

Instructions for what to do when someone gets admitted

When you hear about a patient who has been admitted to the hospital and may have had a CLABSI, reach out to the infection preventionists and healthcare epidemiology department first. Closer to the time of discharge, reach out to the home care coordinators. You have three goals:

- 1. To determine whether the patient has a CLABSI.**
- 2. To gather information helpful for a root cause analysis about what could have contributed to the CLABSI.**
- 3. To work with the hospital team on strategies to reduce CLABSIs for that patient in the future.**

To determine whether the patient has a CLABSI, ask the healthcare epidemiology department or infection prevention department for the following pieces of information:

- Information on blood cultures sent within the week of admission
- Information on radiology reports within the first two weeks of admission
- Information on surgical or procedure notes from the first two weeks of admission
- Clinical notes including documentation of symptoms within the first week of admission
- Flow sheets and records of vital signs within the first week of admission
- Culture data from other sources within the first two weeks of admission
- Echocardiology reports within the first two weeks of admission

As the data here is for use in medical care and quality improvement, you do not need a signed consent from the patient to access this data.

To gather information helpful for a root cause analysis about what could have contributed to a CLABSI, use the root cause analysis (RCA) form. Use the details available from infection prevention and healthcare epidemiology as well as home care coordinators and complete the remainder of the form. You may need to get additional information from the home nursing or the home infusion agency.

To work with the hospital team about strategies to reduce CLABSIs in that patient in the future, work with your hospital colleagues to help you implement strategies to reduce CLABSIs.

1. Admissions for CLABSI may be an opportunity to re-evaluate the need for the therapy requiring the central venous catheter. Consider talking about the need for the therapy with members of the treating team.
2. Learn whether the patient had the central venous catheter removed and replaced.
3. Investigate risk factors for the patient based on the results of the RCA.
4. Work with the inpatient team or liaisons to implement tools and strategies to reduce the risk of CLABSI based on the results of the RCA.