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Reducing Blood Stream Infections from Tunneled Dialysis Catheters

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The purpose of this evidence-based practice project is to reduce blood stream infections related to tunneled dialysis catheters through implementation of aseptic techniques including sterile dressing changes. The goal is to reduce access-related BSIs by 50% compared to FY16 results. Pre-measurement data revealed that 15 BSI's (15 BSI's/505 catheter months = 2.97%) related to the tunneled dialysis catheter occurred in FY16. A 6 month pilot (January 1, 2017 - June 30, 2017) was conducted in a 24 chair hemodialysis facility and involved pre-education on sterile dressing change technique taught to RN staff who completed all dressing changes. Pilot data outcomes revealed 3 BSI's related to the tunneled dialysis catheter (3 BSI's/207 catheter months = 1.44%). The reduction goal was achieved in the pilot. The importance of BSI reduction is relevant to nephrology nurse practice related to delegation and infection prevention. The potential for reduction of BSI's and subsequent life-threatening infections impacts patient's quality of life, health care finances and mortality. Nursing's role in critical thinking is essential in understanding BSI potential impacted by delegation and procedural care. Routine care can be critical care dependent on the care setting and patient factors. Nephrology nurses are essential to understanding risk factors and continuing performance improvement in BSI reduction.

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