BLOODSTREAM INFECTION (CLABSI) PREVENTION

CENTRAL LINE-ASSOCIATED

improve care, but when applied together, result in eve greater improvement.

Central line-associated bloodstream infections (CLABSIs)

result in thousands of deaths each year and billions of dollars in added costs to the U.S. healthcare system. These infections are preventable. CLABSI Prevention strategies must focus on clear indications for the insertion of a central line and prompt removal when no longer necessary.

INDICATIONS FOR CENTRAL LINE **INSERTION**

- · Administration of blood products and intravenous fluids
- Immediate medication delivery for unstable patients
- Administration of hypertonic solutions
- Administration of vasodilator/vasopressor
- Monitor central venous pressure
- Hemodialysis access
- Prolonged duration of IV fluids

CLABSI PREVENTION INTERVENTIONS

- · Perform hand hygiene by washing hands with soap and water or using an alcohol-based hand product
- Use maximal barrier precautions, including sterile gloves, sterile gown, cap, mask and large sterile full body drape
- Apply a skin cleanser (antiseptic), such as Chlorhexidine Gluconate (CHG)
- Select optimal site for central line; avoid femoral vein
- Evaluate need for central line every day and remove promptly, if required
- Change dressing over central line and replace with clean, dry occlusive dressing, according to schedule

This material was prepared by Health Quality Innovators (HQI), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agenty of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 1250WHQ(IN)-QIO-0383-12/19/22

BUNDLE BASICS

PREVENT

(CLABSI)

INFECTION

BLOODSTREAM

LINE-ASSOCIATED

CENTRAL

Bundles are groupings of best practices that individually improve care, but when applied together, result in ev

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BUNDLE BASICS

Bundles are groupings of best practices that individually improve care, but when applied together, result in eve greater improvement.

successfully reduced CLABSI rates.

during the procedure

must wear cap and mask

not in use during procedure

Maintain sterile field

Ensure venous placement

apply sterile caps on all hubs

TARGETED ASSESSMENT FOR

femoral/PICC (place supine and flat)

procedure and removed post procedure

Prep site with chlorhexidine and let air dry

Clean hands

CLABSIs may be prevented through proper placement and

management of the central line. Facilities have found it useful

to monitor adherence to evidence-based central line insertion

practices as a method for identifying quality improvement

opportunities and strategically targeting interventions. Feedback of adherence data has been an intervention that

CLIP: CENTRAL LINE INSERTION PRACTICES

Wear cap, mask, sterile gown/gloves and eye protection

if in contact with or crossing the sterile field at any time

- All others entering the room during the procedure

Drape patient from head to toe using sterile technique

• Place patient in trendelenburg position unless

Prepare catheter by pre-flushing and clamping all lumens

contraindicated (e.g., increased intracranial pressure) or if

Ensure grasp on guide wire is maintained throughout

Aspirate blood from all lumens, flush and apply sterile

Clean site with chlorhexidine, apply sterile dressing and

· Perform a time out using the informed consent form

BLOODSTREAM INFECTION (CLABSI) PREVENTION CENTRAL LINE-ASSOCIATED

PREVENTION (TAP) STRATEGY TOOLKIT | CDC evidence-based central line insertion improvement opportunities and strategically targeting interventions. Feedback of adherence data has been an intervention that prevented through proper placement and central line. Facilities have found it useful practices as a method for identifying quality successfully reduced CLABSI rates. to monitor adherence to management of the þe may

CLABSIs

CENTRAL LINE INSERTION PRACTICES

Perform a time out using the informed consent form

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Maintain sterile field

flush and apply sterile wire is maintained throughout procedure and removed post procedure lumens, grasp on guide Aspirate blood from all Ensure

Clean site with chlorhexidine, apply sterile dressing and apply sterile caps on all hubs



TARGETED ASSESSMENT FOR PREVENTION (TAP) STRATEGY

venous placement

Ensure \

BUNDLE BASICS

PREVENTION

(CLABSI)

INFECTION

BLOODSTREAM

CENTRAL LINE-ASSOCIATED

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CLIP: CENTRAL LINE INSERTION PRACTICES

- · Perform a time out using the informed consent form
- Clean hands
- Wear cap, mask, sterile gown/gloves and eye protection if in contact with or crossing the sterile field at any time during the procedure
 - All others entering the room during the procedure must wear cap and mask
- Prep site with chlorhexidine and let air dry
- Drape patient from head to toe using sterile technique
- Prepare catheter by pre-flushing and clamping all lumens not in use during procedure
- Place patient in trendelenburg position unless contraindicated (e.g., increased intracranial pressure) or if femoral/PICC (place supine and flat)
- · Maintain sterile field
- Ensure grasp on guide wire is maintained throughout procedure and removed post procedure
- Aspirate blood from all lumens, flush and apply sterile
- Ensure venous placement
- Clean site with chlorhexidine, apply sterile dressing and apply sterile caps on all hubs



TARGETED ASSESSMENT FOR PREVENTION (TAP) STRATEGY TOOLKIT | CDC



CLIP:

Clean hands

if in contact with or crossing the sterile field at any time Wear cap, mask, sterile gown/gloves and during the procedure

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Prepare catheter by pre-flushing and clamping all lumens Drape patient from head to toe using sterile technique Prep site with chlorhexidine and let air dry not in use during procedure

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