

# ICU CLAB definition and reporting



## CLAB is defined as:

- a blood stream infection with no other apparent source of infection
- which occurs in a patient who has a centrally or peripherally inserted central line or has had a central line removed within 48 hrs of blood stream infection (BSI) diagnosis

## CLAB is reported to NSW Health if:

- detected more than 48 hrs after ICU admission or within 48 hrs of ICU discharge
- it is a new event (i.e. not within 14 days of previous BSI with the same organism)
- satisfies one of the following criteria:

# 1

- At least one bottle from a blood culture is reported by the laboratory as having grown a recognised pathogen

# 2

- Patient has one or more of the following signs or symptoms\*:
  - Fever (>38°)
  - Chills
  - Hypotension, and
- The same\* potential contaminant organism is cultured from two or more blood cultures drawn on separate occasions (within 48 hours)

# 3

- Patient is less than 1 year of age, and
- Patient has one or more of the following signs or symptoms\*:
  - Fever (>38° rectal)
  - Hypothermia (<37° rectal)
  - Apnoea
  - Bradycardia, and
- The same\* potential contaminant is cultured from two or more blood cultures drawn on separate occasions (within 48 hours)

\*Refer to the NSW Health Healthcare Associated Infection (HAI) Clinical Indicators Manual for further information OR [www.asid.net.au/hicsigwiki/index.php?title=Central\\_line\\_associated\\_bloodstream\\_event\\_definition](http://www.asid.net.au/hicsigwiki/index.php?title=Central_line_associated_bloodstream_event_definition)

## RECOGNISED PATHOGENS

A few of the recognised pathogens are *S. aureus*, *Enterococcus* spp., *E. coli*, *Pseudomonas* spp., *Klebsiella* spp., *Candida* spp. Excludes potential contaminant organisms.

## POTENTIAL CONTAMINANTS

Examples include diphtheroids [*Corynebacterium* spp.], *Bacillus* spp. [not *B. anthracis*], *Propionibacterium* spp., coagulase-negative staphylococci [including *S. epidermidis*], viridans group streptococci, *Aerococcus* spp., *Micrococcus* spp.

## OPTIMAL BLOOD CULTURE COLLECTION

- A blood culture set comprises 2 bottles (aerobic and anaerobic) in adult or 1 paediatric bottle in infant/small child
- Collect 2 blood culture sets from separate venepunctures (not via existing central or arterial line) to evaluate each sepsis episode
- Adult: 10mLs of blood is required for each bottle (avoid over-filling)
- Paediatric: generally 1-3mLs required
- Disinfect skin and top of blood culture bottles with alcohol (1 minute)
- Use aseptic technique (sterile gloves, no touch technique)

