The CLABSI surveillance and prevention program focusing on patient safety had a significant impact on CLABSI rates" Castagna et al (2016).

Abstract:

We performed a quasi-experimental, cohort study in the medical-surgical inpatient wards comparing central line–associated bloodstream infection (CLABSI) rates and microbiologic characteristics in 3 phases. The CLABSI rates decreased 60% from phase 1 to 2 and 61.5% from phase 2 to 3. Gram-positive organisms were most frequently isolated in phases 1 and 3, and gram-negative bacilli were most frequently isolated in phase 2. The CLABSI surveillance and prevention program focusing on patient safety had a significant impact on CLABSI rates.

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Reference:

Castagna, H.M.F., Kawagoe, J.Y., Gonçalves, P., Menezes, F.G., Toniolo, A.R., Silva, C.V., Cardoso, M.F.S., Santos, C.M. and Correa, L. (2016) Active surveillance and safety organizational goals to reduce central line–associated bloodstream infections outside the intensive care unit: 9 years of experience. American Journal of Infection Control. May 5th. .

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