

TEMPLE UNIVERSITY HOSPITAL GRADUATE MEDICAL EDUCATION POLICIES AND PROCEDURES

NUMBER: TUH-GMEC-104
TITLE: Central Venous Catheter Insertion
EFFECTIVE DATE: 07/01/2013

PURPOSE

Temple University Hospital is committed to providing high quality and safe patient care. The purpose of this policy is to reduce the rate of catheter related blood stream infections (CRBSI's) and other procedural complications by standardizing the education, training and supervision of resident physicians inserting Central Venous Catheters (CVC's).

POLICY

It is the policy of Temple University Hospital that all resident physicians receive standardized education, training and supervision regarding central venous catheter (CVC) insertion. The CVC's covered by this policy include non-tunneled central venous and other percutaneously inserted central catheters. The policy does not include the placement of tunneled or dialysis catheters.

It is recommended that whenever appropriate, the CVC should be inserted using ultrasound guidance.

SCOPE

This policy outlines the education, training and supervision of all incoming PGY – 1 residents involved in CVC insertion. In addition, this policy governs residents who enter residency programs at the PGY – 2 level, transferring residents, visiting residents and fellows.

Residents should be trained in ultrasound guided CVC insertion techniques.

This policy only pertains to those residents or fellows who insert CVC's independently (Anesthesiology, Emergency Medicine, Internal medicine / selected medicine subspecialties, Surgery, selected surgery subspecialties).

IMPLEMENTATION

The implementation of this policy is the responsibility of the GME Program Directors.

NOTE: ANY PRINTED COPY OF THIS POLICY IS ONLY AS CURRENT AS OF THE DATE IT WAS PRINTED; IT MAY NOT REFLECT SUBSEQUENT REVISIONS. REFER TO THE ON-LINE VERSION FOR MOST CURRENT POLICY.

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PROCEDURES

The following criteria should be fulfilled in order to be certified as being able to independently insert a CVC.

All incoming PGY – 1 residents as of June 2013:

1. All residents must complete the DICON CVC online module and pass the post-test (>80%) prior to Simulation Center training.
2. All residents must complete the Simulation Center training prior to participating in CVC insertion on a patient.
3. After successful completion of the Simulation Center training, the resident will be able to perform central CVC insertion on a patient with direct supervision by a physician who has met criteria as a clinical supervisor.
4. The resident will then be observed for a minimum of 5 successful CVC insertions by a supervising physician.
 - a. At least 2 of the 5 successful CVC insertions must be at a site (femoral, internal jugular or subclavian) prior to the resident inserting a CVC at that site independently.
5. Approved by Residency Program Director.

Residents completing their PGY – 1 year as of July 2013:

1. All residents must complete the DICON CVC online module and pass the post-test (>80%).
2. Approved by Residency Program Director.

Residents Entering Graduate Medical Education Programs at the PGY – 2 level, Transferring Residents, Visiting Residents and Fellows:

1. The resident / fellow needs to provide written documentation from their prior residency program director (residents entering at the PGY – 2 level, transferring residents or fellows) or current residency program director (visiting residents) of successful completion of comparable training / supervision regarding CVC insertion, including the number of CVC insertions to the Graduate Medical Education Office.
2. All residents and fellows must complete the DICON CVC online module and pass the post-test (>80%).
3. Must demonstrate competency in the insertion of at least 1 CVC at the bedside or during simulation supervised by a qualified physician.
4. Approved by Residency / Fellowship Program Director or Service Chief if a visiting resident / fellow is rotating on a service without a residency / fellowship (ie. Burn service).
5. Residents or fellows who have not successfully completed comparable training / supervision regarding CVC insertion or if not competent on demonstration must complete the entire program for independent CVC insertion.

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Qualifications for Supervising Physician:

1. Attending physician credentialed in CVC insertion.
2. Resident / fellow (PGY-2 or above).
 - a. Completion of all requirements for independent CVC insertion.
 - b. Approved by Residency Program Director.

Qualifications for Simulation Instructor:

1. Attending physician credentialed in CVC insertion.
2. Resident / fellow (PGY – 5 or above)
 - a. Completion of all requirements for independent CVC insertion.
3. Familiar with Simulation Center equipment, ultrasound machine, etc.
4. Reviewed all instructional material / online module.

Maintenance of Skills:

6. Residents / fellows need to insert a minimum of 1 CVC every 6 months or demonstrate competency to insert at least 1 CVC at the bedside or during simulation supervised by a qualified physician.

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