

Successful Implementation of Targeted Interventions to Achieve a Target of Zero CLABSI Events in Oncology Patients



A. Al Saedi, W. Jasthaniah, M. Bhutta, M. Yaseen*,
E. Lou Tana, O. Abuskout, O. Younis, M. Daniel, M.
Al Shamrani

King Abdulaziz Medical City

Background/Purpose: Central line-associated bloodstream infections (CLABSIs) are one of the potentially life-threatening complications occurring in patients with cancers. Those central lines are usually required in these patients for prolonged durations. The purpose of this study was to identify and implement multiple interventions for the prevention of CLABSI in these patients.

Methods: A multidisciplinary task force was created to identify and implement evidence based interventions to achieve a target of zero CLABSI in both Adult and Pediatric Oncology patients. Monitoring of CLABSI and Central Line bundle also continued as it was being done before creation of the taskforce. Those interventions

were introduced at three levels of line management: pre-insertion, during insertion and post insertions of central lines. The data was collected on a daily basis with analysis and reporting on a quarterly basis.

Results: In adults patients, the quarterly rate of CLABSI in the four quarters of 2017 was 1.9, 1.9, 1.3 and 2.1 per 1000 line days respectively. The overall annual rate in the year 2017 was 1.8 per 1000 line days with total of seven CLABSI events and 3875 central lines days. For paediatric patients, the quarterly rate of CLABSI in the four quarters of 2017 was 1.3, 1.2, 1.2 and 1.1 per 1000 line days respectively. The overall annual rate in the year 2017 was 1.2 per 1000 line days with total of eight CLABSI events and 6638 central lines days. As a result of interventions, no CLABSI events were observed in both adult and paediatric patients in the first two quarters of 2018.

Conclusion: A collaborated effort by the dedicated multidisciplinary team resulted in achieving the desired result. The targeted interventions resulted in achieving the ultimate goal of zero CLABSI in high risk oncology patients.

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