

Standards, Guidelines & Recommendations in BSI Risk Reduction

BIOPATCH® Protective Disk with CHG is the IV dressing with CHG PROVEN in the most, randomized controlled trials to reduce the incidence of catheter-related bloodstream infections (CRBSIs). BIOPATCH disk is constructed from polyurethane foam allowing quick absorption of fluid decreasing the likelihood of skin maceration. BIOPATCH disk is designed to deliver chlorhexidine gluconate a full 360° around the catheter insertion site providing optimal coverage and protection. In addition, the following professional organizations and recommendation bodies have made the following statements:

Publication	Highlights
CDC ¹	<ul style="list-style-type: none"> For patients aged 18 years and older: Chlorhexidine-impregnated dressings with an FDA-cleared label that specifies a clinical indication for reducing catheter-related bloodstream infection (CRBSI) or catheter-associated bloodstream infection (CABSI) are recommended to protect the insertion site of short-term, non-tunneled central venous catheters. (1A)*
SHEA ²	<ul style="list-style-type: none"> Factors associated with increased risk of CLABSI includes heavy microbial colonization at the insertion site Peripheral arterial catheters and peripheral venous catheters are not included in most surveillance systems, although they are associated with risk of bloodstream infection independent of CVCs. Future surveillance systems may need to include bloodstream infections associated with these types of catheters Use chlorhexidine-containing dressings for CVCs in patients over 2 months of age*
INS ³	<ul style="list-style-type: none"> For Hemodialysis: Consider the use of a chlorhexidine dressing as a strategy in reducing the risk for infection. For Implanted Vascular Access Ports: Guidelines for oncology patients suggest use of a chlorhexidine-impregnated dressing around the needle insertion site based on duration of infusions exceeding 4 to 6 hours. Use chlorhexidine-impregnated dressings for all patients 18 years and older with short-term nontunneled CVADs. Use for arterial catheters and other CVADs when all other CABSI prevention strategies have proven ineffective. Use with caution among patients with fragile skin and/or complicated skin pathologies; monitor for erythema and dermatitis at the dressing site. Evaluate adverse events from peripheral/arterial catheters for complications (eg, bloodstream infection [BSI], infiltration, phlebitis) through incidence, point prevalence, reports from patient health records, or International Classification of Diseases (ICD) codes. INS Standards of Practice Committee is using the terminology Catheter-Associated Bloodstream Infection (CABSI) to refer to bloodstream infections (BSIs) originating from either peripheral intravenous catheters (PIVCs) and/or central vascular access devices (CVADs). Both are equally injurious...
AACN ⁴	<ul style="list-style-type: none"> Apply a chlorhexidine-impregnated sponge to the (CVC, peripheral arterial, or epidural) site* Place a chlorhexidine sponge dressing around (Ventricular Assist Device) driveline* Apply a chlorhexidine gluconate sponge to the (hemodialysis) VAC insertion site at each dressing change*
APIC ⁵	<ul style="list-style-type: none"> The risk for infection is present during the entire dwell time of the catheter. The use of a post-insertion care bundle was associated with a significant reduction
ONS ⁶	<ul style="list-style-type: none"> Use a CHG-impregnated sponge dressing for all (CVC) catheters, including specialty catheters in patients older than 2months of age* Use a CHG-impregnated sponge dressing for any long-term infusion (>4-6 hrs) or if port remains accessed* Emerging data suggests that the rate of catheter-related bloodstream infections from peripheral catheters may be higher than once thought

*BIOPATCH® was the product used in the vast majority of CHG dressing studies referenced in the above publications

1. 2017 Updated Recommendations on the Use of Chlorhexidine-Impregnated Dressings for Prevention of Intravascular Catheter-Related Infections Published Nov 1, 2017. (<https://www.cdc.gov/infectioncontrol/guidelines/bsi/c-i-dressings/index.html>). 2. Marshall, J., et al. Strategies to Prevent Central Line-Associated Bloodstream Infections in Acute Care Hospitals: 2014 Update. ICHE. 3. Infusion Therapy Standards of Practice, Journal of Infusion Nursing. 2021 V44 (S1-S224). 4. Procedure Manual for High Acuity, Progressive, and Critical Care. 7th Ed, AACN 2017. 5. Guide to Preventing Central Line Associated Bloodstream Infections. APIC. 2017. 6. Access Device Standards of Practice for Oncology Nursing, ONS 2017