“The aim was to implement the use of the StatLock device and evaluate its effects on the following 4 outcomes: incidence of dislodgement, infection, catheter dwell time, and the number of catheter replacements.” Waterhouse et al (2014).

Reference:


Stabilization device for patients with peripherally inserted central catheters
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Abstract:

OBJECTIVES: This project evaluated the implementation of use of the StatLock stabilization device (Bard Access Systems, Inc, Salt Lake City, Utah) for peripherally inserted central catheters (PICCs) in pediatric cardiology patients. The aim was to implement the use of the StatLock device and evaluate its effects on the following 4 outcomes: incidence of dislodgement, infection, catheter dwell time, and the number of catheter replacements. The primary goal was to determine whether the StatLock device offered advantages over tape and sutures.
METHODS: A quality improvement design was used to evaluate whether the use of the StatLock stabilization device for PICC securement on 30 pediatric cardiology patients decreased the number of PICC complications compared with 30 historical comparison patients.

RESULTS: The comparison group had a significantly higher number of catheter dislodgements (n = 16; 59.3%) than the StatLock group (n = 8; 30.8%; P = .035). The comparison group did not have a significantly higher number of catheter replacements (n = 16; 59.3%) than the StatLock group (n = 10; 34.5%; P = .10). No significant differences were found in the rate of infection or in the catheter dwell time between the 2 groups (StatLock group, mean ± SD = 33.13 ± 22.71 days; comparison group, mean ± SD = 28.10 ± 24.83 days; P > .20).

CONCLUSIONS: Use of the StatLock device resulted in better outcomes when compared with the use of sutures, and it provided a more effective way to stabilize and secure PICCs.

Other intravenous and vascular access resources that may be of interest (External links - IVTEAM has no responsibility for content).