



Venous Education & IV newsletter

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Happy New Year 2015 from The VEIN!

Preventing CLABSI's By Roz Colarusso RN

Central Line Associated Bacterial Infections, CLABSI's, occur when a patient with a central venous catheter, CVC, develop a bloodstream infection and all other possible sites of infection have been eliminated. The types of CVC's commonly seen at extended care facilities are PICC Lines, Hickman Catheters, and Infusaports. These infections prolong the patients stay and may even cause death. What is key to know is that they can be totally be prevented.

Signs and symptoms may be local ie; redness, swelling, drainage at the exit site, and pain along the catheter path. If the infection becomes systemic there will be a sudden onset of fever and chills, hypotension, malaise, confusion, and elevated blood glucose to name a few. This is when the patient becomes septic.

The two main causes of CLABSI's are poor technique on insertion and poor care and maintenance after insertion.

Here are some guidelines for proper care and maintenance of central lines.

1. Always perform hand hygiene prior to working with any central lines.

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Caregiving App by Care Monster®



Care Monster® is a caregiving app that exists to support family communication, encourage engagement and navigate resources when it comes to the care of a loved one. People don't prepare or plan to become caregivers for their loved ones; rather, they are thrust into the position of caregiver, having to manage, not only, the communication but navigate or identify a number of resources available to them. As such, families often find themselves fraught with worry, guilt, frustration and lack of communication between family members. Care Monster® promotes better care for the loved one and a better experience for families. By providing families with an easy to use mobile app to communicate, everyone is less stressed, feels less guilty and is so much more engaged. Also, by providing families the right resource at the right time, Care Monster® is a families' first step and a valuable guide throughout their caregiving journey.

Care Monster® offers several ways for companies to participate in its platform and interact with the families using it; creating valuable engagement opportunities without negatively impacting or changing the user experience.

Michael Eidsaune, CEO, Care Monster® 937-320-9234 <mike@caremonster.com> www.caremonster.com

Getting and Receiving Great Service by Bill RIngle

The interesting thing about truly exceptional service is that we know it when we see it but it is difficult to explain and hard to deliver consistently. Most business owners I've met deliver great service. The problem is they are usually not the one in their business charged with doing that; their staff is!

Why is great service so hard to deliver? First, it is unfamiliar. We don't grow up with it. No one knows what it looks like so without clear expectations and training the average person does not know how to provide really great service. In our society service jobs are not respected. They are for teenagers and others on their way to more meaningful careers. Great service requires more work in the moment although it makes business easier in the long run. We grew up with John Wayne or Rambo so providing service runs counter to our American culture of strength and success. Our heroes stand up and fight! Service is often talked about by

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Standards of Practice by Lynda DeLuca, RN, CRNI Peripheral Venous Access via Peripheral Short Catheters

Veins that should be considered for peripheral cannulation are those found on the dorsal and ventral surfaces of the upper extremities, including the metacarpal, cephalic, basilic, and median veins. Avoid the lateral surface of the wrist for approximately 4-5 inches because of the potential risk for nerve damage. Also avoid the ventral surface of the wrist due to the pain on insertion and possible damage to the radial nerve.

Site selection should be initiated routinely in the distal areas of the upper extremities; subsequent cannulation should be made proximal to the previously cannulated site. You cannot access a vein distal to a previous site for phlebotomy, IV therapy or any other vascular access attempt.

Site selection should be initiated routinely in the nondominant arm. VAD sites should avoid areas of flexion; areas of pain on palpation; veins that are compromised

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5 Ways to Strengthen Your Core Leadership Muscles by John Beiter

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When coaching leaders, I like to use the metaphor of going to the gym and hiring a personal trainer to strengthen certain muscle groups depending on your sport of choice. There are certain core muscles that when developed serve as a basis for any sport and since according to leadership coach Marshall Goldsmith...Leadership is a Contact Sport and it behooves the leader to consider strengthening the following five core leadership muscles:

Gratitude – Make gratitude a disciplined part of your week where you take the opportunity to personally recognize the efforts of others that have contributed to your success, the success of others and/or the success of the company.

Relationship – A really creative and impactful way of building stronger relationships as a leader is to adopt, again from Marshall Goldsmith a feed forward approach. Ask your work associates to give you suggestions in order to improve the one or two behaviors you are trying to change.

Ears – As the wise old question asks – Why do you think you have two ears and only one mouth? Seek First To Understand Then Be Understood from Stephen Covey's The 7 Habits of Highly Successful People. Practice the acronym WAIT [Why Am I Talking] and listen to understand versus listening only to respond. Developing great listening skills is a core benefit to everyone and particularly effective leaders.

Attitude – Nothing draws the kind of people around you faster then the way you present yourself. If you doubt it's true then consider road rage. Who gets attracted to an angry driver – other angry drivers! Think about your ability as a leader to attract others through a positive attitude and remember that attitude is the only word in the English language that totals 100 counting off the letters in the alphabet [i.e. A=1, T=20, etc.]

Trust – Learn to build deeper bonds of trust as a leader by improving your coaching skills. Look for ways to support and nurture any and all employees, not just your direct reports.

You probably figured it out by now that the five core strengths you can develop as a leader spell out the word GREAT! Consider developing a daily routine around one of these core muscle groups, for example, make Mondays gratitude day where you seek out opportunities to thank someone in meaningful and heartfelt ways. By strengthening these core leadership muscles you can become a great leader – one that others are willing to follow and who seek you out not only for their own growth and development but for the that of the entire organization.

Preventing CLABSI's By Roz Colarusso RN (Continued from page 1)

- 2. Always apply gloves. Remember if hand hygiene not performed before applying gloves bacteria from hands will be transferred to the gloves.
- 3. Scrub the hub of the needleless connector for 15 seconds with alcohol. Catheter hubs and needless connectors are the main sites for microbial contamination. SCRUB THE TOPS AND SIDES LIKE JUICING AN ORANGE.
- 4. Change the injection cap if there is dried blood within the cap.
- 5. Always check for a free flowing blood return when flushing and giving IV medications for 2 very good reasons:
 - A. To Prevent the buildup of protein and fibrin along the catheter walls and on the tip which leads to the formation of a fibrin sheath and bio-film which promotes bacterial colonization. Alteplase, Cath-flo, is a common thrombolytic used to clear protein and fibrin from catheters.
 - B. Picc lines can easily become malpositioned if patients have episodes of vomiting or coughing or even a lot of bending. They may complain of hearing water running in their ear on the side of the picc when flushing it. If that happens an x-ray is necessary to confirm catheter tip placement, and may need for a catheter exchange or entire new picc line.
- 6. FLUSH, FLUSH, FLUSH!!! Flush each lumen at least once per shift if the line is not being used. Always use a PULSATILE flushing technique. (start, stop, start, stop). Use a 10ml NSS flush, this will help to prevent the buildup of protein and fibrin on the catheter walls. Remember, as soon as that central line is placed, protein and fibrin begin to form.
- 7. Flush catheter with 10ml NSS between different medications and different IV solutions to prevent a precipitate from forming.
- 8. Use a new 10 ml NSS flush for each connection. Do not use half before a medication and the other half to flush with when the medication is finished. Once a flush is disconnected it is considered contaminated
- 9. Primary and secondary tubings should be labeled and changed every 96 hours.
- 10. TPN tubing should be changed every 24 hours
- 11. Never use tubing that is contaminated due to no end cap, looped back into a medication port, or found on the floor.
- 12. A sterile dressing change and injection cap change should be performed every 7 days and anytime the dressing becomes loose or soiled. The catheter skin junction site should be visually inspected and palpated daily for tenderness through the intact dressing. The dressing should be labeled with the date and the initials of the nurse performing the dressing change.
- 13. Certain types of patients have higher risks for developing a CLABSI. They would be patients on TPN, HIGH DOSE STEROIDS, and patients receiving chemo or radiation treatments to mention a few.

Nurses taking care of patients with central lines must be knowledgeable about the risk factors that can predispose a patient to a CLABSI, and to slow down and focus on ensuring that preventable infections do not occur.

Guidelines based on the INS Standards of Care 2011

Please share the quiz on the next page with your nursing staff for a chance to win a free Pizza Lunch!

~ John Beiter < beiterjw@aol.com>

Our Locations

Jeannette

Main Lab and Draw Station 206 Clay Avenue Jeannette, PA 15644 Phone: 724-527-6830 Toll-Free: 1-800-524-3414 Fax: 724-527-6831

Hours:

Monday - Friday Saturday 7:00am - 3:00pm 8:00am - 11:00am

Apollo - Vandergrift

306 First Street Apollo, PA 15613 Phone: 724-478-6259 Fax: 724-478-6259

Hours:

Monday - Friday Saturday

7:00am - 2:00pm 8:00am - 11:00am

License # 201940 **CLIA Approved**





Medical Laboratory... at our home or yours.



www.pamedlabs.com

MEDICAL LABORATORY

Why Choose Us?

We know you care about your patient's health and well-being. We are here to help. Know that each and every patient will be given individualized attention in collecting, processing and delivering accurate results to you!

History:

PA Automated Services is a CLIA Approved Blood Laboratory licensed in the Commonwealth of Pennsylvania for over 46 years. The Lab was started in 1967 in Vandergrift, PA. In 1984, the main Lab was moved to Jeannette, PA. We now have 3 locations; Jeannette, Apollo and Latrobe.

Staff:

Our Staff is mainly made up of Medical Technologists and Phlebotomists. Most have been with us at least 10 years or more. Each of our Techs has been extensively trained in using all of the instruments within the Laboratory.

Pricing:

Less than half of competitors' prices. Discount pricing for the uninsured. We are most famous for our Multiphasic Profile, which includes a CMP, Lipid Profile, and CBC (39 test total) for \$45.00 for the uninsured.

Compare Our Service . Fees with Others!

| | Other Labs Charge | PAS ONLY CHARGES |
|--|----------------------|---------------------|
| Comprehensive Metabolic Profile (CMP) | \$77 | \$17 |
| Thyroid Stimulating Hormone (TSH) | \$52 | \$17 |
| Complete Blood Count (CBC) | \$63 | \$17 |
| Glucose | \$31 | \$11 |
| Hgb A1C | \$67 | \$27 |
| Draw Fee | \$7 | \$0 |
| TOTAL | \$297 | \$89 |

House Calls for Homebound Patients:

We will go directly to the patient's home to draw blood. This is convenient for those patients who have trouble getting out of the house, but need blood work. This is done with no cost to the patient, depending on their insurance (see list below).

We know you care about your patients's health and well-being. We are here to help. Know that each and every patient will be given individualized attention in collection, processing, and delivering accurate

results to you. Home blood draws are of no charge to patients

having the following insurances: (These must be primary insurance)

- United Mine Workers Medicare
- Highmark Products Railroad Medicare
 - Security Blue Gateway Medicare PPO Blue Assured
 - Select Blue Keystone Blue

Patients must have prescription from their doctor and must be considered home bound or have significant difficulty getting out of the house.

Multi-Phasic Blood Testing:

We offer multi-phasic blood testing for only \$45.00. This is a 39 test profile for which you will have most of your results within 24 hours. Normally, this test would retail between \$300 - \$400.

Timely and Accurate Results:

Next-Day Test Results are available on most blood work. Other results will be mailed within 2-3 business days. Results can also be faxed upon request. Quarterly quality control tests are done with 100% accuracy every time.

Insurance:

All insurances accepted. Highmark and Medicare billing done in-house, while all others are sent to our reference laboratory to be billed. We also accept Visa, MasterCard, and Discover for the uninsured.







www.pamedlabs.com

ENTER FOR A CHANCE TO WIN! If you share this quiz below with your staff, then fax us one completed quiz, we will have a drawing from those entered to win a pizza lunch for your staff... Have fun! 724.226.2003 fax

STAFF QUIZ: ELECTROLYTE FUN

Fill in the appropriate electrolyte (A-F) for questions 1-12.

| 1 Normal Reference Value: 95 to 108 n | nEq/L |
|--|-------|
| 2 Normal Reference Value: 3.0 to 4.5 m | ng/dL |
| 3 Normal Reference Value 1.5 to 2.5 m | Eq/L |
| 4 Normal Reference Value: 8.5 to 10.5 | mg/dL |
| 5 Normal Reference Value: 135 to 145 | mEq/L |
| 6 Normal Reference Value: 3.5 to 5.5 m | nEq/L |

A. = Na+

B. = K+

C. = HPO-4

D. = Ca++

E. = Mg++ F. = CI-

| <u>7</u> | Clinical signs and symptoms rarely occur until level has dro | pped to below 3 |
|----------|--|-----------------|
| 8 | Doubling the serum level = approximate serum osmolarity | |
| 9 | Elevated level may be indicator of solid tumor metastasis | |
| 10 | Elevated level can be caused by overuse of laxatives | |
| 11 | Delivers oxygen to tissues | THEVEIN |
| 12 | Regulates acid-base balance | JANUARY 2015 |



Complete Intravenous Access Services, Inc. 828 Front Street Creighton, PA 15030

INSIDE THIS ISSUE:

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Ship to:

Getting and Receiving Great Service by Bill RIngle (Continued from page 1)

leaders but rarely practiced. Finally, service is not FAIR. It never was and never will be fair. Do your best to provide great service to a patient or their family and some people will not appreciate it. They may take it for granted or just plain be mean to you! That certainly is not fair.

That is why excellent service is so rare and why we are blown away whenever we experience great service. If an organization truly wants to give great service, they must treat it like an honorable profession. The leaders and managers must "walk the talk." They must provide training on what to do and what not to do. They must authorize staff to do what is needed to a point And they must reward staff for exceeding their customer's expectations!

Bill Ringle helps businesses create "systems" to consistently provide excellent service. 724-444-0455 www.SystemRingle.com <bill@systemringle.com>

Standards of Practice

Peripheral Venous Access via Peripheral Short Catheters (Continued from page 1)

(e.g. bruised, infiltrated, phlebitic, sclerosed, or corded); location of valves; and areas of planned procedures. Please avoid areas that may be a hindrance to Physical Therapy, Occupational Therapy or other rehabilitation schedules.

Veins of the lower extremities should not be used in the adult population due to risk of tissue damage, thrombophlebitis, and ulceration.

Veins in an upper extremity should be avoided on the side of breast surgery with axillary node dissection, after radiation therapy to that side, or with lymphedema, or the affected extremity from a cerebrovascular accident.

The Broken Chair - Switzerland

THEVEIN
JANUARY 2015

During a holiday visit with my daughter who is teaching English in Grenoble, France, we visited the U.N. where she hopes to work one day. The chair in front of the U.N. is called Broken Chair. (see photo on Right)

Broken Chair is a monumental sculpture in wood by the Swiss artist Daniel Berset. It depicts a giant chair with a broken leg and stands across the street from the Palace of Nations, in Geneva. It symbolizes opposition to land mines and cluster bombs.



The fountain above is the Jet d'Eau, is a large fountain in Geneva, Switzerland and one of the largest fountains in the world.

7. B

8. A

9. D

10. E

11. C

~ Charles Anthony

Staff Quiz Answers from page 3

- I. F
- 3. E
- J. [
- 4. 🛭
- 5. A
- 6. B
- B 12. F



Pictured below is the oldest part of Geneva, Switzerland. C'est magnifique!

