

Translating Research Into Practice (TRIP)

Blood Culture Policy- Central line changes



What does the evidence say?

- Central venous catheters are becoming more widely used in acute care hospitals
- Changing the central line cap prior to obtaining blood cultures prevents the introduction of any bacteria into the bloodstream from the old cap and provides more reliable results in ruling out bacteremia. (Mathew et al, 2009, p 217)

Change in practice?

- Blood cultures should be drawn per venipuncture unless specified by physician for central venous access. (BMT- see unit guidelines)
- If drawing from central venous access:
 - Remove old central line cap and replace with a new cap prior to collecting specimen. Scrub the hub of new catheter cap with alcohol for 15-30 seconds prior to collection.
 - Do not flush or discard any waste prior to collecting the specimen. (INS Policy and Procedures, 2006).
 - Order of blood draw: green tube, aerobic (blue), then anaerobic (purple)
 - If more than one culture is obtained from the same central venous access, you must wait at least 10-20 minutes in between blood cultures.

Selected References:

- Mathew, A., Gaslin, T., Dunning, K., Ying, J. (2009). Central catheter blood sampling: The impact of changing the needleless caps prior to collection. *Journal of Infusion Nursing*, 32(4), 212-218. (Level III)
 - Hadaway, L.C. (2003) Skin flora and infection. *Journal of Infusion Nursing*, 26(1), 44-48. (Level VI)
 - Infusion Nurses Society. (2006). *Policies and Procedures for Infusion Nursing* (3rd Ed.). Infusion Nurses Society. (Level VI)
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