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Nursing Approaches to Preventing Central Line-Associated Bloodstream Infections (CLABSI) in the ICU

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Introduction

Central Line-Associated Bloodstream Infections (CLABSI) remain one of the most significant concerns in intensive care units (ICUs) worldwide, representing a major cause of morbidity, mortality, and increased healthcare costs. These infections typically occur when a Central Venous Catheter (CVC) becomes contaminated, introducing pathogens into the bloodstream. Due to the high acuity of patients in the ICU, who often require central lines for various therapeutic and diagnostic purposes, preventing CLABSI has become a critical focus for healthcare providers. Nurses, as key members of the multidisciplinary ICU team, play an essential role in implementing strategies to prevent CLABSI. Their involvement spans a wide range of responsibilities, including proper insertion techniques, maintenance of sterile procedures, patient monitoring, and education. Evidence-based nursing interventions, such as adhering to strict hand hygiene protocols, ensuring appropriate catheter care and dressing changes, and implementing bundles of care, are fundamental in reducing the incidence of CLABSI. This paper explores the various nursing approaches and best practices aimed at preventing CLABSI in ICU settings. Emphasizing prevention, early detection, and the importance of nursing vigilance, this discussion highlights how nursing practices, when combined with interdisciplinary collaboration, can significantly reduce the risk of infection and improve patient outcomes [1].

Description

Central Line-Associated Bloodstream Infections (CLABSI) is a significant and preventable source of morbidity and mortality in intensive care units (ICUs). A CLABSI occurs when a pathogen is introduced into the bloodstream through a central venous catheter, a device commonly used in critically ill patients for administering medications, fluids, blood products, and measuring central venous pressure. In ICU settings, where patients are often in a highly vulnerable state, the risk of infection is heightened due to the prolonged use of central lines, invasive procedures, and a compromised immune system. The presence of a CVC provides a direct conduit for microorganisms to enter the bloodstream, making it essential to adopt comprehensive strategies for preventing CLABSI. The impact of CLABSI is substantial, as it is associated with increased patient morbidity, prolonged hospital stays, a rise in healthcare costs, and higher mortality rates. According to the Centers for Disease Control and Prevention (CDC), CLABSI remains a major cause of healthcareassociated infections (HAIs) in ICU patients, despite the availability of prevention guidelines. In the ICU, CLABSI rates can be especially high due to the complex nature of patient care, the use of multiple invasive devices, and the critical condition of many patients. Nurses are integral in the prevention of CLABSI. As frontline providers in the ICU, nurses are responsible for a wide array of duties related to the care and maintenance of central venous *Address for Correspondence: Valeria Isabel, Department of Nursing, Lithuanian University of Health Sciences, Kaunas, Lithuania, E-mail: Isabel.valeria@kaunas.

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catheters. These duties not only include the direct application of infection control measures but also involve educating patients and their families about the risks associated with central lines and the importance of infection prevention [2].

Choosing the appropriate insertion site for the central venous catheter is another critical nursing responsibility in preventing CLABSI. The subclavian vein is generally preferred over the jugular or femoral veins because it is associated with a lower risk of infection. Additionally, nurses must monitor the catheter insertion site regularly for signs of infection, such as redness, swelling, or discharge, and promptly report any abnormalities to the healthcare team. The implementation of "bundles" — a set of evidence-based practices delivered together has been shown to significantly reduce CLABSI rates.

Conclusion

Central Line-Associated Bloodstream Infections (CLABSI) present a significant challenge in ICU care, but with rigorous infection control practices, the incidence of CLABSI can be dramatically reduced. Nurses play an essential role in the prevention of these infections, from ensuring proper aseptic technique and hand hygiene to educating patients and collaborating with the healthcare team to implement evidence-based interventions. By adhering to best practices, such as the use of central line care bundles and skin antisepsis, nurses can help minimize the risk of CLABSI and improve patient outcomes in the ICU. Their vigilance, expertise, and proactive approach to care are vital in preventing these infections and enhancing patient safety.

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