

Infection Control

Content provided by partnership with:



Control of infectious diseases is paramount to the health and well-being of patients, staff and visitors. Therefore, it is the responsibility of the healthcare professionals to keep the environment free from disease causing pathogens. Compliance by any employees is a mandatory expectation for sound health practices.

Tracking, monitoring and avoiding infections within your control or practice will reduce the risk of litigation resulting from healthcare-acquired infections. Infections acquired within a healthcare setting can be introduced through many methods:

- Colds and flu introduced by staff.
- Failure to maintain sterile conditions during wound dressing changes.
- Catheter bags resting on the floor.
- Poor hydration.
- Improper or absent hand washing between patient contacts.
- Molds within the facility.
- Food-borne illnesses.
- Dirty environment: floors, bathrooms, surfaces.
- Failure to wash hands, especially prior to meals.
- Cross contamination of utensils, linens and implements such as walkers, mats, etc.
- Improper handling clean linen.
- Improper isolation.
- Improper disposal of contaminated items.
- Improper handling and serving food.

For clinicians in leadership, tracking and trending infections should indicate:

- Source of infection.
- Source of the spread of the infections.
- Steps taken to prevent further spread of infections.
- The number of infections throughout the month.
- Tracking and trending infections to determine environmental impact of colds, flu or food-borne illnesses.
- Whether or not the infection is caused by actions of staff.
- Whether or not a staff is the cause of the infections.
- What training should occur with staff to control infection.
- The impact of interventions.

Universal Bloodborne Pathogens

To prevent acquiring blood borne infections such as hepatitis, AIDS, malaria, MRSA, herpes, etc. universal precautions are mandatory. Only some carriers may be identified by regular testing, therefore it is the best practice to assume all body fluids and patients are potential carriers of bloodborne infections. Blood is the single most common source of HIV, Hepatitis B and other bloodborne illnesses in

the work setting. Universal precautions are best applied regarding the management of feces, nasal secretions and vomitus because some source of infection may be present. When universal precautions are utilized in a broad spectrum of body fluids, it is less likely an unfortunate exposure will result. By protecting exposures, the chance infections will spread is greatly reduced.

A reasonable approach to lessening the risk of exposure would include mandatory annual in-service training classes, with skills competency testing on a regular basis.

Recommended Precautions:

- Wash hands:
 - Prior to and after touching a patient.
 - After using the restroom.
 - After touching hair, nose, mouth or face.
 - Immediately after touching blood or any body fluid.
 - After removing gloves.
 - Before and after feeding patients.
 - Before removing a bandage
 - Before applying new wound dressings.
 - Before and after providing medications.
 - Before and after administering an injection.
- Use gloves when:
 - Coming in contact with blood or body fluids.
 - Coming in contact with secretions.
 - Coming in contact with broken skin.
 - Handling any article contaminated by the above conditions.
 - Change gloves after removing wound dressing and before placing new dressing.
- Gowns:
 - When it is likely clothing will contact exposed skin.
 - When it is likely clothing will contact contaminated clothing.
 - When folding and storing clean linen if clothing will contact clean linen.