

**Abstract:**

**Background:** The majority of patients admitted to intensive care units (ICU) require central venous catheters (CVC) for medication delivery, monitoring and blood draws. Repeated access of CVCs for collection of blood can cause central line associated bloodstream infection (CLABSI). If the number of times CVCs accessed for routine blood draws can be limited, the incidence of CLABSI in ICUs could be decreased.

**Objective:** The focus of this quality improvement (QI) project was to decrease the CLABSI rate through limiting the use of and standardizing the process for routine blood draws through CVCs.

**Methods:** All nursing staff were educated on the process change. Pre and post education CLABSI rates were compared to measure the outcome.

**Results:** The number of times CVCs accessed for routine blood work and CLABSI rate decreased after the intervention.

**Conclusion:** The data collected supported that decreasing the use of CVCs for routine blood draws can decrease the number of times CVCs are accessed per shift and decrease the CLABSI rate.

**Implications for nursing:** Nurses are at the front line in preventing, reducing, and sustaining zero CLABSI rate through implementing evidence based practices.

**Reference:**

Kuriakose L. Decreasing Central Line Associated Bloodstream Infection Through Limiting the Use of Central Venous Catheters for Routine Blood Draws. *J Dr Nurs Pract.* 2020;13(2):173-183. doi:10.1891/JDNP-D-19-00071