



CENTRAL LINE INFECTION PREVENTION CHECK LIST

Goal Who What Where When How	To decrease patient harm from catheter-related blood stream in An operator & a monitor. Assure compliance with and documentation of checklist eleme. At the site of the procedure. During all central venous line insertions or rewires. The monitor verifies that the steps have occurred, immediately the operator/supervisor of deviations, & completes the checkles of the clinician placing the central line. Supervisor: an experienced operator who is involved in training the central line of the control o	ents y informs ist		•
	<u>Monitor</u> : an individual who is qualified to observe the procedu technique is observed, the monitor asks the operator to repea			
Please identify a monitor for this line placement prior to the time out.				
Procedure Planning Line Insertion Site: Subclavian Internal Jugular Femoral PICC UA/UV Other (specify)				
LINE	Yes No	<u> </u>		Comments/Reason
Emerge	ent placement			,
Timeout documented separately				
	nt documented separately			
If there is a deviation in any of the critical steps, immediately notify the operator and stop the procedure until corrected. If the step is completed properly, check the "Yes" box. If the step is not completed properly, check the "No" box and note the issue in the "Comments/Reason" section. Contact the Attending if any item on the checklist is not adhered to or with any concerns.				
	Critical Step for Line Insertion	Yes	No	Comments/Reason
	the procedure, the operator will:	ior 🗇	1	
Confirm hand sanitizing (Cal Stat) or antimicrobial soap immediately prior				
Disinfect procedure site (chlorhexidine) using a back & forth friction scrub for 30 seconds. In patients < 2 months of age, use povidone iodine instead of chlorhexidine.				
Allow site to dry for 30 seconds				
Operator(s): hat, mask, sterile gown/gloves, eye protection				
Assistant/Monitor: hat, mask & standard precautions (if at risk for entering sterile field use sterile gown/gloves)				
Use sterile technique to drape from head to toe; Pediatrics use judgment to determine extent of draping.				
During	the procedure, the operator will:			
Maintaiı	n a sterile field			
Limit ne	eedle stick attempts to <=3 per operator			
Confirm that the wire is in the vein prior to dilation using ultrasound or manometry				
Flush and cap line before removal of drapes				
After th	e procedure, the operator will:			
Confirm	n that guidewire has been removed and is intact			
Remove blood with antiseptic agent (chlorhexidine), if present. Use sterile water/saline for infants <2 mos. Place Biopatch around catheter at insertion site before placement of sterile dressing (exclusions pre-term and infants < 2 mos., tunneled dialysis catheters).			_	
	ppropriate (green = all "yes", red = 1 or more "no") ticker on patient's line			
Date &	Time:	Unit:		
Operato	I	Monitor:		Credentials