INFECTION CONTROL

It is EVERYONE’S Responsibility to prevent the spread of infection in the healthcare environment.

Hand washing and the use of waterless hand antiseptics are the most effective means of controlling the spread of infection. This practice also supports the readiness for the provision of patient care and other support services and reduces the potential risk related to emergent situations. All healthcare staff will follow the hand hygiene requirements identified.

Wash hands with soap and water

- when they are visibly soiled and
- if exposure to *Bacillus anthracis* and/or *Clostridium difficile* is suspected

When using soap and water to decontaminate hands:

- Wet hands with water
- Apply soap product and rub vigorously for at least 15-20 seconds covering all surfaces of the hands and fingers
- Rinse with water and dry thoroughly with a disposable towel
- Turn off faucet with a disposable towel

When hands are not visibly soiled an alcohol-based hand rub may also be used. Alcohol hand rub may be found at entrances to the hospital, at elevators and between each patient room. When using alcohol-based hand rubs or sanitizers:

- Use a dime-sized squirt of gel or a golf ball-sized ball of foam
- Rub hands, covering all surfaces, until they are dry (at least 15-20 seconds)
- Avoid operating equipment until your hands are dry—alcohol is flammable!

Decontaminate hands:

- Before having direct contact with patients
- After contact with patient’s direct skin
- After contact with body fluids or excretions, mucous membranes, non-intact skin
- If moving from a contaminated body site to a clean body site during patient care
- After contact with inanimate objects. Including medical equipment in the immediate vicinity of the patient
- After removing gloves
- Before and after procedures
- Before donning sterile gloves
- Before eating
- After using the restroom

*Students with open wounds and/or weeping dermatitis should refrain from all direct patient care activities because infection can occur through non intact skin. Consult with your instructor for guidance.*

See also policy: Hand Hygiene.
Standard Precautions

*Standard Precautions are used with ALL Patients regardless of their diagnosis or presumed infection status. All blood and body fluid is treated as possibly infectious. It is your responsibility to wear appropriate Personal Protective Equipment (PPE). Be sure that you ask for the location of the PPEs on each unit on which you work.*

- Wear gloves when in contact with blood, body fluids, secretions and excretions (except sweat) or non-intact skin.
- Wear goggles, mask, face shield if splashes to the face are possible
- Wear a gown if possible contact to your body or clothing.
- Use a mouth to mask device or bag mask device for resuscitation to avoid mouth to mouth contact
- Be careful with sharps. **If you have a needle stick, sharps accident or unprotected exposure to blood or body fluids notify the charge nurse or Unit Director and your instructor IMMEDIATELY!**

Transmission Based Precautions

Transmission based precautions are designed for patients with known or suspected for transmissible disease. For a patient that is in transmission based isolations, the door of the patient’s room will have a sign posted to alert you to the precautions that must be taken. Follow those directions without fail. If you have questions ask the Charge Nurse or other RN.

*Please note: Students are not allowed to enter a room with Airborne Infection Precautions. This is because to be protected from the airborne organism the healthcare worker must wear an N95 and CHRISTUS Santa Rosa is not able to fit test students to ensure that they would be protected using the brand of N95s used in the facility.*

Transmission Based Isolation Precautions include: Contact, Enhanced Contact Precautions, Droplet Precautions, Airborne Infection Precautions. You will also see Protective Precaution signs. This sign and precautions are used to protect patients who are highly susceptible to infections due to certain diseases or therapeutic regimens which decrease their ability to fight off infection, such as cancer, burns, severe dermatitis, total body irradiation, high level steroid therapy.

Waste Disposal & Contaminated Items

Red bag in a Biohazard labeled trash container
- Isolation waste
- Waste saturated, caked or able to drip infectious body fluids.
- Cultures and stocks of infectious agents
- Unfixed tissue from surgery, pathology, autopsy

Trash can with Biohazard Label and regular Trash bag
- Waste with small amount of blood or body fluids
- Foleys
- Suction supplies
- Drainage tubes

Contaminated Reusable Items are placed in a biohazard labeled container and marked reusable. Contaminated equipment is disinfected prior to transport and/or as appropriate covered with a gray bag. Used or contaminated laundry is placed in a blue bag. Sharps are placed in the red Sharps container. Reusable contaminated sharps are placed in a puncture resistant, leak proof container color coded red or with a biohazard label.

If Student’s clothing is soiled with blood or body fluids or other potentially infectious material (OPIM) notify the Unit Director or Charge Nurse immediately. Use gloves, remove contaminated clothing and wash exposed skin areas thoroughly. If non-intact skin or mucous membrane exposure was noted, complete an incident report, notify your instructor immediately.