**Literature Evaluation Table**

**Student Name:**

**Change Topic (2-3 sentences):**

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| **Criteria** | **Article 1** | **Article 2** | **Article 3** | **Article 4** |
| **Author, Journal (Peer-Reviewed), and** **Permalink or Working Link to Access Article** | Elaine R. Flynn,American Journal of Infection ControlURL: [https://www.ajicjournal.org/article/S0196-6553(16)30052-9/fulltext](https://www.ajicjournal.org/article/S0196-6553%2816%2930052-9/fulltext).  | AnoushaKrishnn, Khushnam Irani, Ramyasuda Swaminathan, Peter Boan. Link: <https://www.tandfonline.com/doi/full/10.1080/1120009X.2019.1595894?scroll=top&needAccess=true> | Moi Lin Ling, corresponding author Anucha Apisarnthanarak, Namita Jaggi, Glenys Harrington, Keita Morikane, Le Thi Anh Thu, Patricia Ching, Victoria Villanueva, ZhiyongZong, Jae Sim Jeong, and Chun-Ming LeeLink: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4857414/> | Neu AM, Richardson T, Lawlor J, Stuart J, Newland J, McAfee N, Warady BA; SCOPE Collaborative Participants.Link: <https://booksc.xyz/ireader/53270213> |
| **Article Title and Year Published** | We're Not in ICU Anymore: Long-term Care and Dialysis Units Collaborate on Process Improvement to Reduce Central Line-Associated Bloodstream Infections. 2016 | A retrospective study of tunnelledhaemodialysis central line-associated bloodstream infections2019  | APSIC guide for prevention of Central Line Associated Bloodstream Infections (CLABSI)2016 | Implementation of standardized follow-up care significantly reduces peritonitis in children on chronic peritoneal dialysis. 2016 |
| **Research Questions (Qualitative)/Hypothesis (Quantitative), and Purposes/Aim of Study** | The research question in this study is whether the collaboration between Dialysis Units Collaborate and Long-term Care will reduce case of Reduce Central Line-Associated Bloodstream Infections. The purpose of the study is to establish the impact of the coloration between Dialysis Units Collaborate and Long-term Care in the prevention of Central Line-Associated Bloodstream Infections.  | The purpose of the study is to compare retrospective audit of tunnelledhaemodialysis CLABSI  from 2010 to 2014 | The purpose of this study is to summarize the APSIC guide for CLBSI  | It is hypothesized that implementing standardized sequel care effectively decrease peritonitis in kids on chronic peritoneal dialysis |
| **Design (Type of Quantitative, or Type of Qualitative)** | Quantitative design  | Quantitative Design  | Qualitative design | Qualitative design  |
| **Setting/Sample** | The sample entailed key stakeholders, outpatients infusion centers  | Australian center | Asia Pacific Society of Infection Control | Standardizing Care to improve Outcomes in Pediatric End settings Participants: children  |
| **Methods: Intervention/Instruments** | Analysis of the key causes of Central Line-Associated Bloodstream Infections among the patients  | Retrospective study  | Literature Review and Analysis | The research instrument included evaluation of 24 scope centers  |
| **Analysis** | The intervention meant to identify the knowledge deficit among the patients and how the collaboration of various players could help solve the issue.  | This introspective study is important in identifying the common pathogens that lead to CLABSI | The study analyzes the approaches of preventing CLABSI | The study evaluates the importance of standardized follow-up among the participants  |
| **Key Findings** | The CLABSI Team raised awareness regarding EBP, augmented peer-to-peer relations and augmented the unit’s possession of CL maintenance and care  | Out of 674 catheter inserts, 70 CLBSI developed in 55 respondents at a frequency of 0.95 in 100 catheter days  | Nursing of progress with time with apt feedback to stakeholders is the primary element of making sure that best practices are implemented | The findings reported that the probability of complying with standardized follow-up practices increased significantly  |
| **Recommendations** | It is recommended that patient education is important in the prevention and management of CLABSI  | It is recommended that the health players should be at the forefront on preventing *Staphylococcus aureus* being the major causes of mobility and mortality | The program recommended monitoring of adherence and outcomes to evidence-based maintenance practices and insertion of central line | The study recommends the implementation of standardized follow-up practices among the SCOPE centers  |
| **Explanation of How the Article Supports EBP/Capstone Project** | This article presents some of the methods of preventing and treating CLABSI  | This study is important as it provides information regarding the common pathogens that are associated with CLABSI  | This study summarizes some of the approaches and best practices that could be used to control the problem presented | This article is important as it may offer some knowledge on best practices in management of CLBSI  |

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| **Criteria** | **Article 5** | **Article 6** | **Article 7** | **Article 8** |
| **Author, Journal (Peer-Reviewed), and** **Permalink or Working Link to Access Article** | Nguyen DB, Shugart A, Lines C, Shah AB, Edwards J, Pollock D, Sievert D, Patel [PRhttps://www.ncbi.nlm.nih.gov/pubmed/28663227.](https://www.researchgate.net/publication/236911506_Bloodstream_Infection_Rates_in_Outpatient_Hemodialysis_Facilities_Participating_in_a_Collaborative_Prevention_Effort_A_Quality_Improvement_Report) | Patel, P. R., Sarah, H. Y., Booth, S., Bren, V., Downham, G., Hess, S. Jernigan, J. A.<https://www.researchgate.net/publication/236911506_Bloodstream_Infection_Rates_in_Outpatient_Hemodialysis_Facilities_Participating_in_a_Collaborative_Prevention_Effort_A_Quality_Improvement_Report> | [Rhee Y](https://www.ncbi.nlm.nih.gov/pubmed/?term=Rhee%20Y%5BAuthor%5D&cauthor=true&cauthor_uid=25782897), [Heung M](https://www.ncbi.nlm.nih.gov/pubmed/?term=Heung%20M%5BAuthor%5D&cauthor=true&cauthor_uid=25782897), [Chen B](https://www.ncbi.nlm.nih.gov/pubmed/?term=Chen%20B%5BAuthor%5D&cauthor=true&cauthor_uid=25782897), [Chenoweth CE](https://www.ncbi.nlm.nih.gov/pubmed/?term=Chenoweth%20CE%5BAuthor%5D&cauthor=true&cauthor_uid=25782897).<https://www.ncbi.nlm.nih.gov/pubmed/25782897> | Sarah, H. Y., Kallen, A. J., Hess, S., Bren, V. R., Lincoln, M. E., Downham, G., & Lines, C.<https://booksc.xyz/ireader/60316701>.  |
| **Article Title and Year Published** | National Healthcare Safety Network (NHSN) Dialysis Event Surveillance Report for 20142017 | Bloodstream Infection Rates in Outpatient HemodialysisFacilities Participating in a Collaborative Prevention Effort: AQuality Improvement Report2013 | Central line-associated bloodstream infections in non-ICU inpatient wards: a 2-year analysis2015 | Sustained Infection Reduction in Outpatient Hemodialysis Centers Participating in a Collaborative Bloodstream Infection Prevention Effort.2016 |
| **Research Questions (Qualitative)/Hypothesis (Quantitative), and Purposes/Aim of Study** | The research purpose is to analyze 2014 National Healthcare Safety Network Dialysis Event  | It is hypothesized that there is no trend in BSI rates interventions  | It is hypothesized that patients undergoing dialysis would encompass a major part of this cohort | The purpose of the study is to analyze the of BSI by the hemodialysis centers  |
| **Design (Type of Quantitative, or Type of Qualitative)** | Quantitative design  | Quantitative design  | Quantitative Design | Quantitative study  |
| **Setting/Sample** | National Healthcare Safety Network,hemodialysis outpatients | Patients in 17 outpatient hemodialysis facilities | An 880-bed tertiary teaching hospitalPatients with CLABSI in non-ICU wards | Outpatient Hemodialysis Centers |
| **Methods: Intervention/Instruments** | Qualitative data used  | Quality improvement project | Retrospective observational study | Longitudinal study |
| **Analysis** | The article reports that the outpatients receiving dialysis are at great risk of contracting blood infections  | The Bloodstream Infections are associated with morbidity among the dialysis patients  | This study describes the factors which contribute to CLBSI outside the ICU unit  | The study evaluates the importance of collaborative approaches in the prevention of BSI in dialysis centers |
| **Key Findings** | The finding of the research is that 6005 outpatients hemodialysis centers confirmed data reported by National Healthcare Safety Network. | 17 out of facilities evaluated are charitable and are hospital owned  | For the period of 2 years, 104 participants suffered CLABS for disease rate of 0.35 out of 1000 patient days  | Unadjusted pooled mean ARBSI and BSI rate reduced from the baseline to the intercession period  |
| **Recommendations** | The study recommends decreased use of central venous catheter as it is associated with blood infections  | The study recommended the availability of control arm for the quality enhancement project  | It is recommended that the dialysis facilities should consider Enterococcus spp as it preset the greatest threat  | It is recommended that another study should be conducted within the centers with baseline data  |
| **Explanation of How the Article Supports EBP/Capstone** | This study is important as it depicts the best catheter to use in order to reduce cases of CLABSI  | The study is important as it highlight the prevalence of BSI among dialysis patients  | This study is important it highlights the most important pathogens as far as CLBSI is concerned  | This analysis is important in the establishment of intervention against CLBSI  |