

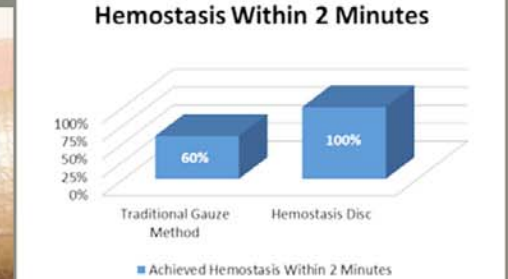
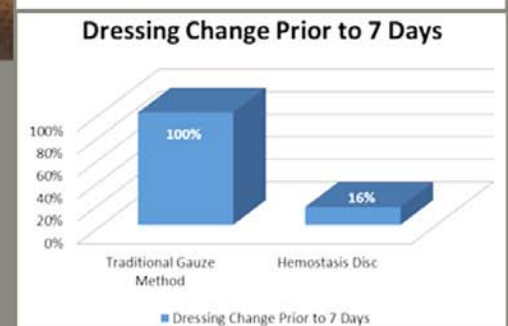


Achieving Hemostasis Post Insertion of a Peripherally Inserted Central Catheter

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Hemostasis Disc Technology	Abstract	Discussion	Conclusions												
<ul style="list-style-type: none"> The Hemostasis Disc we trialed is comprised of a mixture of hydrophilic polymer and potassium ferrate. The hydrophilic polymer dehydrates and absorbs the blood while the potassium ferrate acts like a clot to form seal over the site. Unlike other pharmaceutical products, this Hemostasis Disc can be used on patients that are at high risk for bleeding because the product is not dependent on the body's natural clotting mechanism to form a clot. In a clinical study performed by a Florida hospital, showed that in 96% of patients with clotting difficulties, hemostasis was obtained in less than or equal to 2 minutes. No complications were reported and the practice of an initial dressing change 48 hours after insertion was eliminated and the practice was changed to 7 days (Blough, Hinson, & Hen, 2010). 	<p>Background:</p> <p>Bleeding lines involve increased nursing time and supply cost. The previous practice for preventing oozing from the insertion site required a follow up dressing change in 24-48 hour.</p> <p>Purpose:</p> <p>The PICC team wanted to find a more efficient and cost effective method to stop bleeding at the time of PICC line insertion while maintaining a low infection rate.</p> <p>Project:</p> <p>Data was collected using a form that was completed with each insertion on the Hematology/Oncology/Bone Marrow Transplant unit. The form included information on the patients anticoagulation therapy, lab values, time to hemostasis, whether or not there was bleeding or oozing after application requiring a dressing change after hemostasis was achieved and the nurses perception on the ease of application. The PICC Nurse applied the Hemostasis Disc on all new PICC insertions and collected amount of time for hemostasis to be achieved. During the trial period, the PICC Nurse completed the first dressing change and completed the first</p>	<p>The Hemostasis Disc is easy to apply as indicated by 100% of the PICC RN's.</p> <ul style="list-style-type: none"> Greater than 50% of PICC RN's noted issues with the ease of removal of the hemostasis disc and 99% of the time skin integrity was maintained. Disc crumbled during removal Discolored patient's skin Discussions with the vendor indicated this is a normal expectation as the disc is a mineral based product as the disc absorbs blood, and dries it may crumble and the iron in the product may temporarily discolor the skin. Education was provided to the PICC RN's and Inpatient RN with no continued issues. 	<ul style="list-style-type: none"> This practice eliminated the need for a 24 hour dressing change decreasing the number of bleeding and oozing lines. Decreased the PICC line infection rate in high risk patient populations. One year survey of the PICC Team indicated continued positive feedback about the product and positive patient outcomes The Hemostasis Disc trialed is being adopted throughout the Mayo Clinic Enterprise in policy convergence. 												
<p>Method</p> <ul style="list-style-type: none"> The gauze method data and the Hemostasis Disc method data was collected using a form that was completed with each PICC line insertion on the Hematology/Oncology/Bone Marrow Transplant unit. The form included the following data collection points Anticoagulation therapy Lab Values Time to hemostasis Bleeding or oozing after initial hemostasis achieved RN perception of ease of application During the trial period, the PICC RN completed the first dressing change and noted the following data collection points on the form Integrity of the Disc Integrity of the skin RN perception of ease of removal 	<p>Conclusion:</p> <p>The data was compiled and it was determined that this product was effective in achieving hemostasis faster than the traditional method of gauze.</p>	<p>References</p> <ol style="list-style-type: none"> Blough, L., Hinson, K., Hen, J. (2010). The science of a "seal" for PICC line management: BioSeal CVC Provider: An alternative hemostatic agent that keeps sites dry and intact. <i>Journal of the Association of Vascular Access</i>, 15(2), 66-73. Timsit, J., Bouadma, L., Ruckley, S., et al. (2012). Dressing disruption is a major risk factor for catheter-related infections. <i>Critical Care Medicine</i>, 40(6), 1707-1741. Biollie LLC. (2014). The Technology. Retrieved from http://stateal.com/index.php/clinical-evidence 													
<ul style="list-style-type: none"> The data was compiled in an Excel Spreadsheet and Pivot tables were used to analyze the data. 	 <p style="text-align: center;">Traditional Gauze Method</p>	 <p style="text-align: center;">Hemostasis Disc</p>	<p>Patients on Anticoagulants who Achieved Hemostasis Within 2 Minutes</p>  <table border="1"> <thead> <tr> <th>Method</th> <th>Achieved Hemostasis Within 2 Minutes</th> </tr> </thead> <tbody> <tr> <td>Traditional Gauze Method</td> <td>60%</td> </tr> <tr> <td>Hemostasis Disc</td> <td>100%</td> </tr> </tbody> </table> <p>Dressing Change Prior to 7 Days</p>  <table border="1"> <thead> <tr> <th>Method</th> <th>Dressing Change Prior to 7 Days</th> </tr> </thead> <tbody> <tr> <td>Traditional Gauze Method</td> <td>100%</td> </tr> <tr> <td>Hemostasis Disc</td> <td>16%</td> </tr> </tbody> </table>	Method	Achieved Hemostasis Within 2 Minutes	Traditional Gauze Method	60%	Hemostasis Disc	100%	Method	Dressing Change Prior to 7 Days	Traditional Gauze Method	100%	Hemostasis Disc	16%
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