

CLABSI prevention checklist



It all starts with using all-encompassing bundles for central line insertion and maintenance. What is a bundle? The Institute for Healthcare Improvement defines it as a structured way of improving the processes of care and patient outcomes: a small, straightforward set of evidence-based practices—generally three to five—that, when performed collectively and reliably, have been proven to improve patient outcomes.¹

Bundles help clinicians use standardized products so everyone can easily perform a consistent procedure.



To assist you as you insert and maintain central lines, below **in bold** is the Checklist for Prevention of Central Line-Associated Bloodstream Infections provided by the Centers for Disease Control and Prevention (CDC).² In addition, you'll find helpful tips and products for consideration to help you and your team keep patients safe from CLABSI.

Follow proper insertion practices²

- ✓ **Perform hand hygiene before insertion.**
- ✓ **Adhere to aseptic technique.**
- ✓ **Use maximal sterile barrier precautions (i.e., mask, cap, gown, sterile gloves, and sterile full body drape).**
- ✓ **Choose the best insertion site to minimize infections and noninfectious complications based on individual patient characteristics. (Avoid femoral site in obese adult patients.)**
- ✓ **Prepare the insertion site with >0.5% chlorhexidine with alcohol.**
- ✓ **Place a sterile gauze dressing or a sterile, transparent, semipermeable dressing over the insertion site.**
- ✓ **For patients 18 years of age or older, use a chlorhexidine impregnated dressing with an FDA-cleared label that specifies a clinical indication for reducing CLABSI for short-term non-tunneled catheters unless the facility is demonstrating success at preventing CLABSI with baseline prevention practices.**

Helpful tips

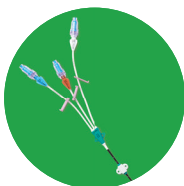
- ✱ Assess patient allergies upfront.
- ✱ Make sure you have all the supplies you need.
- ✱ Place a stop sign on the outside of the door so nobody comes in when you're starting to create a sterile environment.
- ✱ If you have a beard, wear a beard mask.
- ✱ Make sure the patient's body drape is waterproof.
- ✱ Ensure the central venous catheter (CVC) is preflushed and all the lumens are clamped.
- ✱ Use ultrasound guidance to place the line, if possible.

Products to consider



Customized insertion bundle

Everything you need to help prevent cross-contamination



Vantex® Antimicrobial Central Venous Catheter

Uses patented silver ion technology to reduce CLABSI risk³



Aegis CHG-Impregnated Foam Disc

Uses chlorhexidine gluconate (CHG) to inhibit or kill microorganisms on the dressing's surface

Handle and maintain central lines appropriately²

- ✓ **Comply with hand hygiene requirements.**
- ✓ **Bathe ICU patients over 2 months of age with a chlorhexidine preparation on a daily basis.**
- ✓ **Scrub the access port or hub with friction immediately prior to each use with an appropriate antiseptic (chlorhexidine, povidone iodine, an iodophor, or 70% alcohol).**
- ✓ **Use only sterile devices to access catheters.**
- ✓ **Immediately replace dressings that are wet, soiled, or dislodged.**
- ✓ **Perform routine dressing changes using aseptic technique with clean or sterile gloves.**
 - **Change gauze dressings at least every 2 days or semipermeable dressings at least every 7 days.**
 - **For patients 18 years of age or older, use a chlorhexidine impregnated dressing with an FDA-cleared label that specifies a clinical indication for reducing CLABSI for short-term non-tunneled catheters unless the facility is demonstrating success at preventing CLABSI with baseline prevention practices.**
- ✓ **Change administration sets for continuous infusions no more frequently than every 4 days, but at least every 7 days.**
 - **If blood or blood products or fat emulsions are administered, change tubing every 24 hours.**
 - **If propofol is administered, change tubing every 6–12 hours or when the vial is changed.**

Helpful tips

- ✱ Make sure you have all the supplies you need.
- ✱ Ensure you're wearing the right PPE.
- ✱ Educate patients and their families on their roles in maintaining CVC function and protecting the insertion site and dressing.
- ✱ Keep your open lumens covered by injection ports, sterile end-caps or needleless connectors.⁴
- ✱ Assess the catheter site every shift for redness, tenderness, pain or oozing.
- ✱ Document the date and time of each dressing change.
- ✱ Conduct multidisciplinary patient care rounds.
- ✱ Use a central line necessity tracking tool.



Remember to promptly remove unnecessary central lines

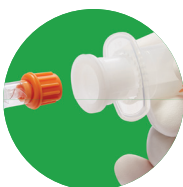
Perform daily audits to assess whether each central line is still needed. Enter reminders in patient records or order sets.

Products to consider



Customized maintenance bundle

Everything you need to help prevent cross-contamination



SwabFlush Pre-Filled Saline Flush Syringe with Disinfection Cap

The only pre-filled flush syringe that integrates a disinfection cap in the plunger; helps drive compliance



SorbaView Shield

The only integrated dressing and securement device; holds central lines in place up to 7 days and peripherals up to 96 hours



Infection Prevention

References: 1. IHI. Improvement Stories. What is a bundle? Retrieved April 6, 2023, from What Is a Bundle? | IHI - Institute for Healthcare Improvement 2. CDC. Checklist for Prevention of Central Line-Associated Bloodstream Infections. Retrieved April 6, 2023, from Microsoft Word - checklist for CLABSI12-11.docx (cdc.gov). 3. Medline Industries, LLP. (2018) Clinical Evidence: Central Line Bundles and Vantex Antimicrobial Catheter. https://www.medline.com/wp-content/uploads/2020/12/Vascular-Access_Clinical-Evidence-Packet.pdf 4. The Joint Commission. (2013, November 20). Preventing Central Line-Associated Bloodstream Infections: Useful Tools, An International Perspective. https://www.jointcommission.org/clabsi_toolkit_tool_3-22_cvc_maintenance_bundles.pdf

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