Reducing the Risk of Central Line Associated Blood Stream Infections in the Perioperative Setting

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Central Line Associated Blood Stream Infections (CLABSIs) are serious complications causing a prolonged hospital stay, increased cost and mortality risk. Evidence indicates CLABSIs can be prevented through proper insertion and care of central lines. The perioperative complex is not an identified target area for counting catheter days, but is important for periop clinicians to use best practices when managing central lines.

We set out to implement a series of best practices in the periop setting in order to reduce any contribution to the hospital CLABSI rate. Our metric was the number of CLABSI infections that occurred in patients who visited the periop complex within 72 hours of developing a fever.

Collaborating with the process improvement department, we implemented the hub scrub, self assessments of infusaport access technique and simulations of central line dressing changes. We developed a policy with anesthesia directing the management of central lines in the OR and the PACU. Multidisciplinary bedside rounds are held whenever a CLABSI is identified in a patient who was through the OR.

Since implementing these practices, we have seen a reduction in the number of CLABSIs associated with periop. This has tremendous implications for reduced costs and improved patient outcomes. There has also been an increase in accountability among periop clinicians who now view themselves as more integral to the total patient stay beyond the day of surgery.