

A central line is a tube placed into a vein to give fluids, blood, or medications, or to do medical tests quickly. The tubes empty out in or near the heart. Inserting and maintaining central lines appropriately helps prevent central line-associated bloodstream infections.

Point your phone's camera at the QR code for CDC's frequently asked questions about central lines.



Infection Prevention Checklist



1. **Rounding.** It is important to routinely check central line maintenance practices and provide feedback to staff. Provide direct feedback to staff in real-time so that practices can be adjusted as needed and in summary to staff and leadership. Things to look for while rounding include:
 - a. Resident has an appropriate indication for a central line
 - b. Central line maintenance
 - Scrub access port or hub with antiseptic prior to each use, per facility policy
 - Use only sterile devices to access catheters
 - Replace dressings
 - When dressing is wet, soiled, dislodged, or not intact
 - Routinely using aseptic technique, per facility policy
2. **Hand Hygiene and Personal Protective Equipment:**
 - a. Healthcare personnel should perform good hand hygiene before inserting the central line and before and after touching the central line or dressing.
 - b. Follow Enhanced Barrier Precautions (<https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html>) for residents with central lines, including wearing gown and gloves during care or use of the central line as well as during other high-contact resident care activities.
3. **Education and Competency:**
 - a. Ensure all healthcare personnel performing central line insertion and/or maintenance have appropriate training and competency.
4. **Removal:**
 - a. If the resident has a temporary central line, evaluate daily if the resident still needs it. Each day a central line remains in place increases the risk of central line-associated bloodstream infection (CLABSI).
 - b. Take steps to remove the central line when the resident no longer meets an appropriate indication; removal requires a provider's order.

Central Lines: How to Share the News

1. **To the resident and those authorized to receive health information:** You (or your loved one) currently has a central line. *[Explain why the central line is in place. If temporary, mention that the care team will be assessing on a daily basis to make sure it's still needed and will remove it as soon as possible].* Make sure to not tug or pull on the line and let us know if the dressing is not intact. We will be checking the central line frequently to make sure it is working properly and that you are not showing any signs of infection. We will be cleaning our hands before and after touching the central line. Please remind us if we forget.
2. **To healthcare workers:** This resident has a central line. Enhanced Barrier Precautions are needed, which means wearing a gown and gloves during high-contact resident care activities including care or use of the central line. Focus on good hand hygiene and handling and maintaining the line appropriately, including scrubbing the hub prior to use and immediately replacing dressings that are wet, soiled, dislodged, or not intact. *[If a temporary central line, mention that the central line's necessity should be questioned daily].*



Additional Resources

CDC Central Line-Associated Bloodstream Infection page:
<https://www.cdc.gov/hai/bsi/bsi.html>

- Resources for patients and healthcare providers

CDC Checklist for Prevention of Central Line-Associated Bloodstream Infections (including insertion and maintenance strategies):
<https://www.cdc.gov/hai/pdfs/bsi/checklist-for-clabsi.pdf>

