrolithiasis

Critical Care Concepts and Skills

PDS Nursing Scenarios

Adult Health Nursing Concepts and Skills

Gastrointestinal

Marge Thompson – Liver transplant

Mr. Stone – Cirrhosis and esophageal varices

Endocrine

Mrs. Wilson – HHNK - cardiac

Joseph Selim – Hypoglycemia

Louise Wilkins – Diabetic ketoacidosis

Clinical Nursing Concepts (review these sections)

Pharmacodynamics – non parenteral routes

Pharmacodynamics – parenteral routes

Peri operative care

Inflammation, infection and wound healing

MSM—MED-SURG

Gastrointestinal

Genitourinary

Hepatic Biliary

Gastrointestinal disorders

The Accessory Organs of the GI System

The Gastrointestinal System

Ulcers

Computer Assisted Instruction – continued

Genitourinary disorders

The Renal System

NCLEX Review 3500

Gastrointestinal
Genitourinary

Nursing Tutorial (NT) are available in the Library. These NCLEX-RN Review DVD discs are available on the following topics:

NCLEX RN Review on the following tapes:

Test Taking Skills
Nutrition – (Tape Only)
Gastrointestinal System
Genitourinary System
Endocrine/Diabetes

The New Food Pyramid (DVD – 21 minutes)

TX 360.U6 N 49 2006

Reading and Understanding the New Food Label (DVD – 18 minutes)

TP 374.5 .R433 2005

Diabetes

7 DVDs located in Library Reserve = RC660.D5 D532 2004

1. Physiology of glucose regulation
2. Pathology of diabetes
3. Nutrition therapy, exercise, and sick day management
4. Insulin and oral antidiabetic agents
5. Hypoglycemia and monitoring
6. Neuropathy, nephropathy and retinography
7. Cardiovascular disease and the diabetic foot

Nur 282 WEB CT

Quicktime movies on:

1. Foley catheter insertion
2. Foley catheter removal
3. Specimen collection closed technique from a foley catheter

















Evolve Learning System for NUR 282

Course Documents




Evolve Patient Reviews

Adult Health










-  Endocrine Health Problems -  Susan Smith
-  Gastrointestinal Health Problems -  Mr. Gold
 Mr. Lewin
 Mrs. Barker
-  Genitourinary Health Problems -  Mr. Sumo
 Mr. Young
 Sara
-  Hepatic Biliary Health Problems -  Mr. Estefan
 Mrs. Bella
 Mrs. Winter

Evolve Case Studies


Fundamentals

-  Altered Nutrition
-  Constipation
-  Urinary Patterns


Medical Surgical

-  Benign Prostatic Hyperplasia
-  Chronic Pancreatitis
-  Chronic Renal Failure
-  Cirrhosis
-  Colonoscopy with Bowel Perforation
-  Diabetes Type I
-  Hepatitis
-  Inflammatory Bowel Disease
-  Peptic Ulcer Disease

Physical Assessment

-  Abdominal Assessment

Management

-  Management of a Medical Unit

COURSE OUTLINE

<u>Theoretical Content</u>	<u>Teaching/Learning Activities</u>
<u>PART I: THE USCR FOR FOOD</u>	
UNIT I: THE GASTROINTESTINAL SYSTEM	Prior to the start of this unit, review the anatomy and physiology of the gastro intestinal system.
I. Definition of USCR for food	Read : Assessment course text - Chapter on Nutritional Assessment
II. Assessment of the Gastrointestinal system A. Health history B. Physical exam C. Diagnostic studies and related nursing responsibilities (i.e. consents, Supportive Educative Nursing Systems for test preparations,etc.) (SENS) 1. radiological 2. endoscopy 3. liver biopsy/function 4. blood chemistry	Read: Fundamental Text – Chapter on Nutrition Read: Brunner – Chapter 34 Read: Lutz– Chapters 1 – 9, 12, 13, 14 and 15 Read: Pharmacology course text – Chapter on Drugs Affecting the Gastrointestinal System
III. Normal Nutrition A. Components of the basic food groups 1. proteins 2. CHO 3. fats 4. minerals 5. vitamins B. Nutritional Needs of Adults C. Nutrient imbalances	CAI: Gastrointestinal System (Room B-307 & Library) NCLEX Review – Gastrointestinal NCLEX RN Review: Nutrition NCLEX RN Review: Gastrointestinal System
IV. Malnutrition A. Review assessment B. Identification of self-care deficits and related nursing diagnoses C. Nursing interventions D. Gerontologic considerations E. Iron Deficiency Anemia F. Pernicious Anemia G. Supplemental nutrition 1. oral feeding 2. enteral feeding 3. TPN 4. surgery	CAI: Mrs. Boyd – Iron Deficiency Anemia Read: Brunner, Chapter 36 Read: Lutz, Chapter 15

Theoretical Content

Teaching/Learning Activities

UNIT I: THE GASTROINTESTINAL SYSTEM

- V. Bariatrics (Obesity)
 - A. Review Pathophysiology, Clinical Manifestations, Diagnostic Studies
 - B. Therapeutic/nursing management
 - 1. calorie-restricted diets
 - 2. exercise
 - 3. behavior modification
 - 4. surgery

Read: Lutz, Chapter 16 and 20

Read: Brunner, Chapter 37

UNIT II: PROBLEMS OF INGESTION

Read: Brunner, Chapter 35

- I. Dental problems
- II. Mandibular fractures
- III. Gastroesophageal reflux disease (GERD)
 - A. Clinical manifestations
 - B. Therapeutic management
 - 1. diet
 - 2. drugs
 - C. Nursing Management
- IV. Hiatal hernia
 - A. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies
 - B. Types
 - C. Therapeutic and nursing management
- V. Esophageal disorders
- VI. Gastrostomy
 - A. Types of tubes
 - B. Feeding
 - C. Skin care
- VII. Food poisoning

Read: Assessment course text – Assessment of Abdomen

Read: Lutz, Chapter 14

UNIT III: PROBLEMS OF DIGESTION

- I. Nausea and vomiting
 - A. Therapeutic management
 - B. Nutritional management
 - C. Nursing management
- II. Acute gastritis
 - A. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies
 - B. Therapeutic management
 - C. Nursing management

Read: Brunner, Chapter 37

Theoretical Content

Teaching/Learning Activities

UNIT II: PROBLEMS OF INGESTION (Continued)

- III. Upper GI bleeding
 - A. Origins
 - 1. esophageal
 - 2. stomach/duodenum
 - 3. systemic diseases
 - B. Therapeutic management
 - 1. drugs
 - 2. surgery
 - C. Nursing assessment
 - D. Identification of self-care deficits and related nursing diagnoses
 - E. Nursing interventions

- IV. Peptic ulcers – gastric and duodenal
 - A. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies
 - B. Complications
 - 1. perforation
 - 2. gastric outlet obstruction
 - C. Therapeutic management
 - 1. drugs
 - a) antacids
 - b) H₂ receptor anatagonists
 - c) anticholingerics
 - 2. surgical management
 - D. Nursing assessment
 - E. Nursing interventions
 - 1. relieve discomfort
 - 2. recognize complications
 - a) dumping syndrome
 - b) postprandial hypoglycemia
 - 3. diet

CAI: Gastrointestinal (B-307 & Library)
 NCLEX Review – Gastrointestinal
 Mr. Lewis: Peptic ulcer

UNIT IV: PROBLEMS OF THE LIVER, BILIARY TRACT AND PANCREAS

Read: Brunner, Chapter 40

- I. Jaundice

- II. Hepatitis
 - A. Types
 - B. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies
 - C. Therapeutic management
 - 1. drugs
 - 2. diet
 - D. Nursing assessment
 - E. Identification of SCD and related NDs

Theoretical Content**UNIT IV: PROBLEMS OF THE LIVER, BILIARY TRACT AND PANCREAS**

- II. Hepatitis (continued)
 - F. Nursing interventions
 - 1. relieve discomfort
 - 2. skin care
 - 3. rest

- III. Cirrhosis of the liver
 - A. Review of Pathophysiology, Clinical Manifestation, Diagnostic Studies
 - B. Complications
 - 1. ascites
 - 2. esophageal varices
 - 3. hepatic encephalopathy
 - C. Therapeutic management
 - 1. peritoneovenous shunts
 - 2. endoscopic sclerotherapy
 - 3. shunts
 - 4. drugs
 - 5. diet
 - 6. noncompliance
 - D. Nursing assessment
 - E. Identification of SCD and related NDs
 - F. Nursing interventions
 - 1. relieve discomfort
 - 2. promote rest
 - 3. observe for complications

- IV. Pancreatitis
 - A. Review Etiology, Pathophysiology, Clinical Manifestation, Diagnostic Studies
 - B. Complications
 - 1. pseudocyst
 - 2. abscess
 - C. Therapeutic management
 - D. Nursing assessment
 - E. Identification of SCD and related NDs
 - F. Nursing interventions
 - 1. relieve pain
 - 2. promote fluid and electrolyte balance
 - 3. observe for complications
 - 4. SENS to prevent recurrence

Teaching/Learning Activities

- CAI: Gastrointestinal (B-307 & Library)
 NCLEX Review – Gastrointestinal
 Mrs. Banks – Pancreatitis
 Mrs. Bella – Cirrhosis of the Liver
 Mr. Reyes – Hepatitis
 Margie Thompson – Liver Transplant
 Mr. Stone – Cirrhosis and Esophageal Varices

Theoretical Content

UNIT IV: PROBLEMS OF THE LIVER, BILIARY TRACT AND PANCREAS

- V. Disorders of the Biliary Tract
 - A. Gallbladder disease
 - 1. review Pathophysiology, Clinical Manifestation, Diagnostic Studies
 - 2. complications
 - B. Therapeutic management
 - C. Nursing assessment
 - D. Identification of SCD and related NDs
 - E. Nursing intervention

UNIT V: DIABETES

- A. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies
- B. Classification
 - 1. type I
 - 2. type II
- C. Complications
 - 1. acute
 - 2. chronic
- D. Therapeutic management
 - 1. diet
 - 2. drugs
 - 3. exercise
 - 4. glucose monitoring
 - 5. foot care
- E. Nursing interventions
- F. Identification of SCD and related NDs
- G. Nursing interventions
 - 1. prevent acute/chronic complications
 - 2. SENS to manage disease

PART II: THE USCR FOR ELIMINATION

UNIT I: PROBLEMS OF BOWEL ELIMINATION

- I. Definition of the USCR for bowel elimination
- II. Diarrhea and constipation
 - A. Constipation
 - B. Diagnostic studies and related nursing responsibilities (i.e. consents, SENS for test preparations, etc.)
 - 1. x-rays
 - 2. barium enema
 - 3. colonoscopy
 - 4. sigmoidoscopy

Teaching/Learning Activities

CAI: Gastrointestinal (B-307 & Library)
 NCLEX Review – Gastrointestinal
 Mrs. Winter – Gallbladder and Cholecystectomy

Read: Brunner, Chapter 41

Read: Lutz – Chapter 17

Read: Pharmacology course text – Drugs affecting the Endocrine System: Diabetic Medications

CAI: Susan Smith – Diabetic Ketoacidosis
 Mrs. Wilson – HHNK
 Joseph Selim – Hypoglycemia
 Louise Wilkins – Diabetic Ketoacidosis

7 DVDs located in Library Reserve
 RC660.D5 D532 2004
 1. Physiology of Glucose Regulation
 2. Pathology of Diabetes
 3. Nutrition Therapy, Exercise and Sick Day Management
 4. Insulin and Oral Antidiabetic Agents
 5. Hypoglycemia and Monitoring
 6. Neuropathy, Nephropathy and Retinopathy
 7. CVD and the Diabetic Foot

Read: Brunner, Chapter 38

Read: Lutz – Chapter 20

Read: Pharmacology course text – Drugs Affecting the Gastrointestinal System

<u>Theoretical Content</u>	<u>Teaching/Learning Activities</u>
<p>II. Diarrhea and constipation (continued)</p> <p>C. Therapeutic management</p> <ol style="list-style-type: none"> 1. drug therapy 2. diet <p>D. Nursing assessment</p> <p>E. Identification of SCD and related NDs</p> <p>F. Interventions</p>	
<p>III. Noninflammatory intestinal disorders</p> <p>A. Hernias</p> <p>B. Intestinal obstruction</p> <ol style="list-style-type: none"> 1. mechanical 2. nonmechanical <p>C. Abdominal trauma</p> <p>D. Polyps</p> <p>E. Hemorrhoids</p>	
<p>IV. Inflammatory intestinal disorders</p> <p>A. Appendicitis</p> <p>B. Peritonitis</p> <p>C. Ulcerative colitis</p> <p>D. Crohn's disease</p> <p>E. Diverticular disease</p>	
<p>V. Anal disorders</p>	
<p>VI. Therapeutic management</p> <p>A. Diet</p> <p>B. Drug therapy</p> <p>C. Surgery</p> <ol style="list-style-type: none"> 1. colostomy, ileostomy 2. colon resection <p>D. Nursing assessment</p> <p>E. Identification of SCD and related NDs</p> <p>F. Nursing interventions</p>	<p>CAI: Gastrointestinal (Room B307 & Library) NCLEX Review – Gastrointestinal Mr. Gold – Internal Obstruction</p> <p>Case Study: Care of the Client with Ileostomy Case Study: Care of the Client with Small Bowel Obstruction</p>
<p>UNIT II: PROBLEMS OF URINARY ELIMINATION</p>	<p>Read: Brunner, Chapters 43 & 45</p>
<p>I. Definition of the USCR for urinary elimination</p>	<p>Read: Lutz – Chapter 19</p>
<p>II. Assessment</p> <p>A. Health history</p> <p>B. Physical exam</p> <p>C. Diagnostic studies and related nursing responsibilities (i.e. consents, SENS for test preparations, etc.)</p> <ol style="list-style-type: none"> 1. urine studies 2. blood chemistries 3. radiologic studies 4. renal scans 5. endoscopies 6. renal biopsy 	<p>Read: Pharmacology course text – Drugs Affecting the Renal System; Drugs Used to Treat Infections - Urinary Antiseptic Agents</p> <p>CAI: Genitourinary (B-307 & Library) NCLEX Review – Genitourinary Sara – UTI Mr. Young – Renal Colic & Nephrolithiasis</p>

<u>Theoretical Content</u>	<u>Teaching/Learning Strategies</u>
III. Infections (UTI) <ul style="list-style-type: none"> A. Upper <ul style="list-style-type: none"> 1. Pylelonephritis 2. Pyelitis 3. Ureteritis B. Lower <ul style="list-style-type: none"> 1. Cystitis 2. Urethritis C. Sources D. Clinical manifestations E. Therapeutic management 	
IV. Glomerulonephritis	Read: Brunner, Chapter 44
V. Obstructive uropathies-urinary and renal calculi	
VI. Urinary incontinence	
VII. Problems of the prostate gland <ul style="list-style-type: none"> A. Benign prostatic hypertrophy B. Prostatitis <ul style="list-style-type: none"> 1. review Pathophysiology, Clinical Manifestation, Diagnostic Studies 2. drug therapy 	
VIII. Surgery of the urinary tract <ul style="list-style-type: none"> A. Ileo-conduit B. Prostatic surgery C. Pre and postoperative care 	CAI: Genitourinary (Room B-307 & Library) NCLEX Review – Genitourinary Mr. Sumo – Prostatic hyperplasia
IX. Nursing assessment	
X. Identification SCD and related NDs	
XI. Nursing interventions	
UNIT III: RENAL FAILURE	Read: Brunner, Chapter 44
A. Acute <ul style="list-style-type: none"> 1. pathophysiology 2. clinical course <ul style="list-style-type: none"> a) oliguric phase b) diuretic phase c) recovery phase 3. diagnostic studies B. Chronic	

Theoretical Content

- C. Dialysis
 - 1. peritoneal
 - 2. hemodialysis
- D. Nursing assessment
- E. Identification of SCD and related NDs
- F. Nursing interventions and effect of deficit on other USCR's
- G. Therapeutic/nursing management
 - 1. drug therapy
 - 2. diet
- H. Transplantation

Teaching/Learning Strategies

SKILLS FOR NURSING PRACTICE**GENERAL GUIDELINES PRIOR TO STARTING ANY PROCEDURE**

- * 1. Check physician/health care provider orders
- * 2. Wash your hands.
- 3. Organize your equipment.
- * 4. Identify patient.
- * 5. Introduce yourself
- * 6. Explain procedure to patient.
- * 7. Provide for privacy.
- 8. Raise the bed to a working level.
- 9. Position patient as needed.
- 10. Maintain safety.
- 11. Perform procedure.
- 12. Observe patient's response.
- 13. Wash your hands.
- 14. Document accordingly.

* Must be stated prior to starting validation procedure

See Foley Skill Demonstrations on Professor Timme's WEB CT

- 1. Foley catheter insertion
- 2. Foley catheter removal
- 3. Specimen collection closed technique from a foley catheter

BERGEN COMMUNITY COLLEGE
Department of Nursing
NUR - 282
Skills Performance - Foley Catheterization - Female

PROCEDURE	SATIS- FACTORY	UNSATIS- FACTORY	COMMENTS
<i>INSERTION OF FOLEY CATHETER CONNECTED TO STRAIGHT DRAINAGE - FEMALE OR MALE URINARY CATHETERIZATION</i>			
1. Check physician's order.			
2. Collect Foley catheter set (usually #16 French for adult) and light source.			
3. Wash hands.			
4. Identify patient and provide privacy.			
5. Prepare patient: Explain procedure; position patient for maximal exposure of urinary meatus; drape patient so that feet, legs, abdomen and chest are covered for warmth and modesty; adjust lighting for good visualization of the urinary meatus.			
6. Remove outer wrapper from set. Fold the bag to form a cuff at the opening. Place the bag alongside the patient, above the waist level, on the opposite side of the bed. Use this bag as a discard receptacle.			
7. Open the catheterization set, maintaining asepsis. Remove the waterproof absorbent underpad from the set without contaminating the other contents in the set.			
8. Place this absorbent underpad beneath the patient's buttocks.			
9. Position the catheterization set by touching only the 1" outside edge of the sterile barrier (wrapper) field so as to insure the establishment of a complete sterile working field between the patient and the equipment.			
10. Don sterile gloves.			
11. Position the two trays.			
12. FEMALE: Protecting your sterile gloved hands, place the fenestrated drape over the perineum in such a manner as to complete the sterile working field. Place this drape so as to insure the establishment of a complete sterile working field between the patient and the equipment. MALE: Protecting your sterile gloved hands, place the fenestrated drape over the penis and pubic area, exposing only the penis. Place this drape so as to insure the establishment of a complete sterile working field between			

PROCEDURE	SATIS-FACTORY	UNSATIS-FACTORY	COMMENTS
INSERTION OF FOLEY CATHETER CONNECTED TO STRAIGHT DRAINAGE - FEMALE OR MALE URINARY CATHETERIZATION			
13. Attach water filled syringe to balloon outlet of catheter. Test the water balloon.			
14. Spread lubricant (from syringe) onto the tray and lubricate the catheter. (Position the tray so that lubricant and catheter are now in the side of the tray farthest from the perineum or penis.)			
15. Pour antiseptic solution over cotton balls.			
16. FEMALE: Hold labia minora apart with non-dominant hand, and leave hand there until the catheter is in place. MALE: Grasp the penis firmly behind the glans (with non-dominant hand), and spread the meatus between the thumb and forefinger. Leave hand there until the catheter is in place.			
17. FEMALE: With the dominant hand, use sterile forceps to pick up a cotton ball. Cleanse the labia (farthest from you first) and then the meatus. Visualize the meatal opening while cleansing. Discard each cotton ball after only one wipe. Use all cotton balls. MALE: Retract the foreskin of an uncircumcised male. With the dominant hand, use sterile forceps to pick up a cotton ball. Clean the meatus first and then wipe the tissue surrounding the meatus in a circular fashion. Discard each cotton ball after only one wipe. Use all cotton balls.			
18. To obtain patient relaxation, suggest they breathe slowly and deeply during catheter insertion.			
19. Pick up the insertion end of the catheter with the uncontaminated, sterile, gloved hand, holding it close to the insertion tip.			

PROCEDURE	SATIS-FACTORY	UNSATIS-FACTORY	COMMENTS
<i>INSERTION OF FOLEY CATHETER CONNECTED TO STRAIGHT DRAINAGE - FEMALE OR MALE URINARY CATHETERIZATION</i>			
<p>20. FEMALE: Insert catheter steadily into the urethra about 3 inches with dominant sterile hand; when urine begins to flow through catheter, insert another inch or two into bladder. (Allow no more than 800 cc of urine to drain at this time.) Hold catheter in place with non-dominant hand until balloon is inflated.</p> <p>MALE: Lift penis to a position perpendicular to the body and exert slight traction. Insert catheter steadily about 8 inches into the urethra with dominant sterile hand; when urine begins to flow through catheter, insert another inch or two into bladder. To bypass slight resistance at sphincters, twist the catheter or wait until the sphincter relaxes. Have client take deep breaths or try to void. (If resistance is still met, discontinue procedure and report to nurse in charge.) (Allow no more than 800 cc to drain at this time.) Gently lower penis while holding catheter in place about 1-1/2 inches from meatus.</p>			
21. Inflate balloon with sterile water. Do not release syringe plunger until syringe has been disconnected from balloon lumen.			
22. If catheter is secure, disconnect the syringe from the balloon lumen.			
23. MALE: In an uncircumcized male, replace the foreskin to its normal position.			
24. Remove fenestrated drape and underpad.			
25. Remove gloves.			
26. Secure catheter to patient's thigh (optional).			
27. Position drainage bag to bed frame.			
28. Remove receptacle bag and catheterization set (except urine specimen container and label if needed).			
29. Cover patient with bed coverings, remove bath blanket and return patient to a comfortable position.			
30. If ordered, obtain urine specimen from drainage bag, wearing clean gloves.			

PROCEDURE	SATIS-FACTORY	UNSATIS-FACTORY	COMMENTS
<p><i>INSERTION OF FOLEY CATHETER CONNECTED TO STRAIGHT DRAINAGE - FEMALE OR MALE URINARY CATHETERIZATION</i></p>			
<p>31. Discard equipment in appropriate receptacle. (According to hospital policy.)</p>			
<p>32. Record procedure and observations accurately on patient's chart. Include:</p> <ul style="list-style-type: none"> • date and time • size of foley • amount, color, consistency of urine • patient's response to procedure 			