

Chapter 29: Urinary Elimination

Changing a Drainage Bag to a Leg Bag			
		Name:	
		Date:	
<i>Remember to promote:</i>			
Dignity • Independence • Individualized Care • Preferences • Privacy • Safety			
Pre-Procedure	S	U	Comments
1. Identify the client, according to employer policy.			
2. Explain the procedure to the client.			
3. Practise proper hand hygiene.			
4. Collect the following:			
<input type="checkbox"/> Gloves			
<input type="checkbox"/> Drainage bag and tubing			
<input type="checkbox"/> Antiseptic wipes			
<input type="checkbox"/> Bed protector			
<input type="checkbox"/> Sterile cap and catheter plug			
<input type="checkbox"/> Catheter clamp			
<input type="checkbox"/> Paper towels			
<input type="checkbox"/> Bedpan			
<input type="checkbox"/> Cover or bath blanket (if one is available)			
5. Arrange paper towels and equipment on the work area.			
6. Provide for privacy.			
Procedure	S	U	Comments
7. Have the client sit on the side of the bed.			
8. Put on gloves.			
9. Help the client lie back down. Raise the bed to a comfortable working height.*			
10. Cover the client with a cover or bath blanket (if one is available). Expose the catheter and drainage tubing. Place the bed protector under the leg.			
11. Clamp the catheter The clamp is applied to the catheter, not to the drainage tubing (FIGURE 29.14).			
12. Let urine drain from below the clamp			

site into the drainage tubing.			
13. Open the antiseptic wipes. Set them on the paper towels.			
14. Open the package with the sterile cap and plug. Set the package on the paper towels. Do not let anything touch the sterile cap or plug (FIGURE 29.15).			
15. Open the package with the leg bag drainage tubing, and attach the drainage bag to the bed frame.			
16. Disconnect the catheter from the drainage tubing. Do not let anything touch the ends.			
17. Remove the cap from the leg bag drainage tubing. Do not let anything touch the ends. If unsure whether anything touched the ends, wipe both ends with antiseptic wipes.			
18. Insert the end of the catheter into the leg bag drainage tubing.			
19. Place the sterile cap on the end of the drainage bag tubing (FIGURE 29.16, A). If you contaminate the tubing end, wipe it with an antiseptic wipe. Do so before you put the sterile cap on.			
20. Remove the clamp from the catheter.			
21. Loop the tubing, and secure it to the client's leg (FIGURE 29.16, B).			
22. Remove the drainage tubing from the bed. Place it in the bedpan.			
23. Remove and discard the bed protector. Place in hamper if it is washable.			
24. Cover the client. Remove the cover or bath blanket (if one was used).			
25. Take the bedpan to the bathroom.			
26. Drain the drainage bag into a measuring cup, make a note of the measurement, and empty the measuring cup into the toilet (see the procedure <i>Emptying a Urinary Drainage Bag</i> on page 658) and rinse it out. Record the amount if this is required by agency policy.			

Post-Procedure	S	U	Comments
27. Remove gloves. Practise proper hand hygiene.			
28. Provide for safety and comfort.			
29. Place the call bell within reach.*			
30. Return the bed to its lowest position. Follow the care plan for bed rail use.*			
31. Remove privacy measures.			
32. Discard the drainage tubing and bag or clean the bag, according to employer policy.			
33. Return the bedpan and other supplies to their proper places.			
34. Reverse the procedure to attach a drainage bag to the catheter.			
Report and Record your actions and observations, according to employer policy.			
<i>*Steps marked with an asterisk may not apply in community settings.</i>			