Introduction
Peripheral intravenous (IV) catheters are the most widely used intravascular devices. Good infection control practices for caring patients with the catheters can make a significant difference to the incidence of catheter-related infections. Since 2010, the hospital has adopted the recommendations on prevention of intravascular catheter associated bloodstream infection by the Department of Health. The recommendations are largely based on the CDC guidelines (CDC 2011).

Objectives
To evaluate the impact of educational sessions on nursing practice for prevention of peripheral IV catheter-related infection.

Methodology
A pre-test and post-test study design was used. The intervention was two identical education sessions on prevention of peripheral IV catheter-related infection. The education sessions were conducted for nurses in a ward in December 2014. The content of the education was based on the CDC (2011) guideline on prevention of intravascular catheter associated bloodstream infection. Audit standard was formulated based on CDC (2011) recommendations. Convenience Sampling Observations and Documentation Review Audits on nursing practice of caring patients with peripheral IV catheters were performed before and two weeks after the intervention. Based on reviewing the records of patients who had peripheral IV catheters including nursing documentation on intravascular and subcutaneous site assessment record and in the progress notes, the compliances with the standard before and after the intervention were compared.

Result
Total 79 patient records for pre-test and 22 records for post-test were reviewed during
the study period. All standards have different degree of improvement. In addition, the education has contributed to significant improvement in two areas of IV catheter care: 1) maintain closed system for continuous IV infusion (increased by 23%) and 2) documentation of reasons of change sites or removing catheters (increased by 20%). The result demonstrates on-going training and education can improve the compliance on IV catheter care. Details of the study results were reported in the below Table. For further improvement, the study design and data collection method can be modified together with on-going refresh trainings to nurses. Zero IV catheter infection is our goal to be achieved.