Central line-associated bloodstream infections (CLABSI) account for one-third of all hospital-acquired infections and can cost the health care system between $21,000 and $100,000 per infection” Savage et al (2019).

Abstract:

Central line-associated bloodstream infections (CLABSI) account for one-third of all hospital-acquired infections and can cost the health care system between $21,000 and $100,000 per infection. A dedicated vascular access team (VAT) can help develop, implement, and standardize policies and procedures for central line usage that address insertion, maintenance, and removal as well as educate nursing staff and physicians. This article presents how 1 hospital developed a VAT and implemented evidence-based guidelines. Central line utilization decreased by 45.2%, and CLABSI incidence decreased by 90%. The results of the study demonstrated that a reduced utilization of central lines minimized the risk of patients developing a CLABSI.

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