Central line-associated bloodstream infections are very common, but preventable, when care bundles or evidence-based practices are included in client care. Following these interventions can reduce infection rates and even increase compliance among nurses (Gillis et al., 2022). Especially in an intensive care unit, these central lines are utilized every single day and it is essential to prevent CLABSI in order to improve client outcomes.

**Compliance of daily chlorhexidine baths** by nurses should be implemented in order to reduce presence of gram negative and positive bacteria, which decrease CLABSI rates by about sixty-five percent (Scheier et al., 2021).

**Compliance of daily oral care and hygiene** by nurses should also be implemented due to common neglect of these practices, which can elevate patient safety and reduce rates of bacterial infection of central lines (Kemp et al., 2019).

Nurses should maintain use of **antiseptic barrier caps** such as green Curos caps in order to increase compliance and reduce CLABSI by seven percent (Gillis et al., 2022). They should thoroughly follow **standardized blood culture procedures** as well to decrease additional device days and SIR rate (Gilman & Shapiro, 2022).

Having a consistent **CLABSI rounding team** can ensure that bundles are completed and that nurses can be further educated by having standardized reduction processes (Pate et al., 2022). A **CLABSI questionnaire** can also be available to all nurses in order to self assess and evaluate what targeted CLABSI training is required (Dang et al., 2023).

**REFERENCES**

(Scheier et al., 2021)  
(Kemp et al., 2019)  
(Gillis et al., 2022)  
(Gilman & Shapiro, 2022)  
(Dang et al., 2023)  
(Pate et al., 2022)