

The aim was to reduce the incidence of central line-associated bloodstream infections in a hematology-oncology unit through the staff’s continued adherence to the institution’s protocol for CHG baths with wipes, and to identify barriers and the degree to which they interfered with optimal use of the CHG wipes” Jusino-Leon et al (2019).

Abstract:

BACKGROUND: Chlorhexidine gluconate (CHG) has a broad-spectrum antimicrobial property that has proven to be effective in prolonging skin antisepsis and decreasing pathogens often seen in oncology units.

OBJECTIVES: The aim was to reduce the incidence of central line-associated bloodstream infections in a hematology-oncology unit through the staff’s continued adherence to the institution’s protocol for CHG baths with wipes, and to identify barriers and the degree to which they interfered with optimal use of the CHG wipes.

METHODS: The project focused on supporting staff and nurses by providing education and training on current practices to staff and patients, and identifying barriers. Direct observation and chart audits were the approach chosen to implement the project.

FINDINGS: For the project study period, the unit had three nonpreventable bloodstream infections and zero preventable bloodstream infections.

You may also be interested in...

Reference:

Jusino-Leon, G.N., Matheson, L. and Forsythe, L. (2019) Chlorhexidine Gluconate Baths:



Supporting Daily Use to Reduce Central Line-Associated Bloodstream Infections Affecting Immunocompromised Patients. *Clinical Journal of Oncology Nursing*. 23(2), p.E32-E38. doi: 10.1188/19.CJON.E32-E38.