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STRATEGIES TO PREVENT **CENTRAL VENOUS CATHETER**-RELATED BLOODSTREAM **INFECTIONS**



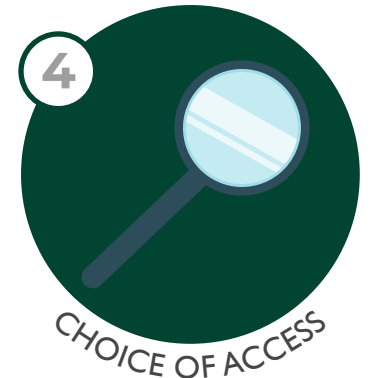
► Proper hand hygiene should be performed before and after handling the catheter and the insertion site.



► Before catheter insertion and during dressing changes: cleaning with 2% aqueous or 0.5% alcoholic chlorhexidine preparation.



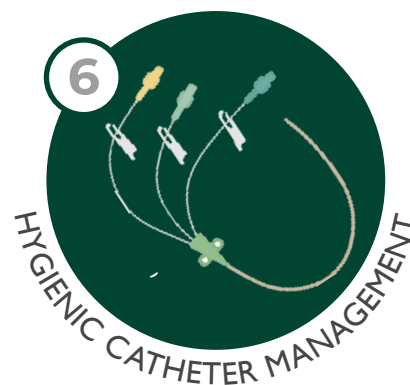
► Adoption of maximum sterility barriers: cap, mask, sterile gown, sterile gloves, large sterile drape covering the patient and sterile cover for the ultrasound machine.



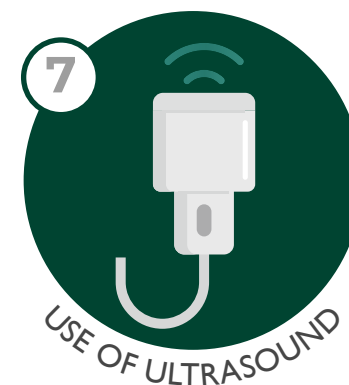
► The subclavian vein is the most commonly used to control infection, although more factors must be considered, such as possible mechanical complications. When the subclavian route is contraindicated, the choice between the femoral vein or internal jugular vein should be made according to the patient's body mass.



► The duration of catheterisation is related to the occurrence of CRB, therefore, whenever possible, unnecessary catheters should be removed.



► Reduce the handling of connections to the absolute minimum.
► Clean the catheter injection sites with 70° isopropyl alcohol before accessing the venous system.



► Its use makes it easier to locate the vein and to measure the depth to which the catheter is introduced.
► Reduces errors and complications during puncture.

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