

Tubing & Line Connection Safety Using

I-TRACE

These recommendations describe actions undertaken by clinicians who initiate, access, maintain, or discontinue invasive lines and tubes. Lines and tubes include, but may not be limited to, parenteral, enteral, respiratory, gastrointestinal, and urinary devices.

Illuminate the patient care area whenever invasive medical lines and tubes are manipulated (initiated, accessed, maintained, or discontinued).

Perform hand hygiene. **TOUCh** the line or tube and **Trace** it from the insertion point on the patient back to the point of origin.

Perform a cognitive **Review**. Think about the purpose and expected outcome of the actions you are about to perform. When line access or connection involves medication delivery, use defined BCMA processes or follow facility guidelines to ensure medication is checked against the medication administration record or prescriber order.

ACT if any mismatch between the planned activity and desired outcome is discovered, either through BCMA alerts, independent double checks, or a cognitive review.

Clarify and Correct. Concerns expressed by primary caregivers, colleagues, patients, or family member are valid reasons to seek clarification before proceeding with a task involving lines and tubes. Correct any discrepancies before proceeding with the intervention.

Expect to use the I-TRACE Process, each time a line or tube is accessed, manipulated, or discontinued and when care is handed-off to another clinician or care team.