



Appendix 1

**This appendix was part of the submitted manuscript and has been peer reviewed.
It is posted as supplied by the authors.**

Appendix to: Entesari-Tatafi D, Orford N, Bailey MJ, et al. Effectiveness of a care bundle to reduce central line-associated bloodstream infections. *Med J Aust* 2015; 202: 247-249. doi: 10.5694/mja14.01644.

Appendix 1

Central Line-Associated Bloodstream Infection (CLABSI) Prevention Program

Insertion Standard Operating Procedure

- Informal training of all physician prior to accreditation for central venous catheter (CVC) insertion
- Trolley is cleaned and set just prior to CVC insertion
 - Dedicated CVC Insertion Pack design with an uncoated CVC
- Operator washes hands for 2 minutes
- Wears sterile gown, gloves, mask and hat
- Assistant wears mask and hat
- Washes site for 2 minutes using 2 per cent chlorhexidine and allows to dry for 30 seconds
- Covers with full body drapes
- Internal jugular preferred insertion
- Maintains a sterile field and technique
- Dressing as per policy.

Maintenance

- Use of Bio-patch® (as reported in 2009 Quality Report)
- Sterile line access
 - Awareness program for staff in the appropriate access and management of CVCs and Vascaths using aseptic technique and hand washing
 - The implementation of Luer lock syringe to prevent “bounce back” off the syringe when accessing the line and increasing the potential for infection
- Use of daily 2% chlorhexidine body wash
- CVC reviewed daily at ICU medical rounds, removal if possible
- Liaison Nurse service following all patients on wards with CVC insitu