

3<sup>rd</sup> International Conference on

# Holistic Medicine and Nursing Practice

July 25-26, 2018 | Vancouver, Canada

## Educational sessions help to improve nurses clinical practices and knowledge for Port-A-Cath (PAC) care in children with cancer

**Shazia Meraj Ali**

Aga Khan University & Master of Nursing, Pakistan

**Purpose:** The purpose of this study was to decrease CVL infections in tertiary care hospital oncology unit.

**Introduction:** Catheters are the leading source of bloodstream infections for a patient receiving chemotherapy or other long-term treatment. Comprehensive unit-based programs have proven to be effective in decreasing catheter-related bloodstream infections. Central venous catheters (CVL) or central lines (defined as a vascular infusion device that terminates at or close to the heart or in one of the great vessels) are used in inpatient and outpatient clinical settings to provide long-term venous access for patients with a wide variety of illnesses and conditions. A CVL is a long, soft, thin, flexible tube that is inserted into one of the large veins leading to the heart.

### Methods/Discussion:

**Design:** Pre-intervention and post-intervention observational study.

**Setting:** The 31 bed medical & oncology unit in a tertiary care hospital. Between February 2014 and August 2014, all patients admitted to the medical with CVL were surveyed prospectively for the development of catheter-associated bloodstream infection. A mandatory education program directed toward Medical & oncology unit nurses was developed by Clinical nurse instructor to highlight correct practices for the prevention of catheter-associated bloodstream infection. The program consisted of a unit in-service session including pre and post test based Presentations on risk factors and practice modifications involved in catheter-related bloodstream infections. Each participant was required to complete a pretest before Presentation and an identical test after completion of the Presentation.

**Findings/Results:** A fifteen episode of catheter-associated bloodstream infection occurred out of 50 catheters insertion in the 6 months before the introduction of the education program. Following implementation of the intervention, the rate of catheter-associated bloodstream infection decreased to 5 episodes out of 20 catheter insertion in the 6 months after the initiation of the education program.

**Conclusion:** An intervention focused on the education of health-care providers on the prevention of catheter-associated bloodstream infections may lead to decrease in the incidence of primary bloodstream infections.

shaziameraj@gmail.com