PURPOSE: To introduce Amphotericin B into the bladder as a continuous infusion for a prescribed period of time. This is also called intravesical instillation.

OBJECTIVE: The nurse will perform instillation of medication in a safe manner.

KNOWLEDGE BASE:
1. Aseptic technique must be maintained throughout the procedure to prevent bacteria from entering the bladder.

2. Instillation of medication into the bladder requires a physician’s order. The order should state the medication, the dosage or amount, and the frequency. Amphotericin B can be ordered as a continuous irrigation for a prescribed number of days to treat a fungal infection. The Amphotericin B will be placed at the foot of the bed. Call 9WT regarding CBI of any other irrigants.

3. The nurse administering the medication will verify the correct patient, correct drug, correct dose, correct route, correct time, and the expiration dates on the drugs. The infusion bag will be labeled with fluorescent orange stickers which will say “Not for IV Infusion.”

4. Avoid administering Amphotericin B concurrently with WBC (granulocyte) Transfusions.

5. Bladder instillation of Amphotericin B carries fewer side effects than IV, but may cause hematuria, cramping, discomfort and burning.

PATIENT EDUCATION: Explain the rationale for the procedure and briefly outline the procedure to the patient.

INDICATIONS: Amphotericin B is instilled directly into the bladder for treatment of bladder fungal infections.

EQUIPMENT: Assemble the following:
1. IV pole
2. Amphotericin B irrigation solution mixed in sterile water
(never mix Amphotericin B with normal saline). A sticker with “Not for IV infusion” will be attached. Extra stickers will be sent from Pharmacy.

3. IV pump
4. IV tubing for pump
5. 3-way Foley catheter, (insert if not in place per procedure cat05 “Catheterization”)
6. Urinary drainage bag 4000 ml.
7. Alcohol or povidone iodine wipe
8. BD catheter connector from Central Services

PROCEDURE:

1. Preparation of Equipment:
   a. Perform hand hygiene.
   b. Attach urinary drainage bag to outflow lumen of 3 way foley catheter
   c. Spike the Amphotericin B bag with IV tubing. Prime tubing and load into IV pump.

2. Instituting the irrigation:
   a. Place “Not for IV Infusion” sticker at the following areas on the tubing:
      • Distal end, near foley connection
      • Proximal to spike
      • On pump
   b. Place the IV pump with the Amphotericin B at the foot of the bed.
   c. Clean the opening to the inflow lumen of the catheter with the sterile alcohol or povidone-iodine sponge.
   d. Using the BD connector catheter, attach the Amphotericin B tubing to the inflow lumen of the 3 way foley catheter.
      (NOTE: If a #22 hematuria catheter (clear catheter) is used, you may have to cut about 1/8 inch from the inlet to ensure a proper fit).
   e. Program the IV pump to infuse Amphotericin B at the prescribed rate.
   f. Never irrigate catheter with Amphotericin B with Normal Saline, (not compatible). Use sterile water only.
   g. To calculate urinary input and output, subtract the previous eight hours infusion from previous eight hours output to obtain “true urinary output.”
   h. Change tubing every 96 hours.

DOCUMENTATION:

2. Reassessment: Document the procedure, patient’s tolerance, and any other pertinent data regarding the patient’s condition.
3. SCM/electronic Graphic Flowsheet: Record intake of solution into bladder and output of urine as indicated.
REFERENCES:


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APPROVAL:

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