

INFECTION CONTROL

WHERE ARE YOUR INFECTION CONTROL POLICIES AND PROCEDURES?

- In the Code 61 Manual (Big Red Book-Exposure Control Plan)
- On the Grapevine under Policies and Procedures
- Patient Care Manual contains some of the policies and procedures
- Department Specific- IC policies related to specific patient population (i.e. ED, Nursery, ICU, L&D)

STANDARD PRECAUTIONS

Most infections can be contained and prevented from spreading by using Standard Precautions, which include the most important procedure, **HANDWASHING**. Health care workers will wear any protective equipment when doing procedures that place the employee at risk of exposure to blood or body fluids. Staff may wear a gown to prevent blood or body fluids from getting on their uniforms. Staff may also wear protective eyewear and masks to prevent body fluids from splashing on their faces during aerosolized procedures. Keeping the area and equipment clean and dust free are also means to stop transmission of organisms. Standard Precautions will be taken whether or not there is a known contagious infection.

CONTACT PRECAUTIONS

Contact Precautions are used for diseases that are spread through contact (hand transmission). Examples are herpes, impetigo, diphtheria, scabies, Clostridium difficile, MRSA, and VRE.

If the patient requires Contact Precautions, the following must occur:

1. Place a patient in a private room. Co-horting of MRSA patients is acceptable if private room is unavailable.
2. Place the Contact Precaution Sign outside of the patient's room.
3. Make sure protective equipment is readily available.
4. Use dedicated equipment. Wipe down equipment with hospital disinfectant before using on another patient. (stethoscopes, pumps, medication equipment, etc.)
5. Disposable gloves and gowns should be worn upon entering a patient room with VRE. do not wear protective equipment outside of the room.
6. Adhere to strict hospital hand washing policies. Wash hands for more than 15 seconds.
7. All employees taking care of ICU patients should wear gloves when providing direct patient care.
8. Visitors should check with the attending nurse before entering these rooms. Visitors must stay in the patient's room while visiting and hand washing must be stressed before leaving. Children may be restricted depending on the situation and permission to visit is decided by the physician or Infection Control.
9. Housekeeping needs to do terminal cleaning when patient is discharged.

RESPIRATORY PRECAUTIONS

Respiratory Precautions apply to diseases spread through the air like influenza, bacteria meningitis, RSV, or Pertussis. Surgical masks are used before entering a patient's room.

If Respiratory Precautions are needed:

1. Patients may be placed in a regular patient room.
2. Place the sign- "STOP, Report to Nurse Before Entering." Clearly on the outside of the door.
3. If patient transport is needed, place a surgical mask on the patient.
4. Use Standard Precautions as needed.

TB PRECAUTIONS

TB Precautions are used for patients that are suspected of having tuberculosis, SARS, or measles. A N-95 mask or respirator is needed before entering the room. A Medical Assessment is needed before wearing the N-95 mask. The mask must be specially fit tested by trained personnel. N-95 masks must be refit tested if there is a weight gain or loss of 20 pounds or if any facial structural changes occur.

Belt mounted respirators do not need to be fit tested and are available from Sterile Processing.

If TB Precautions are needed:

1. Place patient in a negative flow room. Negative flow rooms are all labeled.
2. Place the sign- "STOP, No Admittance without wearing a N-95 or More Protective Respirator."
3. Call Plant Operations to monitor the air-flow in the room.
4. If patient transport is needed, place a surgical mask on the patient. Use Standard Precautions as needed.

OUTBREAKS IDENTIFIED

An outbreak is defined as cases occurring at a frequency greater than expected (i.e. one small pox case, one SARS cases, ten *C. difficile* cases on one unit, five *E. coli* 0157H positive stool cultures on one unit). Call Infection Control at 268-7790. Read the Outbreak Policy for more information.

HANDWASHING IS THE SINGLE MOST EFFECTIVE WAY TO PREVENT INFECTIONS

SOME TIPS ON HANDWASHING:

- ❖ Wash hands for a minimum of 15 seconds using friction as you wash.
- ❖ Washing longer than 15 seconds may be necessary if hands are visibly dirty or possibly contaminated. It is also recommended to use soap and water for patients with *C. difficile* to wash possible spores from contaminated hands.
- ❖ Food service must wash hands greater than 20 seconds according to FDA Food Sanitation Rule.
- ❖ Use warm water and soap.

Note: Alcohol based soap products may be used if hands are "not" visibly soiled. Alcohol soap products have a 99.9% kill rate.



At **St. Mark's Hospital** our goal is to stop the spread of infections. We take many precautions to meet this goal, and your cooperation is vital to us.

Please read and abide by these procedures as outlined in this brochure.

You are an important part of our Infection Control program.

We thank you for your cooperation.

Please feel free to talk to your director if you have any questions. If they cannot answer all your questions, contact an Infection Control Practitioner (268-7790).

The St. Mark's Hospital Infection Control Committee 2004