

Beebe Healthcare
Margaret H. Rollins School of Nursing
Nursing 101 - Foundations of Nursing
Day 2 Class Prep Assignment

1. What is a CAUTI?

Catheter-associated urinary tract infections. CAUTI's account for about 75% of healthcare acquired infections.

2. What are ways to prevent a CAUTI? **Select all that apply:**

A. Hand Hygiene

B. Prolonged use of indwelling catheters

C. Routine catheter care

D. Early removal of indwelling catheter

E. Good nutrition

3. What is the most effective way to prevent healthcare-associated infections (HAIs)?

The most effective way to prevent healthcare-associated infections is proper hand hygiene. This is done by making sure to preform hand hygiene before and after seeing a patient. Whether that is with soap and water or a dry hand wash, either way it is extremely important for not only the patient's safety but also the nurses and other staff.

4. In which circumstances should a healthcare worker utilize soap and water for hand hygiene instead of waterless hand rub? **Select all that apply:**

A. When hands are visibly soiled

B. When entering a client room

C. After caring for a client who has infectious diarrhea

D. Before checking a client's vital signs

E. Before performing a dressing change

5. What do you do with the orange sticker post foley catheter care?

The orange sticker from a foley catheter goes onto the outside of the drainage bag.

6. What are the 4 types of exudates used to describe wounds?

The four different types of exudates used to describe a wound are serous, serosanguineous, sanguineous, and purulent. A purulent wound means that there is an infection and the infection should be reported to the patient's provider. Serous wounds are thin watery drainage wounds and serosanguineous are also thin/watery but they are also mixed with blood. Sanguineous wounds are just bloody wound drainage. Purulent wounds show as green and yellow drainage.

7. Identify 1 bony prominence susceptible to pressure injury formation:

One common bony prominence that is susceptible to a pressure injury would be the elbow. This is because it is a weight bearing joint meaning the pressure is pressed mainly onto the lower layers of tissue where the bones and muscles meet. This connected in the lower layers then causes deep tissue damage for the patient.

Beebe Healthcare
Margaret H. Rollins School of Nursing
Nursing 101 - Foundations of Nursing
Day 2 Class Prep Assignment

8. What is the name of the equipment used to empty a foley catheter bag?

The foley catheter bag has a tube on the outside of the bag that is used to empty the urine out. The tube is taken out and the clamp on it is taken off so the urine is able to be drained into a graduated cylinder.

9. What type of bedpan do you utilize for a client with a hip fracture?

- A. Ridged bedpan
- B. Orthopedic bedpan
- C. Fractured bed pan
- D. Bariatric bedpan

10. What is an imperative assessment you perform when you are positioning the client in a side-lying position?

You have to make sure that you check the skin on their back while they are on their side. This is because when they lay for too long on their back they can form pressure wounds and skin sores. So as a precaution it is necessary to check their skin when possible to catch any signs of injury early.