Bard SureStep Foley Catheter Tray System

Now inserting a Foley Catheter is as easy as A, B, C.

A. Clean the Patient

![Image of A) STOP! CLEANSE THE PERI-URETHRAL AREA FIRST](image1.png)

1. Wash hands and don clean gloves
2. Explain procedure to patient and open Pen-Care Kit
3. Use the provided packet of towelettes to cleanse patient's peri-urethral area
4. Remove gloves and perform hand hygiene with provided alcohol hand sanitizer gel

B. Be Sure to use aseptic technique

![Image of B) ORIENT TOWARD INSERTION SITE](image2.png)

1. Open pen wrap
2. Don sterile gloves
3. Place sheath
4. Place infusion bag
5. For instrucions
c. Care and maintenance

Foley catheters are intended for use in the drainage and/or collection and/or measurement of uring. STATLOCK Stabilization devices should be monitored daily and replaced when clinically indicated or at least every 7 days.

STATLOCK Stabilization devices are contraindicated on patients with know tray or adhesive allergies.
Located on the insert in the Peri-Care Kit

A. STOP! Cleanse the peri-urethral area first
   1. Wash hands and don clean gloves
   2. Explain procedure to patient and open Peri-Care kit
   3. Use packet of towelettes to cleanse the patient’s peri-urethral area (male: circular motion from meatus out/female: from meatus to anus; one swipe). This helps reduce bio-burden
   4. Remove soiled gloves and perform hand hygiene with provided alcohol hand sanitizer

Located on the belly band

B. Utilize Proper Aseptic Technique
   1. Place tray in between patient’s legs (not on bedside table)
   2. Open CSR wrap without reaching over sterile field
   3. Don sterile gloves (away from sterile field)
   4. Place sterile underpad (shiny side down)
   5. Place sterile fenestrated drape over patient (to extend sterile field)
   6. Follow tray instructions

Printed on tray

1. Open iodine
2. Pour iodine over swab sticks
3. Attach water syringe to balloon lumen (do not pretest the balloon; this has been done 3x in the factory and sometimes with silicone catheters the balloon may not go down to its pre-inflated state which can result in some ridges or cuffing around the insertion site which may lead to a painful insertion)
4. Dispense and lube foley here
   (All of this set-up work must be completed before committing non-dominant to retracting genitalia)
5. Retract genitalia (non-dominant hand)
6. Prep patient with swabs with dominant hand (male: circular motion from meatus out/female: from meatus to anus; one swipe)
7. Insert catheter and inflate balloon (dominant hand)

Printed on tray under drainage bag

C. Care and Maintenance
   1. Secure Foley with StatLock Securement device
   2. Position bag below bladder and secure tubing to sheets to reduce dependent loops
   3. Document insertion date with provided labels/provide patient education card
   4. Maintain closed system according to hospital policy
   5. Assess need for catheter routinely