

ST. FRANCIS MEDICAL CENTER  
Prospective / Concurrent Medical Record Review Audit Tool

Central Line Dressing Audit (CLABSI Prevention) UNIT: \_\_\_\_\_ DATE: \_\_\_\_\_

INDICATOR	MR: Room #:			MR: Room #:			MR: Room #:			MR: Room #:			COMMENTS ACTION TAKEN
	Y	N	NA	Y	N	NA	Y	N	NA	Y	N	NA	
Date of line insertion													
1. Indicate: PICC line (P) Mid-line (M)/Central line (C)													
2. Dressing dry and intact													
3. Is the hub of the catheter (the wings) covered?													
4. Are the catheter lumens secured with tape?													
5. Dressing Dated and Initialed properly													
6. Dressing change completed on Tuesday night or PRN soiling													
7. End Cap changed after blood draw (if blood is present in Cap, mark No)													
8. Is clamp closed on unused port?													
9. Unused port is patent.													
10. All tubings dated according to policy*													
11. Swabcaps present at every port.													
12. Most recent ARCIS documentation consistent with presentation of dressing.													
13. Documentation of daily assessment by physician to indicate the continued line necessity													
14. Patient/family has been educated on BSI prevention													

\_\_\_\_\_  
Name of Person Conducting Audit

\_\_\_\_\_  
Date

\*Legend (for tubing): TPN & lipids (every 24 hours), All other tubing (every 72 hours)