CENTRAL LINE-ASSOCIATED BLOODSTREAM INFECTION (CLABSI) PREVENTION BUNDLE

INSERTION OF CENTRAL LINE

- Appropriate Site Selection
 - Based on patient needs and condition (femoral avoided if possible)
- Use Aseptic Technique
 - Hand hygiene
 - Central Line Insertion Kit
 - Full sterile barrier
 - Proceduralist and assistant: Cap, mask, sterile gloves, sterile gown
 - Nursing and other personnel in room: Cap, mask
 - Patient: Sterile full body drape, mask if appropriate
 - CHG scrub prep unless contraindicated; allow to dry
 - Sterile dressing after insertion
- Complete Time Out and Procedure Form
- Insertion Training for All Providers

MAINTENANCE OF CENTRAL LINE

- Remove Central Line When No Longer Needed
 - Daily discussion of need, functionality
- Daily CHG Application unless Contraindicated
- Standardized Assessment and Dressing Changes
 - Assess site at least each shift, including catheter and dressing
 - Sterile dressing changes using CHG impregnated dressings for all patients >2 months of age (corrected), unless contraindicated
 - Every 7 days for transparent/every 2 days for gauze OR if damp, soiled, non-occlusive
 - ONLY when damp, soiled, non-occlusive for NICU PICC lines
- Standardized Access Procedure
 - Perform hand hygiene and don clean gloves immediately before contacting site
 - Prior to access, scrub to disinfect access port with CHG (5 times around, 5 times across) and allow to dry
 - Minimize access and bundle labs
- Standardized Tubing, Needleless Devices and Fluid Changes Per Protocol



