



Utilizzo dei CVC: metodica di attacco. Confronto fra 2 centri lombardi

Di Pasquale Annalisa
Franchetti Rosalia

RESPONSABILITA'

- La condizione di dovere rendere conto di atti, avvenimenti e situazioni in cui si ha una parte, un ruolo determinante
- Assumersi le proprie r.
- Fare qualcosa sotto la r.
- incarico, mansione di cui si è r.
- Situazione per cui un soggetto giuridico è tenuto a rispondere della violazione di un obbligo

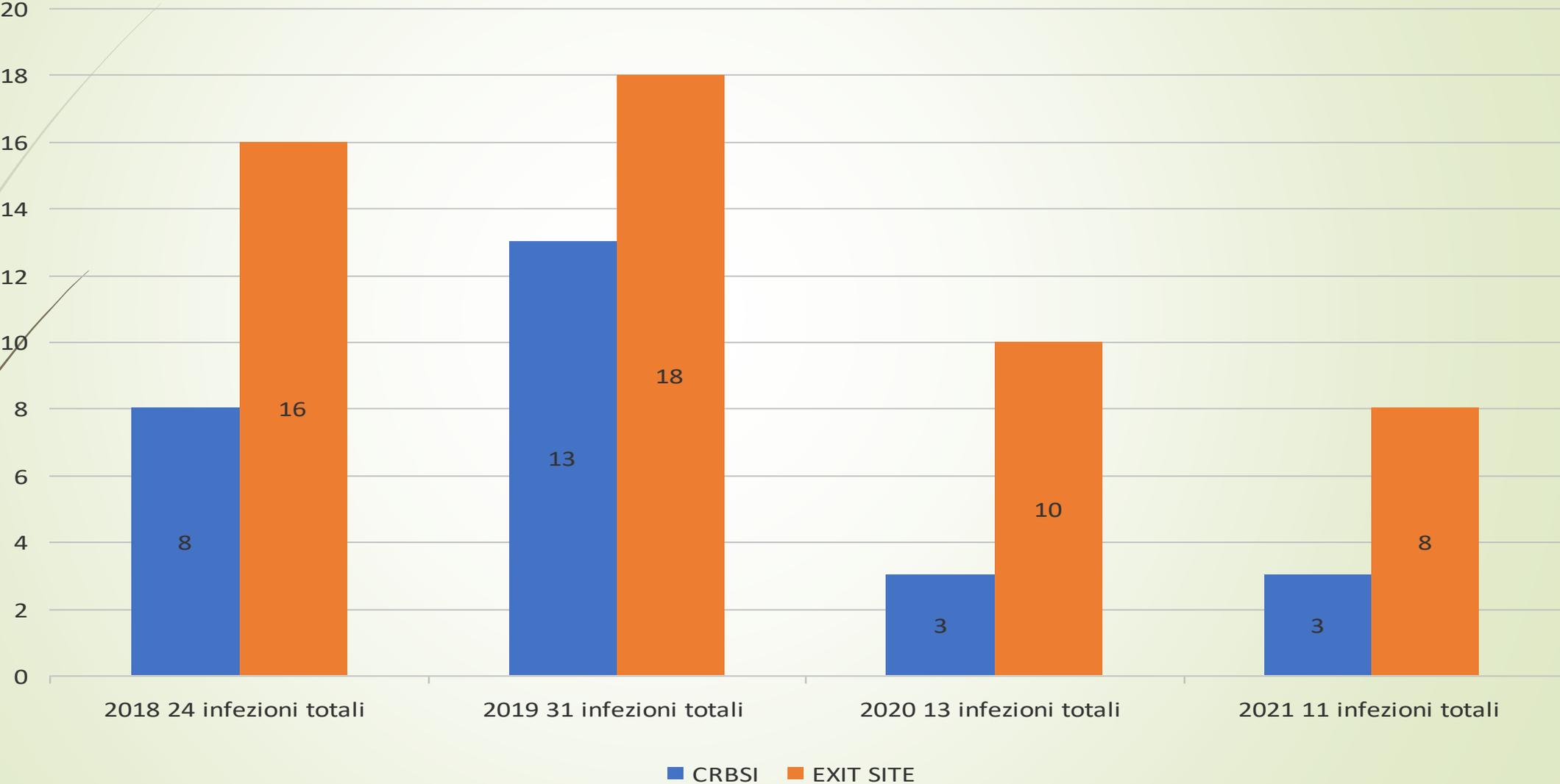
RESPONSABILITÀ

R= responsabile C= controlla P = partecipa I= informato

	MEDICO	INFERMIERE	COORDINATORE
Prescrizione	R	P	I
Applicazione Procedura		R	C
Approvvigionamento farmaci e materiale		P	R
Invio Campioni		R	
Somministrazione terapia	I	R	

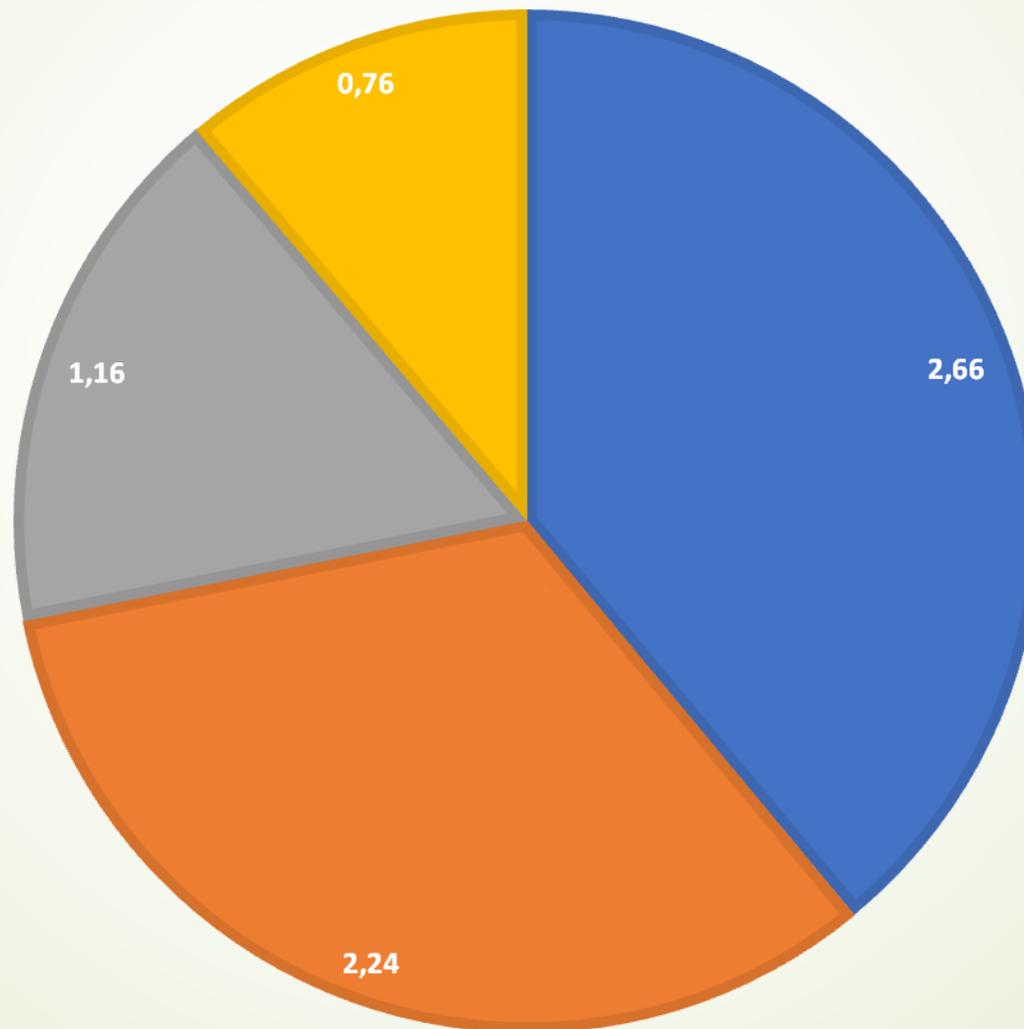
NON E' SOLO PER QUELLO CHE
FACCIAMO CHE SIAMO RITENUTI
RESPONSABILI
MA ANCHE PER QUELLO CHE
NON
FACCIAMO

INFEZIONI CVC CORRELATE



TASSO DI INFEZIONE PER 1000 GIORNI= NUMERO DI INFEZIONI/ GIORNI DI PERMANENZA X 1000

■ 2018 ■ 2019 ■ 2020 ■ 2021





Targeting COVID-19 prevention in hemodialysis facilities is associated with a drastic reduction in central venous catheter-related infections

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Abstract

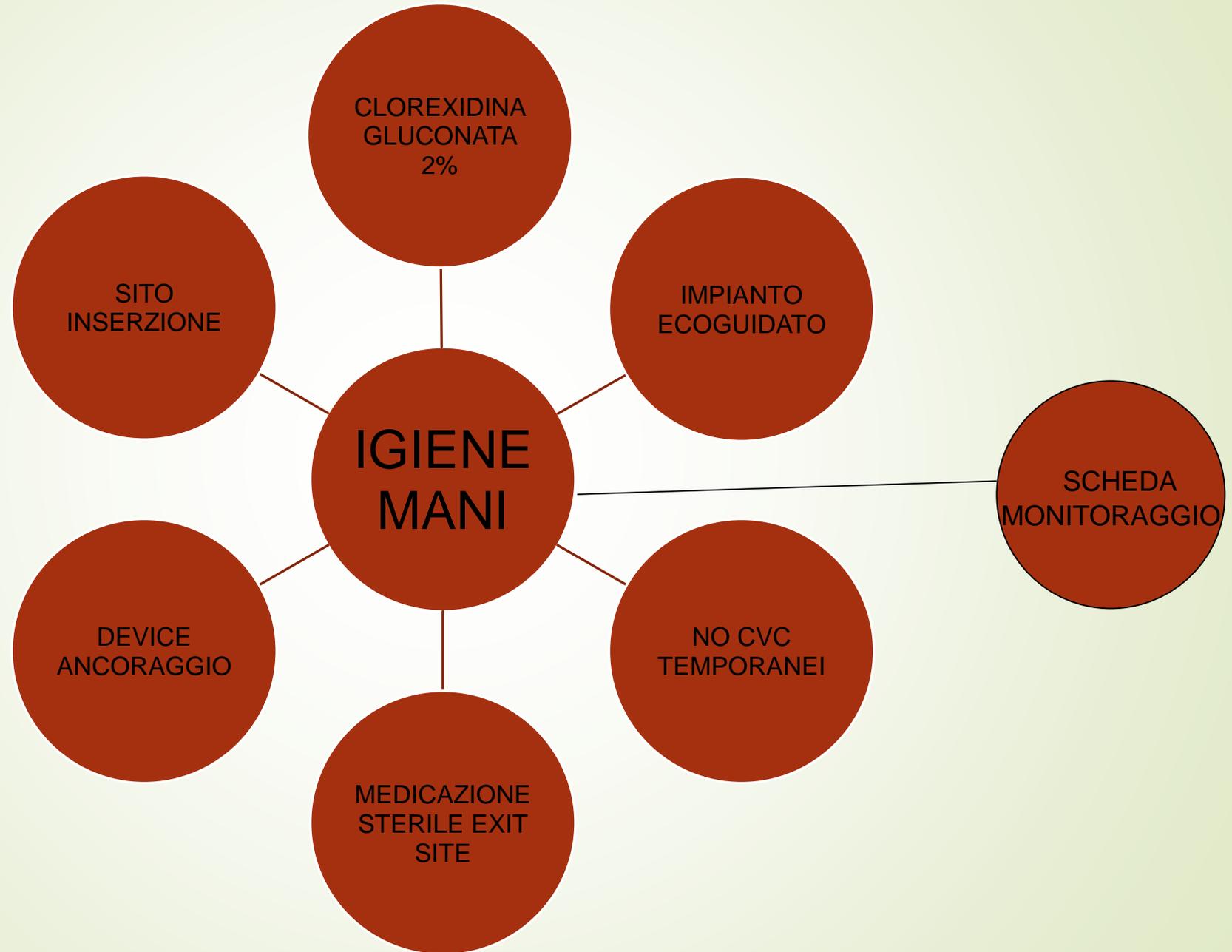
Background In hemodialysis (HD) patients, central venous catheter (CVC) related bloodstream infections are a major cause of morbidity and mortality. Hygienic precautions are a key aspect of dialysis care for infection prevention, but they are not sufficient to completely avoid the occurrence of CVC related infections. During the COVID-19 pandemic, hygienic precautions for preventing viral transmission have been markedly reinforced. We evaluated their effects on CVC-related infection rates.

Methods An observational retrospective study was conducted in two hemodialysis units of the same institution treating 215 chronic hemodialysis patients, 71 of whom are currently (33%) using a CVC. In the CVC cohort, we compared data on catheter-related infection rates during the maximum spread of the COVID-19 pandemic in Italy (February to May 2020) with data from the same period of the previous year and with the whole of 2019.

Results In 2019, we recorded a catheter-related bloodstream infection (CRBSI) rate of 1.19 (95% CI 0.81–1.68)/1000 days [2.07 (95% CI 1.12–3.52)/1000 days in the Feb–May 2019 period] and a tunnel and exit-site infection rate of 0.82 (95% CI 0.51–1.24)/1000 days [1.04 (95% CI 0.41–2.15)/1000 days in the Feb–May 2019 period]. Infection rates drastically decreased during the COVID-19 pandemic, with just one catheter-related bloodstream infection being recorded. Catheter-related bloodstream infection rates showed a significant reduction to 0.20 (95% CI 0.01–0.9)/1000 days ($p < 0.05$ and $p < 0.005$ compared to 2019 and to Feb–May 2019, respectively) and a non-significant reduction in tunnel and exit-site infections to 0.6 (95% CI 0.15–1.6)/1000 days.

Conclusions The observed 91% reduction in catheter-related bloodstream infections compared to the same period in 2019 [IRR 0.09 (95% CI 0.002–0.64)] and the 83% reduction compared to the whole of 2019 [IRR 0.17 (95% CI 0.004–1.009)] suggest that a stricter implementation of hygienic precautions in the dialysis setting can markedly improve the problem of CVC-related infections.

BUNDLE TARGETING ZERO CRBSI CVC CORRELATE





PROCEDURA DI ATTACCO DEL CVC





Procedura di stacco del CVC





Per noi che prestiamo assistenza infermieristica, la nostra assistenza è qualcosa che se non contribuiremo a far progredire ogni anno, ogni mese, ogni giorno..

Faremo regredire!

(F. Nightingale)