



Maintained Low Rate of Catheter-Related Bloodstream Infections (CR-BSIs) After Discontinuation of a Luer Access Device (LAD) At an Academic Medical Center

C Moore, RN, MBA, CIC; R Landreth, RN, CIC; C Maschmeier, MT, (ASCP) SM, CIC; K Snyder, RN, MS, CCRN, CCNS; G Priestley, RN, MSN, CCRN; A Muzzy, RN, MSN, CCRN; S Elliott, MD, FAAP



There are no Financial Disclosures

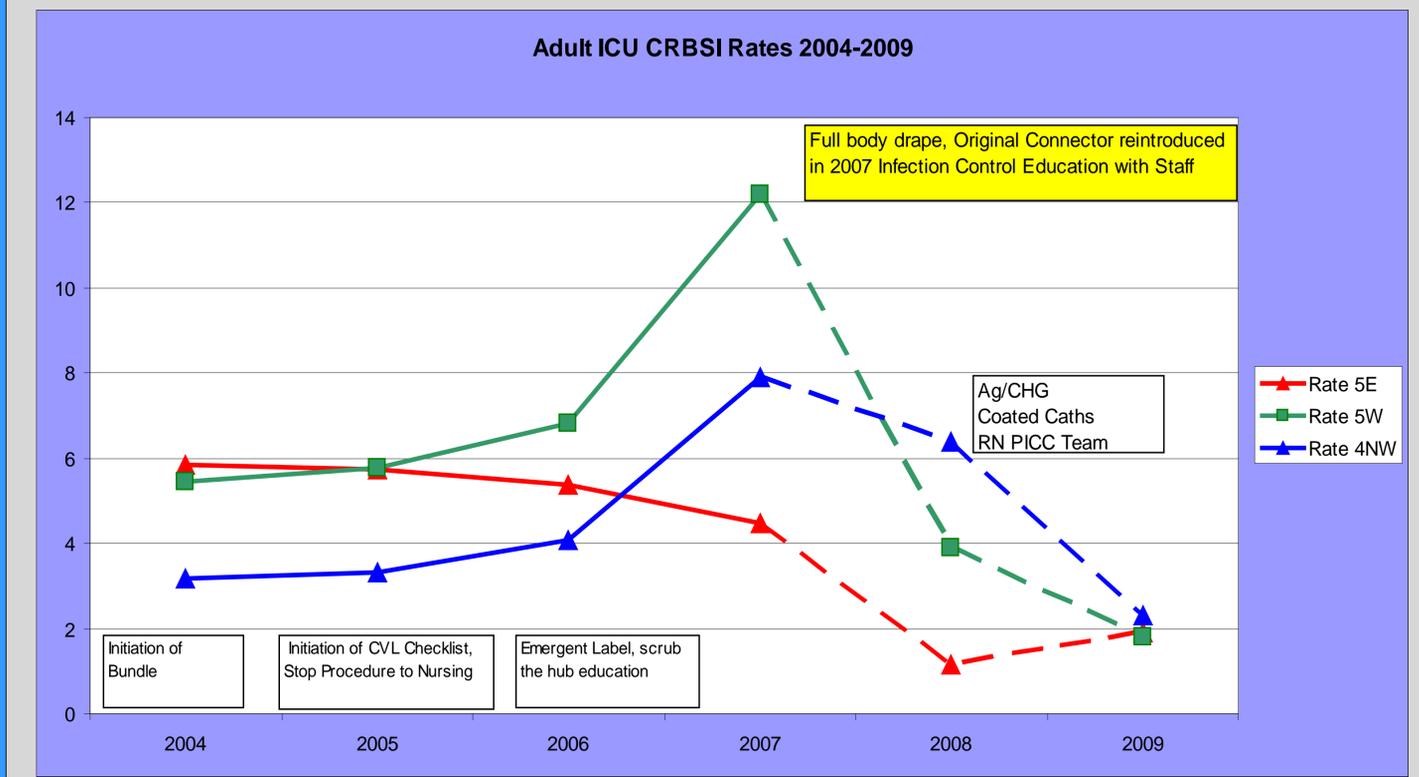
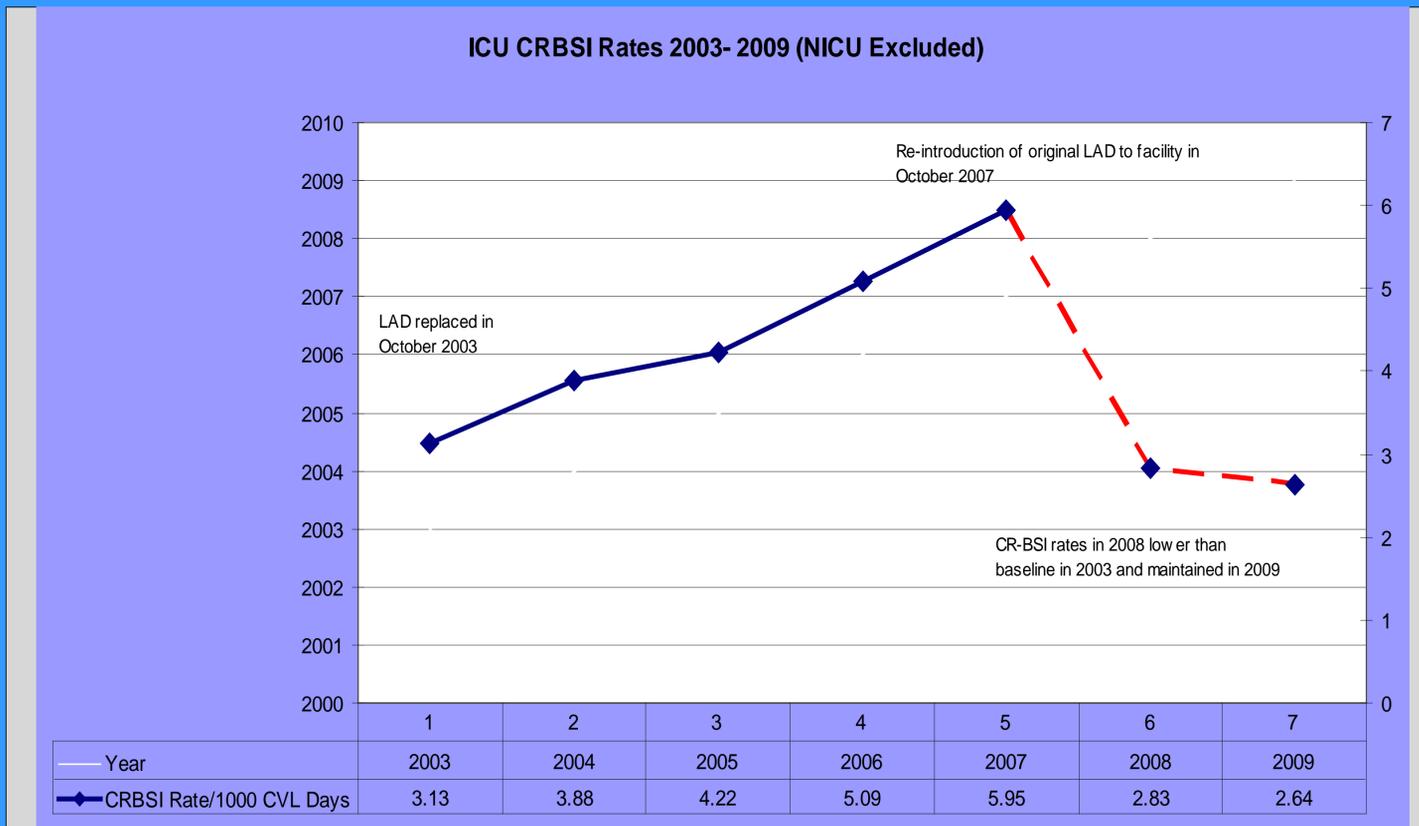
Background: In 2007 we discontinued a luer access device (LAD) when we found a steady increase in catheter-related bloodstream infections to be temporally associated with the switch to that specific LAD

Objective: Compare rates for CRBSI after returning to our original LAD.

Methods: CRBSIs continued to be identified using CDC-NNIS (NHSN) definitions. There were no changes in policies, procedures regarding access of device, or surveillance methods at the time. Hand hygiene compliance continued to be monitored as well as compliance with the Institute for Healthcare Improvement (IHI) Central Line Bundle.

Results: The rate of catheter related blood stream infections declined in 2008 (2.83 infections per 1000 central line catheter days) and further improved in 2009 (2.64 infections per 1000 central line catheter days) after: 1) reintroduction of the original LAD to the institution, 2) continued compliance with hand hygiene and 3) continued compliance with the Institute for Healthcare Improvement (IHI) Central Line Bundle.

Conclusions: Our findings are consistent with recent publications stating a significant association between the increase in CRBSIs and the use of a LAD and a return to baseline rates after re-introduction of the former LAD to the facility.



METHODS

CRBSIs continued to be identified using CDC-NNIS (NHSN) definitions. There were no changes in policies, procedures regarding access of device, or surveillance methods at the time. Hand hygiene compliance continued to be monitored as well as compliance with the Institute for Healthcare Improvement (IHI) Central Line Bundle.



Clave (Original LAD)



ICU Medical, Inc.

RESULTS

The rate of catheter related blood stream infections declined in 2008 (2.83 infections per 1000 central line catheter days) and further improved in 2009 (2.64 infections per 1000 central line catheter days) after: 1) reintroduction of the original LAD to the institution, 2) continued compliance with hand hygiene and 3) continued compliance with the Institute for Healthcare Improvement (IHI) Central Line Bundle.