

Getting to Zero

Eliminating Blood Culture Contamination with an Initial-Specimen Diversion Device

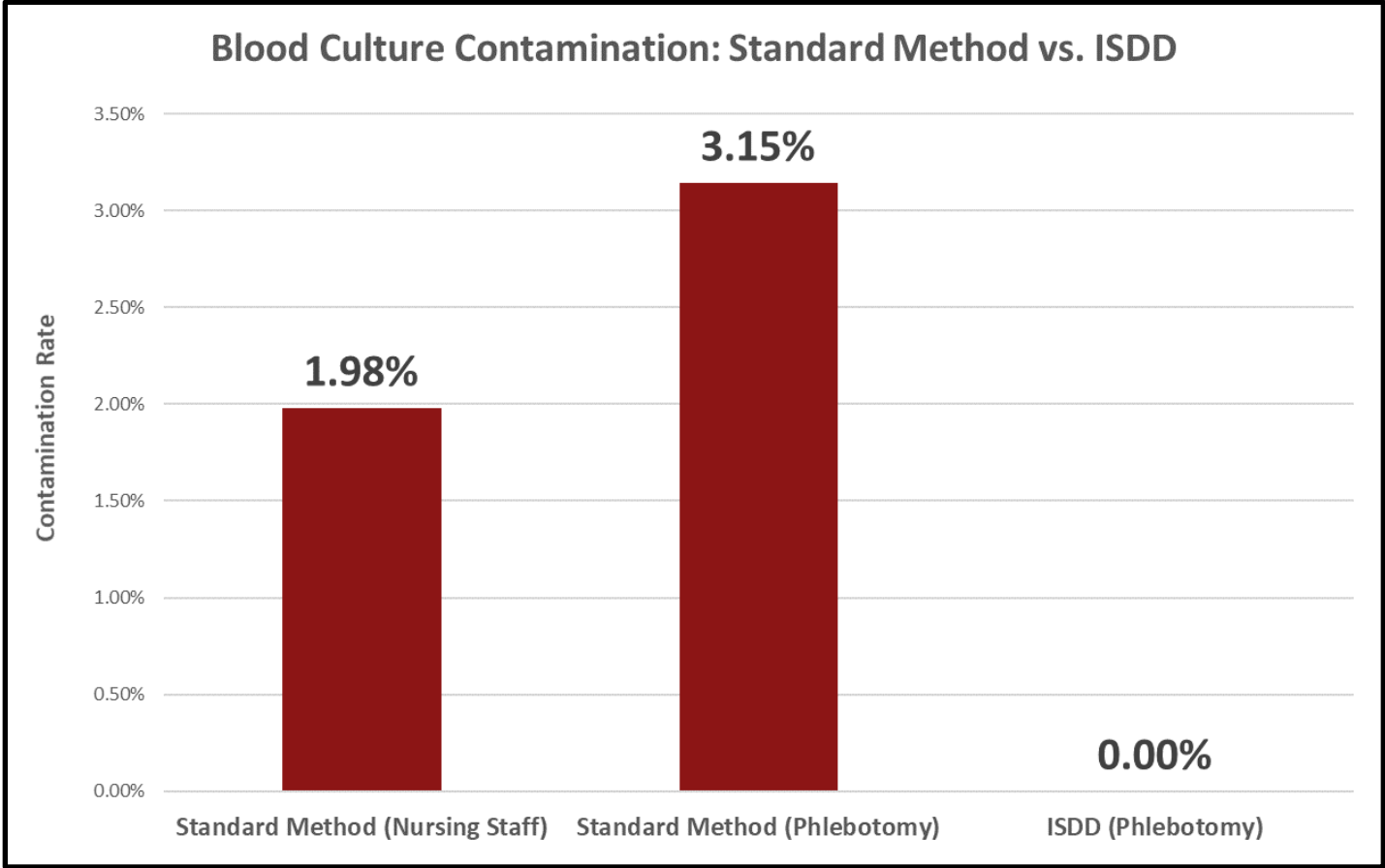
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Steripath[®] Gen2 Initial-Specimen Diversion Device



Table: Stanford Health Care blood culture collection methods and contamination events (March 15, 2019 - July 21, 2019)				
	Matched Sets	Contaminated Sets	Contamination Rate	False-Positive CLABSIs
Standard Method (Nursing Staff)	1,413	28	1.98%	0
Standard Method (Phlebotomy)	922	29	3.15%	1
Standard Method (Combined)	2,335	57	2.44%	1
ISDD (Phlebotomy)	4,462	0	0.00%	0



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Antibiotic Utilization

Positive blood culture sets with possible contaminants were treated as true infection in 9 patients (19%)
(8 out of 9 providers were infectious disease physicians). Treatment rationale: most patients had hardware in place and providers felt that Rx was necessary.

Antibiotics continued beyond 48 hours for treatment of “true” infection in 6 patients (14%)
(one patient received 6 weeks of IV antibiotics for what was likely CNS-contaminated blood cultures)

Summary

ISDD (Steripath® Gen2) usage by phlebotomists led to a substantial decrease in contaminated blood cultures: **Zero Contaminants**

ISDD usage led to substantial decrease in CLABSIs caused by skin organisms (also VRE and *Candida* sp.)

Excess antimicrobial therapy was noted in several patients who had contaminated blood cultures

ISDD usage can...

- Impact inappropriate antibiotic usage
- Improve correct diagnoses
- Minimize patient discomfort
- Reduce HAIs related to longer lengths of stay
- Improve patient safety and outcomes

Getting to ZERO is possible!