

CLIP Subcommittee Recommendation re: assessment of line necessity

While inspection of the line insertion site is a routine part of daily nursing care, evaluation of medical necessity of the line is an important process measure that reduces risk for infection because it helps to prompt removal of lines sooner rather than later.

Therefore, the CLIP subcommittee strongly recommends that hospitals should be required to develop a process to complete a daily necessity assessment for catheters being used for acute medical indications, e.g. TPN, vasoactive medications, hemodynamic monitoring, etc. Hospitals should have a mechanism to demonstrate this process and its documentation to CDPH surveyors.

All central venous access devices which are present on admission (POA) or inserted with the intent of the patient being discharged with the device, e.g. hemodialysis, chemotherapy, long term antibiotic therapy, etc. do not require daily validation of line necessity.

All other Central venous catheters shall be evaluated for necessity on a daily basis.