Supplemental digital content for Barnum T, Tatebe LC, Halverson AL, Helenowski IB, Yang AD, Odell DD. Outcomes Associated With Insertion of Indwelling Urinary Catheters by Medical Students in the Operating Room Following Implementation of a Simulation-Based Curriculum. Acad Med.

Supplemental Digital Appendix 1

Foley Catheter Insertion Checklist. From a Study of Effects of a Simulation-Based Curriculum on CAUTI rates, Northwestern University Feinberg School of Medicine, 2011–2016

Name (please print):_____

Clerkship #:_____

Date:_____

Task	Correct	Incorrect	Comments
Perform hand hygiene.		Fail	
Don gloves.			
Clean peri-urethral area using provided wipes or CHG.			
Remove gloves.			
Perform hand hygiene.			
Place foley kit between the patient's legs (Arrow toward catheter site).			
Open the foley kit maintaining sterility at all times.		Fail	
Don sterile gloves. This should be done completely off sterile field.			
Place underpad beneath patient (maintaining sterility at all times).		Fail	
Position fenestrated drape (maintaining sterility at all times).		Fail	
Saturate 3 foam swab sticks in povidone iodine.			
Attach the water filled syringe to the inflation port (DO NOT TEST BALLOON).			
Dispense lubricant into tray.			
Remove the wrap from the foley catheter and lubricate the catheter.			
Female:			
Using the nondominant hand, separate the labia majora and labia minora as widely as possible to			
visualize the urinary meatus. Keep separated throughout the procedure.			
Using the dominant (sterile) hand and a downward stroke, cleanse the furthest labia majora,			
discard swab stick. Furthest from the individual inserting.			
Using the dominant (sterile) hand and a downward stroke, cleanse the closest labia majora, discard			
the swab stick. Closest to the individual inserting.			
Using the dominant (sterile) hand and a downward stroke, cleanse the middle area, discard the swab stick.			

Please return completed form to the appropriate person(s).

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Pick up catheter with dominant (sterile) hand and slowly insert into urinary meatus until urine is in		
the drainage tube.		
Advance catheter $2 - 3$ additional inches.		
Inflate catheter balloon using non-sterile hand. Ensure sterile hand holds catheter in place, while		
inflating Gently pull back on catheter until slight tension detected.		
Maintain aseptic technique and standard precautions during the procedure.	Fail	
Securing the catheter to the patient using the StatLock.		
Place foley in the StatLock with arrow on clamp pointing toward tip of the catheter and the		
bifurcation resting against the port.		
Close retainer with pressure on grooved side.		
Choose stabilization site (thigh or abdomen), leaving no more than 1 inch of catheter slack. (If		
using thigh, ensure leg is fully extended,)		
Apply both skin protectant pads to site in the direction of hair growth; allow to dry 10-15 seconds.		
Peel back paper backing and place on skin. Do not pull tightly across skin.		

The following section is not pass/fail. Learner must verbalize/show on mannequin only, not perform simulation with additional foley				
Male: (If uncircumcised, gently retract foreskin).				
Using the non-dominant hand, hold the penis at a 60–90 degree angle.				
Cleanse in a circular motion starting at the urethral meatus and work outward.				
Repeat with each swab stick (3 total).				
Pick up catheter with dominant (sterile) hand and slowly insert into urinary meatus until urine				
is in the drainage tube.				
Advance catheter to the bifurcation of catheter.				

Please return completed form to the appropriate person(s).