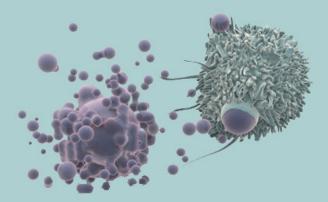


Infection Prevention and Control

www.free-power-point-templates.com

What is Infection Control?

 Infection Control is the prevention of the spread of clinically significant micro organisms that cause infection; or the potential to cause disease.



Infection Prevention and Control

Susceptible host

A person who is potentially vulnerable to an infection

Portal of entry

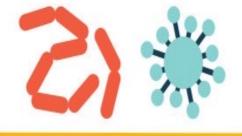
Site through which a pathogen can enter the susceptible host and cause infection, such as a

> urinary catheter or central line

Understanding the chain of infection

Infectious agents

Pathogenic (disease-causing) microbes such as bacteria, parasites, viruses, or fungi



Reservoirs

Hosts or habitats - such as humans, animals, or environment - where infectious agents live and reproduce

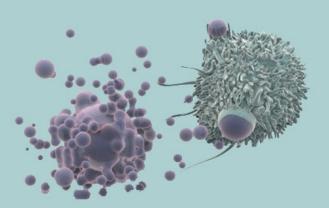
Definition of Infection

Presented on Admission (POA) (Community Acquired)

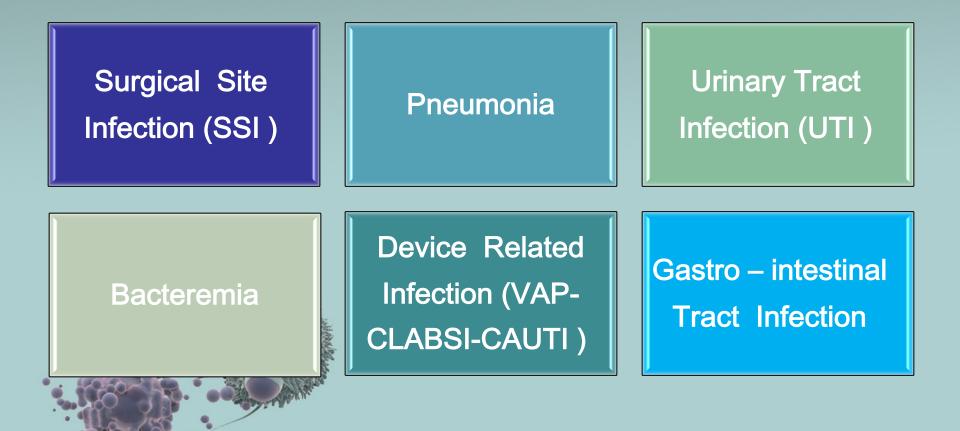
Infection that presented or incubating at the time of admission to the hospital at the first 2 calendar days from admission and according to each disease case definition

Health Care - Associated (nosocomial)

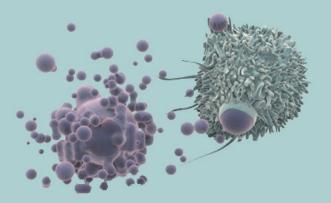
It is presented after 2 calendar days of admission or within a defined period after hospital discharge according to the disease incubation period



Categories of Nosocomial Infection

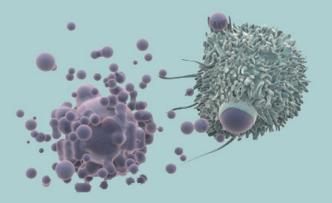


Surgical Site Infection (SSI)



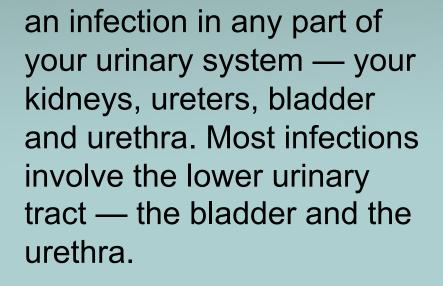
A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Surgical site infections can sometimes be superficial infections involving the skin only. Other surgical site infections are more serious and can involve tissues under the skin, organs, or implanted material

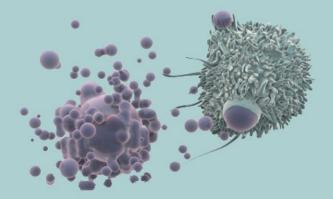
Pneumonia



Pneumonia is an infection in one or both lungs. It can be caused by bacteria, viruses, or fungi. Bacterial pneumonia is the most common type in adults. Pneumonia causes inflammation in the air sacs in your lungs

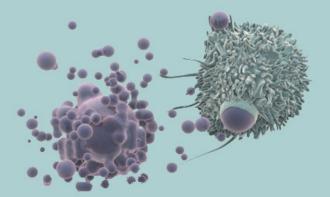
Urinary Tract Infection (UTI)





Bacteremia

is the presence of bacteria in the bloodstream

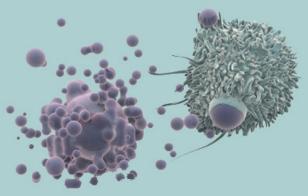


An <u>infectious disorder</u> caused by the use of a <u>medical device</u>

Device Related Infection (VAP-CLABSI-CAUTI)

VAP (Ventilator-associated pneumonia is a lung infection that develops in a person who is on a ventilator)

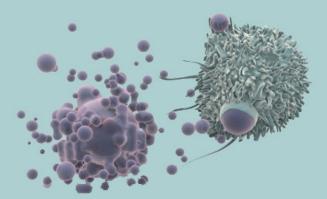
CLABSI (Central line-associated bloodstream infections ,primary laboratory confirmed bloodstream infection in a patient with a central line)



CAUTI (catheter-associated urinary tract infections, is a UTI where an indwelling urinary catheter was in place for more than two days

Gastro – intestinal Tract Infection

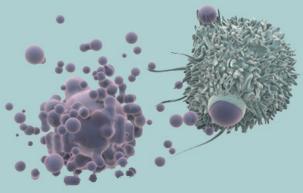
Gastrointestinal infections are viral, bacterial or parasitic infections that cause gastroenteritis



www.free-power-point-templates.com

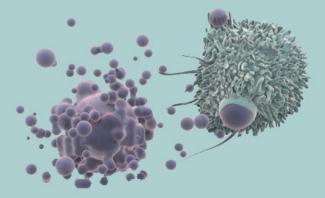
Patients at risk

- 1. immuno-compromised patients (oncology, dialysis, diabetic)
- 2. Prolonged hospital stay (Long stay patients)
- 3. Use of invasive devices (ICU)
- 4. Post procedures (Surgical)



Standard Precaution

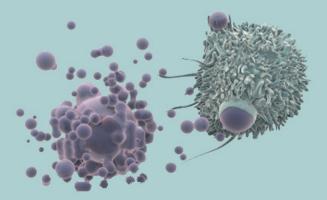
- a group of practices of infection prevention and control based on a principle that all blood, body fluids secretions, excretions (except sweat), non intact skin and mucous membranes may contain transmissible infectious agents regardless of their diagnosis.
- Applied to all patients regardless of the patient diagnoses



Elements Of Standard Precaution

- 1. Hand Hygiene
- 2. Gown
- 3. Mask
- 4. Face Protection
- 5. Gloves
- 6. Safe injection practices

7. Patient Care Equipment/
Devices
8. Worker Safety
11. Patient Placement and
Transport
12. Respiratory Hygiene / Cough
Etiquette

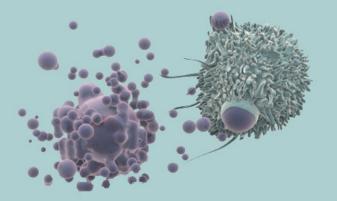


Hand Hygiene



Healthcare-associated
 pathogens are most often
 transmitted from patient to
 patient through the hands of
 healthcare workers.

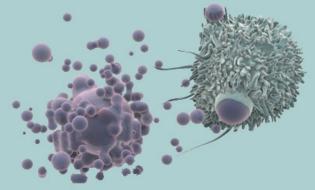
Hand Hygiene is the single most important measure for preventing the spread of microorganisms in healthcare settings.

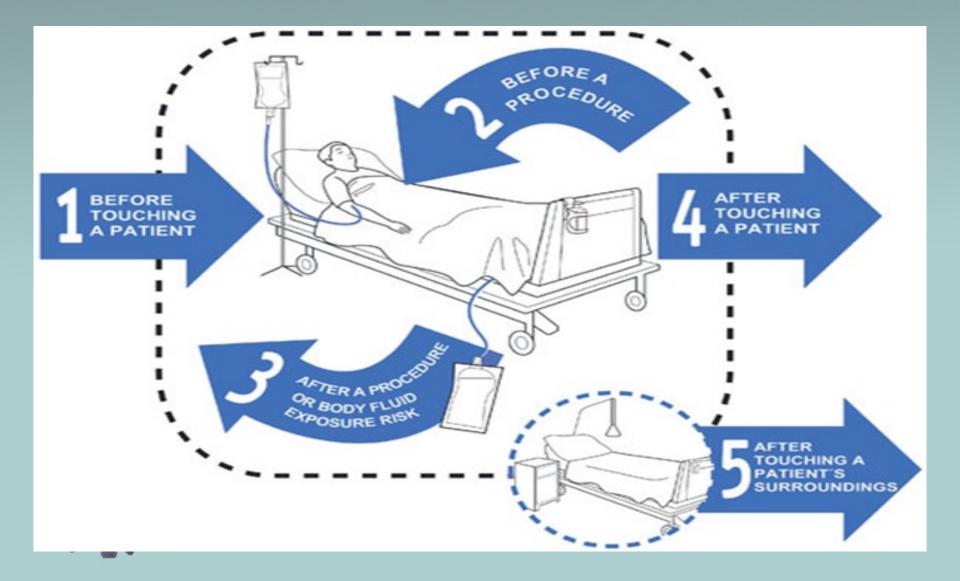


Hand Hygiene

WHO "My five (KEY) moments for hand hygiene"

- 1. Before touching a patient.
- 2. Before clean/aseptic procedure.
- 3. After body fluid exposure risk.
- 4. After touching a patient.
- 5. After touching patient surroundings.





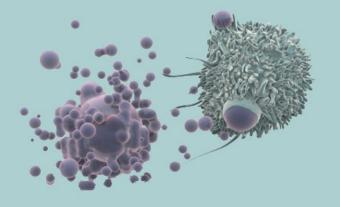
What, When, How?

What are types of Hand Hygiene?

- Hand washing.
 - 40-60 seconds
 - ✓ for visibly soiled hands & after using alcohol gel several times
 - ✓ when handling patients colonized/infected with spore-forming organisms
- Use of alcohol rubs/gels.
 20-30 seconds
 - \checkmark for hands that are not visibly soiled.

Surgical hand 'scrub.

- ✓ brush and nail file
- ✓ 5 minutes (first wash of the day); 2-3 minutes (in between operations)



Hand Rub



Hand Wash



(a) Wet hands under running water



(b) Apply soap and rub palms together to ensure complete coverage



(c) Spread the lather over the backs of the hands



(d) Make sure the soap gets in between the fingers



(e) Grip the fingers on each hand



(f) Pay particular attention to the thumbs



(g) Press fingertips into the palm of each hand



(h) Dry thoroughly with a clean towel

Personal Protective Equipment

A variety of barriers to protect both the patient and HCW's from the potential risks of cross infection whenever blood/body fluid splashes are expected to come in contact with mucous membranes, airways, skin and clothing



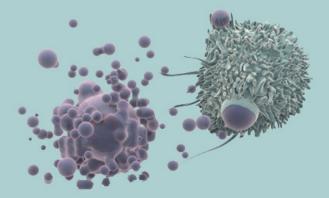






Safe Injection Practices

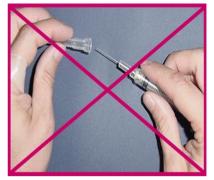
- Do not recap, bend, break, or hand-manipulate used needles.
- If recapping is required, use a one-handed scoop technique only.
- Place used sharps in puncture-resistant container.





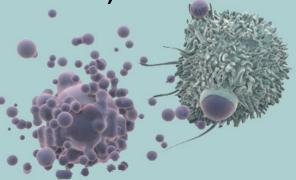
Finishing the Procedure

- · Discard the needle in sharps container
- NEVER REUSE!!!
- NEVER RECAP!!
- Remove gloves and wash your hands!!!

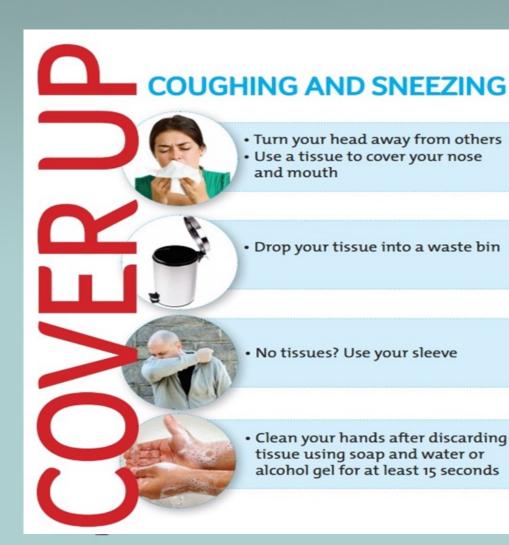


Patient Care Equipment

- Handle used patient care equipment soiled with blood, body fluids in a manner that prevents transfer of microorganisms to one's self, other patients and environments.
- Single use, disposable items must be disposed properly.
- <u>Reusable items</u> have to be been cleaned and reprocessed appropriately, prior to use on another patient based on the manufacture recommendation and the intended use (Spaulding criteria).



Respiratory Hygiene / Cough Etiquette







TRANSMISSION-BASED PRECAUTIONS

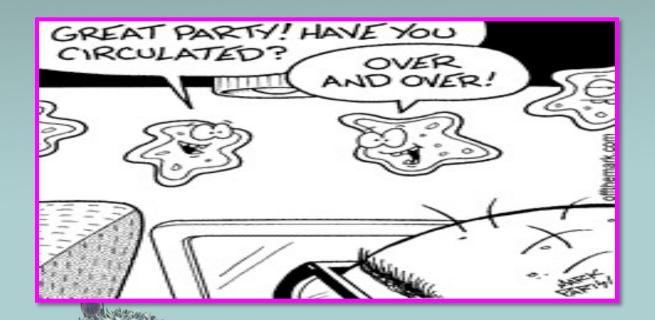
Airborne Precautions

Droplet Precautions

Contact Precautions

www.free-power-point-templates.com

Airborne precautions

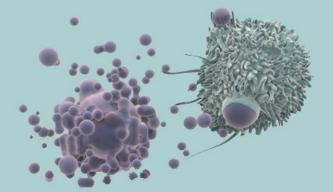


Causative agents of diseases under airborne precaution are less than 5 µm, thus can be carried away by air currents

www.free-power-point-templates.com

Diseases under airborne precaution
•Measles

Tuberculosis
 (Pulmonary/Lar
 yngeal)



• Varicella

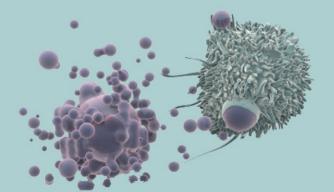
Airborne Precautions

Patient Placement

Single room with negative air pressure

12 air changes per hour

Room door closed



Airborne Precautions



Protection for HCW (health care worker)

Standard
 Precautions
 N95 respirator

Patient Transport

Limit movement
 Mask the patient
 with surgical mask

ISOLATED Patient Transfer

Hand Hygiene



sufficient information on the patients infection status must be given to the receiving area.

> Following transportion, trolleys/ chairs should be disinfected.

AIRBORNE PRECAUTIONS

With surgical mask before transfer.

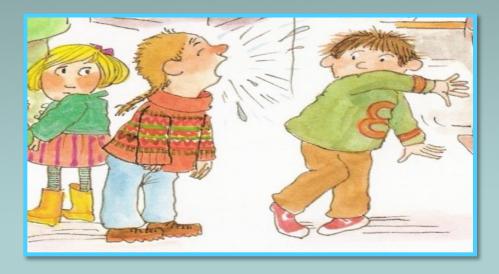
Mask the patient

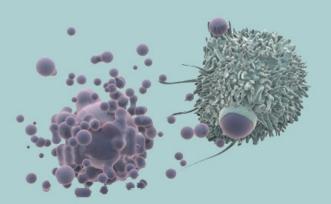


Wear PPES N95 Respirator

Infection Control Depatment KSUMC

Droplet Precautions

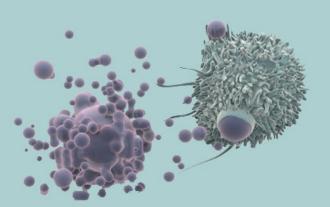




Causative agents of diseases under droplet precaution are greater than 5 µm. They can travel up to 3 feet (1mtr)

Diseases under droplet precaution

 Haemophilus influenzae type B disease, including meningitis, pneumonia, sepsis



Streptococcal (group A), scarlet fever in infants and young children

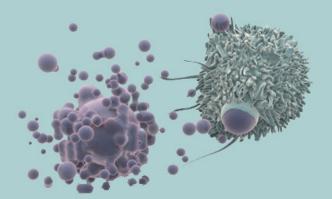
Influenza, Mumps

Droplet Precautions

Patient placement

Private room

Cohort nursing



www.free-power-point-templates.com

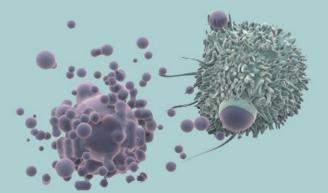
Droplet Precautions



Protection for HCW

Standard precautions Surgical mask if working within 3 feet of the patient

Patient Transport



Limit movement Mask the patient with surgical mask

ISOLATED Patient Transfer

.

i



sufficient information on the patients infection status must be given to the receiving area.

> Following transportion, trolleys/ chairs should be disinfected.

DROPHET PRECAUTIONS

> Mask the patient With surgical mask before transfer..

Hand Hygiene

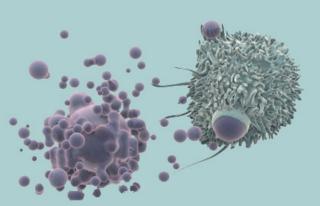


Wear PPEs. Surgical Mask

Infection Control Depatment KSUMC

Contact Precautions

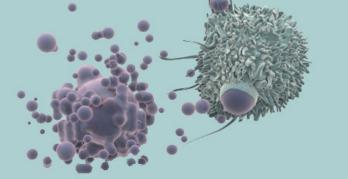




Use In addition to standard precaution, for patients known or suspected to have serious illness transmitted through contact

Diseases under contact precaution

- Multi-drug resistant microorganisms (MDRO's), VRE, MRSA, ESBL, *B.cepacia*
 - RSV infection in infants, young children and immunocompromised patients Clostridium defficile
 - enterocolitis

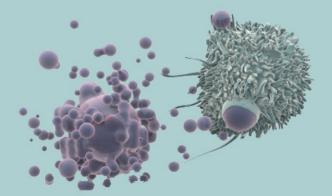


Contact Precautions

Patient placement

• Private room

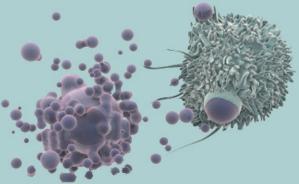
 Cohort nursing



www.free-power-point-templates.com

Contact Precautions





Protection for HCW

- Handwashing
- Gloves
- Gown

Patient Transport

Limit movement

ISOLATED Patient Transfer

.

ñ



sufficient information on the patients infection status must be given to the receiving area.

> Following transportion, trolleys/ chairs should be disinfected.

TEXATIOD CROINUASEINI

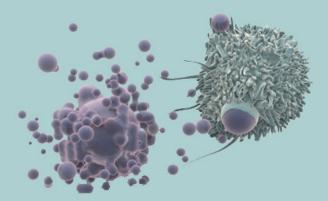
Wear PPEs. Gown & Gloves contain the patient's source of infection before transfer.

Hand Hygiene



Infection Control Depatment KSUMC





www.free-power-point-templates.com