

# ELIMINATE HARM ACROSS THE BOARD

## Days Since Last CLABSI

### CENTRAL-LINE ASSOCIATED BLOODSTREAM INFECTION (CLABSI) PREVENTION:

- Implement insertion bundle: procedural pause, hand hygiene, aseptic technique for insertion and care, site selection of subclavian (preferred), internal jugular (acceptable) and avoidance of femoral vein in adults, maximal sterile precautions, skin prep with 2% chlorhexidine
- Implement “stop the line” approach to insertion bundle; if there is an observed violation of infection control practices (maximal sterile barrier precautions, break in sterile technique), line placement should stop and the violation corrected
- Implement insertion checklist to help with compliance and monitoring
- Incorporate daily review of line necessity into workflow, such as charge nurse rounds, electronic health care record prompt
- Adopt maintenance bundle of dressing changes (every seven days for transparent) line changes and IV fluid changes; incorporate into daily assessment and review — can be part of charge nurse checklist along with the daily review of line necessity
- Use a chlorhexidine-impregnated sponge dressing
- Use 2% chlorhexidine-impregnated cloths for daily skin cleansing
- Do not routinely replace CVCs, PICCs, hemodialysis catheters or pulmonary artery catheters
- Use a sutureless securement device
- Use ultrasound guidance to place lines if this technology is available