



DEDER GENERAL HOSPITAL

Standard Operating Procedures (SOP) for Prevention of Vascular Catheter-Associated Bloodstream Infections (**CLABSI**)

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Prepared By: Ibrahim Tahir (BSc)-IPC focal Person

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Deder, Oromia

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1. Purpose

To reduce the risk of CLABSI through standardized care practices during insertion and maintenance of central venous catheters (CVCs).

2. Scope

Applies to all healthcare workers (HCWs) involved in the insertion, handling, maintenance, and removal of central lines.

3. Responsibilities

- **Healthcare Providers:** Follow aseptic technique and catheter care bundle.
- **IPC Team:** Train and monitor compliance with CLABSI prevention practices.
- **Nursing Staff:** Perform line maintenance, assess for signs of infection, and document.

4. Definitions

- **CLABSI:** Laboratory-confirmed bloodstream infection in a patient with a central line.
- **CVC:** Catheter placed in a large vein, used for long-term infusion or monitoring.

5. Insertion Protocol

5.1 Indication and Site Selection

- ☒ Use central lines only when absolutely necessary.
- ☒ Prefer subclavian site (adult) to reduce infection risk.

5.2 Insertion Bundle (Strict Asepsis)

- ☒ Perform hand hygiene before the procedure.
- ☒ Use full-barrier precautions (cap, mask, sterile gown, gloves, and large drape).
- ☒ Apply 2% chlorhexidine with alcohol to clean insertion site.
- ☒ Use ultrasound guidance to minimize complications.
- ☒ Document insertion details.

6. Catheter Maintenance

6.1 Daily Review

- ☒ Assess necessity of catheter daily and remove if no longer needed.

6.2 Site Care

- ☒ Clean site with 2% chlorhexidine daily and during dressing changes.
- ☒ Replace transparent dressings every 7 days or when soiled/loose.

- Use sterile technique for dressing changes.

6.3 Access Port Care

- Disinfect catheter hubs and injection ports with alcohol before access.
- Use needleless connectors as per facility protocol.

6.4 Flushing and Locking

- Use aseptic technique for flushing.
- Follow facility guidelines for heparin or saline locking.

7. Education and Training

- Train all personnel on CLABSI bundle.
- Annual competency checks and refresher training.

8. Monitoring and Audit

- Daily checklist for insertion and maintenance compliance.
- Report all CLABSI cases to IPC.
- Conduct root cause analysis for each CLABSI incident.

9. Documentation

- Maintain CVC insertion and maintenance log.
- Document dressing changes, assessments, and any complications.

10. References

1. MOH IPC Manual - Vol 1]
2. CDC Guidelines for the Prevention of Intravascular Catheter-Related Infections
3. WHO Guidelines on Hand Hygiene in Health Care