



“Our aim was to adapt recommendations from high-quality, evidence-based clinical practice guidelines (CPGs) for central vascular access device (CVAD) insertion, management, and removal in King Saud University Medical City.” Ciocson et al (2014).

Reference:

Ciocson, M.A.F.R, Hernandez, M.G., Atallah, M. and Amer, Y.S. (2014) Central Vascular Access Device: An Adapted Evidence-Based Clinical Practice Guideline. The Journal of the Association for Vascular Access. 19(4), p.221-237.

Evidence-based guidelines for CVAD insertion, management and removal
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Abstract:


Background: Our aim was to adapt recommendations from high-quality, evidence-based clinical practice guidelines (CPGs) for central vascular access device (CVAD) insertion, management, and removal in King Saud University Medical City. Currently, the hospital has a policy and procedure for CVAD insertion; however, the methodology of creating the policy document was not evidence-based, and the clinical content was not up to date. A new CPG will guide the revision of CVAD policies and procedures and eliminate variation in clinician practices.

Methods: The King Saud University Medical City CPG Committee introduced the modified ADAPTE process methodology for adaptation and implementation of CPGs originally developed by the ADAPTE Collaboration.

Results: The final decision of the panel after full assessment of 2 selected source CPGs was to adopt all Centers for Disease Control and Prevention CPG recommendations and some essential sections from the Infusion Nurses Society CPG recommendations. In addition, the team developed new implementation tools.

Conclusions: The ADAPTE process is an excellent scientific and rigorous process for CPG adaptation and clinical performance improvement. It can be further adapted according to the local context and resources to promote a sense of ownership of the adapted CPG. Furthermore, new CPGs will have a positive effect on hospital-wide accreditation processes and local benchmarking of health care quality outcomes.

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