### Summary of Most Common Uses of Urinary Catheters

<table>
<thead>
<tr>
<th>Clinical Indication</th>
<th>Indwelling</th>
<th>ISC</th>
<th>External</th>
<th>Noncatheter Options</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient cannot urinate due to urinary infection</strong></td>
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<tr>
<td>Acute retention without bladder outlet obstruction</td>
<td>Yes</td>
<td>Yes, if bladder can be emptied between 4 to 6 hours</td>
<td>No</td>
<td>Bladder scanner to avoid catheter when no or little urine is found</td>
</tr>
<tr>
<td>Acute retention with bladder outlet obstruction</td>
<td>Indwelling/ISC appropriateness vary by type so consider urology consultation for prostatitis or urethral trauma</td>
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<tr>
<td>Chronic retention without bladder outlet obstruction</td>
<td>Uncertain</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>Chronic urinary retention with bladder outlet obstruction</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td><strong>Patient cannot stop or control urination due to incontinence</strong></td>
<td></td>
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<tr>
<td>Incontinence (no skin issue), nurses can turn/provide skin care</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Incontinence (no skin issue), nurses can turn/provide skin care but patient requests catheter</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
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<tr>
<td>Incontinence (no skin issues), difficulty turning (e.g., weight &gt;300 lb.)</td>
<td>Yes</td>
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<td>Turning causes hemodynamic or respiratory instability</td>
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<td>Strict temporary immobility after vascular procedure</td>
<td>Yes</td>
<td></td>
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<tr>
<td>Incontinence with mild/early incontinence-associated dermatitis</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Uncertain</td>
</tr>
</tbody>
</table>

**Criteria for Appropriate Urinary Catheter Use in Hospitalized Medical Patients**
Adapted with permission from the Ann Arbor Criteria, Annals of Internal Medicine, May 2015
| Incontinence with moderate/severe incontinence-associated dermatitis | No | No | Yes | Barrier creams, prompted toileting, garments can manage incontinence-related skin issues |
| Incontinence with closed pressure ulcer: stage I, deep tissue injury | | | Uncertain | Yes, if use of noncatheter options would not worsen ulcer |

**Clinic requests catheter to measure urine volume**

| Hourly urine volume is required to provide treatment | Yes | No | No | No |
| Daily (not hourly) urine volume required to guide treatment | Yes, if can’t be collected/ accessed without catheter | Uncertain | Yes if can’t be access without catheter | Exam/daily weight, urinal, bedpan etc. |
| Post-void residual urine volume | No | Yes if no bladder scanner | No | Bladder scanner |

**Urine specimen collection is needed to perform diagnostic test**

| Sterile sample for urine culture for diagnostic test | No | Yes | Uncertain | No |
| Nonsterile random urine sample | | | Yes | |
| 24-hour urine sample | Yes | Uncertain | | |

**Urine catheter is requested to provide comfort and/or convenience**

| Improve comfort (address patient/family goals) in actively dying patient | Yes | Uncertain | Yes | Yes for all options |
| Family or patient request in nondying patient with no incontinence or difficulties using commode, urinal, or bedpan | No | No | No | |
| Chronic ISC patient requests a “break” from ISC while admitted | Uncertain | Yes | | Bladder scanner to reduce frequency of ISC by avoiding if no or little urine in bladder |