(OAKBROOK TERRACE, Ill. – May 16, 2012) Central line-associated bloodstream infections (CLABSIs) are a serious form of health care-associated infections (HAIs), with a mortality rate of 12 to 25 percent in the United States alone. Reliable access to the bloodstream is one of the most essential components of modern medical care, but bloodstream access devices introduce a risk of bloodstream infection (BSI). The device that poses the greatest risk for BSI is the central venous catheter (CVC), also known as a central line. It is estimated that more than 5 million CVCs are inserted each year; any patient with a central line is at risk of developing a CLABSI, which is associated with increased morbidity, mortality and cost. The U.S. Centers for Disease Control and Prevention recently estimated the annual cost of CLABSI is more than $1 billion, and the estimated cost per patient is more than $16,000. The risk associated with CLABSI is even greater in developing countries, where the rates of HAIs related to devices are, in most cases, three to five times greater.

The Joint Commission, in collaboration with Joint Commission Resources (JCR) and Joint Commission International (JCI), developed a new monograph containing the most current information, evidence-based guidance and resources to help health care organizations reduce the current risks and resulting harm associated with CLABSI. JCR and JCI are not-for-profit affiliates of The Joint Commission. The monograph was produced in partnership with infection prevention leaders from the Society for Hospital Epidemiology of America (SHEA), the Association for Professionals in Infection Control and Epidemiology, Inc. (APIC), the National Institutes of Health (NIH), the Infectious Diseases Society of America (IDSA), the Association for Vascular Access (AVA), and the International Nosocomial Infection Control Consortium (INICC). In addition, several other domestic and international infection prevention leaders from countries...
such as Argentina, Australia, Egypt, Switzerland, Thailand and Saudi Arabia have lent their expertise to the monograph.

“Recent patient safety initiatives have demonstrated how preventable CLABSI can be when evidence-based guidelines are consistently put into practice at the bedside,” says Jerod M. Loeb, Ph.D., executive vice president, Division of Healthcare Quality Evaluation, The Joint Commission. “Our hope is that these resources will empower health care providers to implement practices that have been shown to not only improve patient safety, but also reduce costs.”

The project is supported by a research grant from Baxter Healthcare Corporation and focuses on the identification and broad dissemination of preferred practices and technological solutions to prevent CLABSI. Phase one of the project is the publication of the monograph, which highlights evidence-based practices known to help prevent CLABSI. The monograph is available on the website of The Joint Commission (www.jointcommission.org) at www.jointcommission.org/preventing_clabsi.

Phase two of the project will use this valuable information to develop a toolkit designed to support organizations as they seek to reduce CLABSI rates. It will include evidence- and expert-based interventions, guidelines and resources to address CLABSI.

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Joint Commission Resources (JCR), a not-for-profit affiliate of The Joint Commission, is the official publisher and educator of The Joint Commission. JCR is an expert resource for health care organizations, providing consulting services, educational services and publications to assist in improving quality and safety and to help in meeting the accreditation standards of The Joint Commission. JCR provides consulting services independently from The Joint Commission and in a fully confidential manner. Please visit our Web site at www.jcrinc.com.

Joint Commission International (JCI) was established in 1997 as a division of Joint Commission Resources, Inc. (JCR), a wholly controlled, not-for-profit affiliate of The Joint Commission. Through international accreditation, consultation, publications and education programs, JCI extends The Joint Commission’s mission worldwide by helping to improve the quality of patient care. JCI assists international health care organizations, public health agencies, health ministries and others in more than 90 countries.