Examples of International Clinical Practice Guidelines That Include CLABSI Prevention Strategies

Guideline Title	Developer/Website	Background	Applicable Settings
Country/Region: Australia			
Australian Guidelines for the Prevention and Control of Infection in Healthcare Year published: 2010	Australian government's National Health and Medical Research Council (NHMRC) http://www.nhmrc.gov.au	The Australian Commission on Safety and Quality in Health Care (ACSQHC) requested NHRMC develop the guidelines. In addition to providing information regarding hand hygiene, standard and transmission-based precautions and aseptic technique, the guidelines include a review of the processes of care for insertion, maintenance, and replacement of intravascular access devices. These guidelines update a 2004 publication. Available at http://www.nhmrc.gov.au/guidelines/publications/cd33	A variety of settings, including hospitals, long term care facilities, ambulatory settings, and home and community health care settings
Country/Region: England			
epic2: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England Year published: 2007	The Department of Health (United Kingdom) commissioned a guidelines advisory group to update the 2001 guidelines it had previously developed. http://www.dh.gov.uk/en/index.htm The guidelines have been endorsed by the Department of Health.	A multiprofessional team of clinicians and researchers wrote the guidelines, which were initially published in 2001.The guidelines contain detailed information on the standard principles for preventing HAIs (for example, hand hygiene, use of personal protective equipment, safe use and disposal of sharps), and preventing infections associated with the use of indwelling urinary catheters and central venous catheters.* The guidelines were subsequently reviewed and updated to incorporate new technological advances and evidence from research. The pathogenesis of catheter-related bloodstream infections, general asepsis, catheter selection, maximal sterile barriers, and general principles for catheter management are among the 9 intervention categories that provide 47 specific recommendations for the prevention of bloodstream infections. Available at http://www.neli.org.uk/integratedcrd.nsf/5fbbcc8a843b38108025755b005ea3f0/74e975b7665fceaa802572170036d353?OpenDocument. * Pratt RJ, Pellowe CM, Wilson JA, Loveday HP, Harper PJ, Jones SR, McDougall C, Wilcox MH. epic2: National evidence-based guidelines for preventing healthcare-associated infections in NHS hospitals in England. *J Hosp Infect*. 2007 Feb;65 Suppl 1:S1–64.	Hospitals and other acute care settings
Country/Region: Europe			
(In development)	The European Centre for Disease Prevention and Control (ECDC) is developing scientific guidance on the effective prevention of HAIs, with input from international	In June 2009 the Council of the European Union invited Member States to ensure that proper infection prevention and control practices are implemented in all health care settings. In February 2010 key priority topic areas for developing evidence-based guidelines were determined. To strengthen national HAI prevention strategies and improve coordination, the ECDC was given the mandate to develop guidance on	Initially the ECDC guidelines will focus on acute inpatient care settings, with broader

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Note: All guidelines accessed Mar 17, 2012. HAI: health care–associated infection; CLABSI: central line–associated bloodstream infection.

Examples of International Clinical Practice Guidelines *(Continued)*

Guideline Title	Developer/Website	Background	Applicable Settings
Country/Region: Europe *(continued)*			
	experts (including representatives of the World Health Organization) on evidence-based practices. http://www.ecdc.europa.eu/en/Pages/home.aspx	those priority HAIs, which included surgical site infections, ventilator-associated pneumonia, and catheter-related bloodstream infections. An executive summary of the February 2010 meeting is available at http://www.ecdc.europa.eu/en/publications/Publications/1006_MER_HAI_final_meeting.pdf. Information about the European Member States is available at http://europa.eu/about-eu/countries/index_en.htm. Of interest, researchers in Europe are attempting to identify practices that have been adopted by European hospitals to prevent HAIs and to determine if those practices are effective. Led by Professor Didier Pittet from the University of Geneva Hospitals in Geneva, Switzerland, the Prevention of Hospital Infections by Intervention and Training (PROHIBIT) project will synthesize all information gathered to develop recommendations for policy makers, managers, and medical professionals. The 48-month-long project began in January 2010. The ECDC has established communication with the PROHIBIT project leaders with an expectation that their findings will help inform the ECDC guidelines. More information about the PROHIBIT project is available at http://ec.europa.eu/research/health/public-health/clinical-outcome-into-practice/projects/prohibit_en.html.	expansion to other health care settings. Ultimately the goal is to have guidelines that are applicable across the continuum of care.
Country/Region: United States			
Guidelines for the Prevention of Intravascular Catheter–Related Infections, 2011 Year published: 2011	The Centers for Disease Control and Prevention (CDC) and the Healthcare Infection Control Practices Advisory Committee (HICPAC) http://www.cdc.gov	Replacing the CDC guideline published in 2002, the new edition was developed by a working group led by the Society of Critical Care Medicine (SCCM), in collaboration with the Infectious Diseases Society of America (IDSA), Society for Healthcare Epidemiology of America (SHEA), Surgical Infection Society (SIS), American College of Chest Physicians (ACCP), American Thoracic Society (ATS), American Society of Critical Care Anesthesiologists (ASCCA), Association for Professionals in Infection Control and Epidemiology (APIC), Infusion Nurses Society (INS), Oncology Nursing Society (ONS), American Society for Parenteral and Enteral Nutrition (ASPEN), Society of Interventional Radiology (SIR), American Academy of Pediatrics (AAP), Pediatric Infectious Diseases Society (PIDS), and the HICPAC of the CDC. These guidelines are intended to provide evidence-based recommendations for preventing intravascular catheter–related infections. Major areas of emphasis include (1) educating and training health care personnel who insert and maintain catheters; (2) using maximal sterile barrier precautions during central venous catheter insertion; (3) using a > 0.5% chlorhexidine skin preparation with alcohol for antisepsis; (4) avoiding routine replacement of central venous catheters as a strategy to	Hospitals, outpatient settings, and home care

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Examples of International Clinical Practice Guidelines *(Continued)*			
Guideline Title	**Developer/Website**	**Background**	**Applicable Settings**
Country/Region: United States *(continued)*			
		prevent infection; and (5) using antiseptic/antibiotic-impregnated short-term central venous catheters and chlorhexidine-impregnated sponge dressings if the rate of infection is not decreasing despite adherence to other strategies (education and training, maximal sterile barrier precautions, and > 0.5% chlorhexidine preparations with alcohol for skin antisepsis). These guidelines also emphasize performance improvement by implementing bundled strategies, and documenting and reporting rates of compliance with all components of the bundle as benchmarks for quality assurance and performance improvement. The guidelines are available at http://www.cdc.gov/hicpac/BSI/BSI-guidelines-2011.html.	