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| **Serious Complications** | **Healthcare-Associated Infections**  *Lower Rates Are Better* | | | | |
| **Deaths from Selected Medical Conditions** |  | **AVERAGE FOR ALL REPORTING HOSPITALS IN THE U.S.** | **EDGEFIELD HOSPITAL** | **RIVER VIEW HOSPITAL** | **MITCHELL HOSPITAL** |
| **Hospital-Acquired Conditions** |
| **Healthcare-Associated Infections** |
|  | **Central Line-Associated Bloodstream Infection** | **0.70** infections  for every 1,000 days central line catheter in place | **0.70** infections  for every 1,000 days central line catheter in place | **1.59** infections  for every 1,000 days central line catheter in place | **0.45** infections  for every 1,000 days central line catheter in place |

| **Name** | **Description** |
| --- | --- |
| Central line-associated bloodstream infection (CLABSI)  (Bloodstream infections caused by a central catheter) | A central line-associated bloodstream infection is a serious infection that occurs when germs enter the bloodstream through a central line. A central line is a tube that healthcare providers place in a large vein in the neck, chest, or arm to give fluids, blood, or medications or to do certain medical tests quickly. It may be left in place for several weeks. Patients who develop a catheter-associated blood­stream infection may become ill with fevers and chills or the skin around the catheter may become sore and red.  Hospital staff can prevent catheter-associated bloodstream infections by:   * Choosing a vein where the catheter can be safely inserted and where the risk for infection is small; * Keeping the catheter sterile when putting it in place by cleaning their hands beforehand; wearing a mask, cap, sterile gown, and sterile gloves; covering the patient with a sterile sheet; and cleaning the patient’s skin * Keeping the opening clean, washing their hands, and using sterile gloves, when using the catheter to draw blood or give medications, or when changing the bandage * Removing the catheter as soon as it is no longer needed. |