

Standardized flushing and single-use prefilled flush syringes are effective in reducing CLABSI rates in PHO patients” Gerçeker et al (2018).

Abstract

PURPOSE: To compare standardized flushing methods with aseptic non-touch technique; (1) Manually prepared syringes (2) Single-use prefilled flush syringes.

METHOD: Forty-eight PHO patients with Hickman or Port catheters were recruited to participate in a prospective, randomized study. Standardized flushing methods with aseptic non-touch technique (ANTT) using single-use pre-filled flush syringes (intervention group) or manually prepared syringes (control group) also included the pulsatile technique, use of 10-mL syringe size with 0.9% NaCl for flushing, flushing once a day, flushing training of the nurses. The effects of standardized flushing methods on occlusion and CLABSI evaluated.

RESULTS: Of the patients in the intervention group, 8.7% (n: 2) had catheter occlusion, while this rate was 20.0% (n: 5) in the control group. Of the patients in the intervention group, 8.7% (n: 2) had CLABSI, while this rate was 36.0% (n: 9) in the control group. While there was no difference in occlusion, there was a difference between the groups in terms of CLABSI development. In the intervention group, CLABSI rate was 1.9/1000 per catheter-days, in the control group CLABSI rate was 10.1/1000 per catheter-days. In the intervention group, occlusion rate was 1.9/1000 per catheter-days, in the control group, occlusion rate was 5.6/1000 per catheter-days.

CONCLUSION: Standardized flushing and single-use prefilled flush syringes are effective in reducing CLABSI rates in PHO patients.

Reference:

Gerçeker, G.Ö., Sevgili, S.A. and Yardımcı, F. (2018) Impact of flushing with aseptic non-touch technique using pre-filled flush or manually prepared syringes on central venous catheter occlusion and bloodstream infections in pediatric hemato-oncology patients: A randomized controlled study. *European Journal of Oncology Nursing*. 33, p.78-84.



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