



In addition, CVCs were always placed by doctors, while PICCS were mainly placed by nurses. Our results suggest better adherence with CLIP by nurses than by doctors” Chen et al (2018).

Extract:

To the Editor—Two types of common central venous central lines (CL), peripherally inserted central catheters (PICC) and central venous catheters (CVC), are widely applied in the care of patients with severe diseases treated in surgical, intensive care, oncological and hematological units. 1 , 2

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In addition, invasive procedure for PICC and CVC could result in central-line-associated bloodstream infections (CLABSIs), leading to significant morbidity, mortality, and cost among hospitalized patients. 3 Strict compliance with central-line insertion practices (CLIP), including hand hygiene, proper use of a skin antiseptic prior to insertion, skin preparation agent completely dried before insertion, and application of maximal sterile barriers (MSB) during insertion, 4 would significantly decrease the risk of subsequent CLABSIs. 5 However, CLIP adherence in China has not been reported. In this study, we first performed a prospective multicenter study using a cell-phone app (cf, software application) to assess CLIP adherence

for PICC and CVC insertions in Jiangsu Province in China from March 1 through March 31, 2017. During the study period, 12 of 13 cities (92.3%) and 50 general hospitals were included in this study. WeChat (www.Tencent.com) and contact groups were applied to train all the investigators online to achieve homogeneity. All investigators observed all PICC and CVC procedures and uploaded the data to the terminal database via an app installed in a cell phone.

This study included 1,377 PICC insertions (tertiary general hospitals, 1,148 insertions, 83.4%; secondary general hospitals, 229 insertions, 16.6%) and 2,304 CVC insertions (tertiary general hospitals, 1,980 insertions, 85.9%; secondary general hospitals, 324 insertions, 14.1%). Compared to CVC insertions, adherence to hand hygiene and complete drying of the skin disinfectant before insertion were significantly greater with PICC insertions ($P < .001$) (Table 1). In addition, CVCs were always placed by doctors, while PICCs were mainly placed by nurses. Our results suggest better adherence with CLIP by nurses than by doctors.

Reference:

Chen, W., Yang, Y., Li, H., Huang, X. and Zhang, W. (2017) Adherence to Central-Line Insertion Practices (CLIP) with Peripherally Inserted Central Catheters (PICC) and Central Venous Catheters (CVC): A Prospective Study of 50 Hospitals in China. *Infection Control and Hospital Epidemiology*. 39(1), p.122-123.

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