# Contaminant to Clinically Significant: A Case of *Staphylococcus Haemolyticus* Central Line Associated Blood Stream Infection Unveiled

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## ABSTRACT

**In this case study, a 57-year-old diabetic patient was admitted to the intensive care unit (ICU) in a general hospital in Southwest Saudia Arabia following a road traffic accident (RTA). He subsequently developed a Central Line Associated Blood Stream Infection (CLABSI) with *Staphylococcus haemolyticus* (*S. haemolyticus*). Despite his fever and elevated inflammatory markers, the organism was initially dismissed as a contaminant, leading to delayed diagnosis and inadequate treatment with different antibiotics. Empirical antibiotic therapy was ineffective, prompting a change to Vancomycin following organism identification and a full susceptibility report. Communication gaps between the laboratory and clinicians, combined with the lack of rapid organism identification tools, contributed to the delay in appropriate therapy. The active surveillance of the infection control department facilitated the identification of recurring infections, leading to timely intervention and a positive outcome for the patient. This case underscores the importance of prompt and accurate organism identification, effective communication between laboratory staff and clinicians, and the proactive role of infection control doctors in detecting and managing healthcare-associated infections to ensure optimal patient care.**

**Key words: Central Line Associated Blood Stream Infection, *Staphylococcus haemolyticus*, Infection Control Doctors, Intensive Care Unit**

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