

	Policies & Procedures Title: CATHETER – TRACTION – APPLICATION TO URETHRAL CATHETERS FOR POST TURP I.D. Number: 1017
Authorization [X] SHR Nursing Practice Committee	Source: Nursing Date Revised: September 2012 Date Effective: May, 1999 Scope: Saskatoon City Hospital Royal University Hospital St. Paul's Hospital

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1. PURPOSE

- 1.1 To use as an adjunct to continuous bladder irrigation to control excessive post-operative bleeding from the prostatic cavity.

2. POLICY

- 2.1 The RN will apply traction to urethral catheters for Post TURP as ordered by a physician.
- 2.2 The physician's order for traction must include length of time the traction should remain once the bleeding is controlled and the frequency of vital signs monitoring.
- 2.3 When obtaining the order for traction, the physician is to be made aware of the amount of fluid currently in the balloon (documented on the OR record).
- 2.4 The physician will be notified if the application of traction does not decrease bleeding within 30 minutes.

3. PROCEDURE

- 3.1 The patient will be assessed for the need for analgesic prior to application of traction and while the traction is on.
- 3.2 Obtain supplies:
 - 1" adhesive tape
 - scissors
- 3.3 Clip hair on thigh where tape will be applied.
- 3.4 Cut lengths of 1-inch adhesive or water proof tape:
 - (2)- 20 inch (50 cm)
 - (2)- 10 inch (25 cm)

- 3.5 Firmly grasp the catheter approximately 6 inches above the 3-way junction and pull firmly until catheter is taut.

Note: *The pressure of the catheter balloon on the prostate bed decreases hemorrhage.*

- 3.6 Maintaining the traction, grasp the catheter at the 3-way junction. Lay tape (sticky side up) just proximal to the 3-way junction, underneath the catheter at this point (See Appendix A, Picture 1).
- 3.7 Cross the tape over top of the catheter and secure each end to the clipped area of the thigh. The tape should not impede inflow or outflow of solution. (See Appendix A, Picture 2)
- 3.8 Repeat 3.6 and 3.7 with a second piece of tape, if necessary.
- 3.9 Using the two short pieces of adhesive, secure the first two pieces to the leg, by taping across them at 90 degrees. (See Appendix A, Picture 3)
- 3.10 Once traction is placed, blood pressure and pulse will be taken and documented every 15 minutes for one hour, followed by vital signs as ordered by the physician.
- 3.11 The effectiveness of the traction will be assessed every 15-30 minutes.
- 3.12 Document:
- patient's tolerance
 - amount of bleeding. i.e. urine color / CBI returns, presence of blood clots
 - length of time of traction
 - additional fluid into catheter balloon
 - vital signs
- 3.13 The application of traction does not affect the procedure for management of a "Continuous Bladder Irrigation".

4. REFERENCES

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Appendix A

