

## AUGUST 2023 HIPC NEWSLETTER

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### Important Dates

- | World Hand Hygiene Day- may 5th

### Guideline Updates Quick Links

- <https://www.cdc.gov/hai/vap/vap.html>
- <https://www.cdc.gov/nhsn/pdfs/pscmanual/6pscvcapcurrent.pdf>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9163435/#:~:text=Batra%20P.%2C%20Soni,Google%20Scholar%5D>

## IPC PRACTICES IN ICU

Standard precautions should be applied for all patients in the ICU. In addition, transmission- based precautions should be applied to standard precautions to prevent infections where route of transmission is known.

- Hand washing:** Follow 6 steps during hand washing.
- Universal Precautions:** All staff should follow standard precautions while handling patients or samples. Wear plastic aprons and gloves for all procedures. Remove and discard them immediately after caring for each patient. Use gloves for all patient contact. Wear masks while examining patients with uncertain diagnosis
- Skin preparation and use of antiseptic agents**
  - | Gross contamination at the site of incision should be removed before the antiseptic skin preparation.
  - | Antiseptic skin preparation should be applied in concentric circles moving away from the proposed incision site to the periphery; allowing sufficient prepared area to be included.
- ICU footwear:** Special well-fitting footwear with impervious soles should be worn in the ICU. Shoes should be preferred over slippers. Footwear should be regularly cleaned to remove splashes of blood and body fluids. The ICU footwear must not be taken out of the ICU to other areas of the hospital.
- Bundle approach to prevent device-associated infections**

Since device-associated infections form a major burden of HAIs, a bundled care approach has proven to achieve high levels of compliance with better outcomes

Implementation of care bundles creates an important opportunity to deliver evidence based and safe healthcare to patients using a multimodal or multidisciplinary approach. Training of staff is one of the most important components of a care bundle for prevention of HAI.

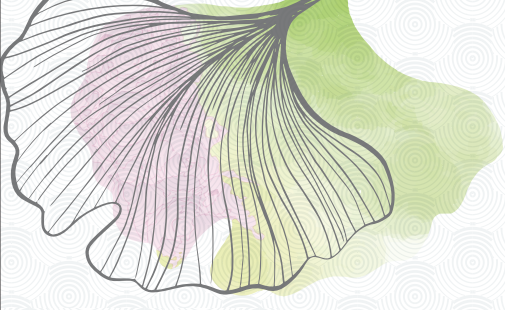
### Care bundles for prevention of device-associated infections are:

- | Ventilator-associated pneumonia (VAP) bundle
- | Central line-associated bloodstream infection bundle
- | Catheter-associated urinary tract infection bundle

## INFECTION CONTROL PRACTICES IN HIGH RISK AREAS/ HIGH RISK PROCEDURES

- | Visitor's restriction is done i.e., 2 times a day 2 people during each visit.
- | Follow strict hand hygiene practice based on tWHO guidelines.
- | Follow strict asepsis and it is the state of being free from disease-causing micro-organisms or practices used to promote or induce asepsis in an operative field of surgery or medicine to prevent infection.



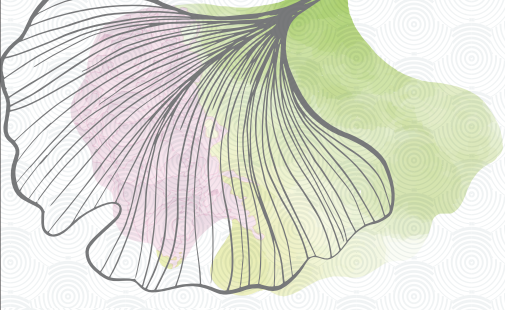


- | Follow standard precautions to prevent the spread of blood borne pathogen.
- | Follow transmission based precautions-airborne, droplet and contact based precautions where ever applicable.
- | Hand rubs are available in every patient care area
- | Cleaning of high risk areas are done thrice daily.
- | Follow proper biomedical waste management protocol.
- | Changing of linen is done on daily basis and whenever become soiled.
- | Damp dust of bed frames, railings, I/V stands, lockers etc are done on daily or after each patient discharge by using prescribed disinfectant solution.
- | Disinfect the patient's unit with prescribed disinfectant solution after each patient transfer / discharge/ death.
- | Quality of sterilization of CSSD items and its expiry date should be checked every day and before its usage.
- | Appropriate use of personal protective equipment (PPE)
- | Following aseptic techniques stringently
- | Paying attention to established practices for cleaning and decontamination of soiled instruments, followed by either sterilization or high-level disinfection
- | Appropriate disposal of biomedical waste (BMW)
- | Improving safety in operating rooms and other high-risk areas where the most vulnerable patients are housed and there is a high risk of exposure to infectious agents
- | Maintaining a safe working environment and safe work practice
- | Soiled patient-care equipment should be handled in a manner that prevents exposure of skin and mucous membranes and contamination of clothing and environment
- | Disposable patient-care equipment should not be reused and must be discarded into an appropriate container in accordance with the hospital waste management policy and the Biomedical Waste Management and Handling Rules 2016, 2018
- | **Protection during aerosol-generating procedures:** for aerosol-generating procedures associated with pathogen transmission, appropriate PPE should be used in an airborne infection isolation room. N95 masks should be worn by persons performing aerosol-generating procedures (such as endotracheal suction and bronchoscopy) on patients with respiratory infections

**Use droplet precautions for patients known or suspected to be infected with pathogens transmitted by respiratory droplets that are generated by a patient who is coughing, sneezing or talking or during procedure such as suctioning and Bronchoscopy**





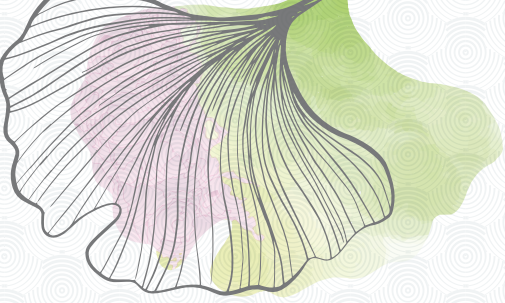


## **POLICY FOR VISITORS AND ATTENDANTS**

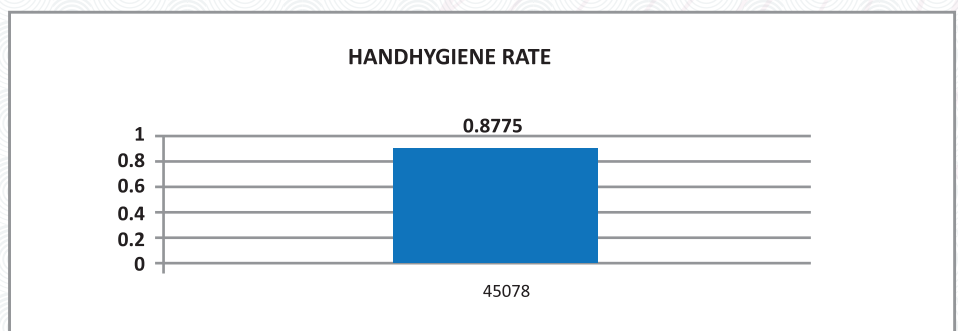
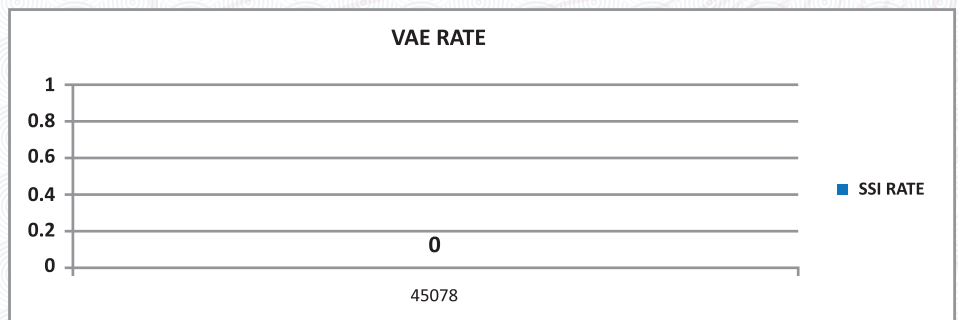
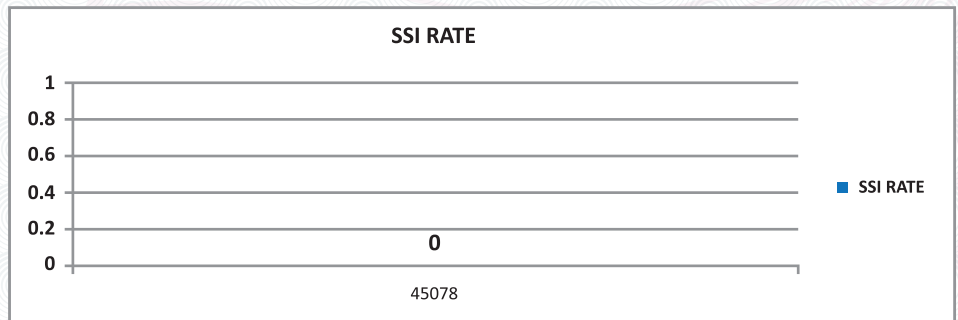
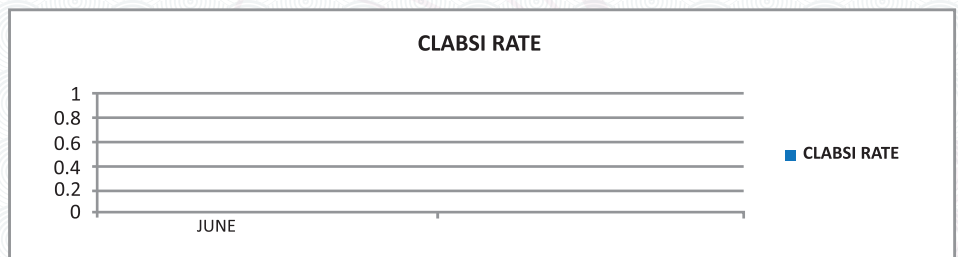
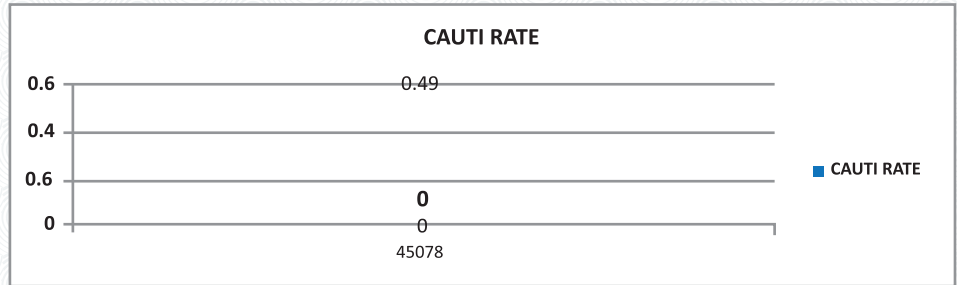
**The following points should be considered for visitors and attendants.**

- | Limit visitors to persons necessary for patient's emotional well-being and care. Visitor restrictions apply to all visitors, including staff members and their families. Visitors should limit their movement within the facility. Visitors should not sit on hospital beds or put their feet on beds.
- | Visitors should clean their hands with hand rub before entering and when leaving the room. An alcohol hand rub should be available at the entrance of the facility/ unit/ ward, along with a poster displaying instructions for using the hand rub.
- | Before entering the room, visitors must enquire at the nursing station for instructions and for gown and mask, if indicated. Visitors' bags and other belongings should be left outside the patient area.
- | Flowers/ bouquet should not be allowed in patient room.
- | The patient and the relatives must be educated about the cause, spread and prevention of infection, if any. The need for isolation and restriction of visitors should be discussed with them.
- | The ward nursing staff and the doctors concerned shall have the responsibility of informing the patients' relatives of the measures to be taken and the importance of restriction of visitors. This should be done at the time of patients' admission.
- | Children below 12 years should not be allowed into isolation areas. One attendant should be allowed to stay in the ward with the patient who should be taught to practice hand hygiene before and after touching the patient.
- | Mobile phones have the potential to transmit infection by contact. There should be a policy on the use of mobile phones and visitors should be taught to decontaminate the phone with a hand rub.





### HAI DATA-MAY 2023



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