Core Interventions for CDC’s Dialysis BSI Prevention Collaborative

1. **Surveillance and feedback using NHSN**
   Conduct monthly surveillance for BSIs and other dialysis events and enter events into CDC’s National Healthcare Safety Network (NHSN). Calculate facility rates and compare to rates across other facilities using NHSN. Facilities should actively share results with front-line clinical staff.

2. **Chlorhexidine for skin antisepsis**
   Use an alcohol-based chlorhexidine (>0.5%) solution as the first line agent for skin antisepsis, particularly for central line insertion and during dressing changes. Povidone-iodine, preferably with alcohol, or 70% alcohol are alternatives.

3. **Hand hygiene audits**
   Perform monthly hand hygiene audits with feedback of results to clinical staff.

4. **Catheter care/vascular access observations**
   Perform monthly or quarterly audits of catheter care and accessing practices to ensure adherence to facility protocols. This includes following recommended procedures and maintaining aseptic technique while connecting and disconnecting catheters and during dressing changes. Share results with front-line clinical staff.

5. **Patient education/engagement**
   Provide standardized, basic education to all patients on topics including care of vascular access, hand hygiene, risks related to catheter use, recognizing signs of infection, and instructions for access management when away from the dialysis unit.

6. **Staff education and competency**
   Provide regular training of staff on infection control topics, including care of access and aseptic technique. Perform evaluation of competency for skills such as catheter care and accessing at least every 6-12 months and upon hire.

7. **Catheter reduction**
   Incorporate efforts within the facility (e.g., through patient education, vascular access coordinator) to reduce catheters by identifying barriers to permanent vascular access placement and catheter removal.

Supplemental Intervention:
**Antimicrobial ointments or chlorhexidine-impregnated dressing**
Apply bacitracin/gramicidin/polymixin B ointment or povidone-iodine ointment to catheter exit sites during dressing change OR use a chlorhexidine-impregnated dressing. Facilities are strongly encouraged to select one of these interventions to implement.

For more information or to join the CDC Dialysis BSI Prevention Collaborative, please visit [www.cdc.gov/HAI/settings/dialysis/dialysis_settings.html](http://www.cdc.gov/HAI/settings/dialysis/dialysis_settings.html).