

# WINK

WHAT I NEED TO KNOW

A WINK WILL MAKE YOU THINK.....

Infection Control and Prevention:  
Transmission-Based Precautions

# INFECTION CONTROL AND PREVENTION: TRANSMISSION-BASED PRECAUTIONS

This **WINK** must be completed by:

- All staff members with direct patient contact

Objectives:

- Verbalize methods used to prevent and control the spread of infection
- Demonstrate the correct sequence of donning/removing/disposal of Personal Protective Equipment (PPE)
- Identify the correct **STOP** sign to be used according to how the disease is transmitted

# WHY ARE WE DOING THIS?

To provide guidelines, educate and standardize methods used to control and prevent the spread of hospital-associated infections (HAIs)

# HAI DATA AND STATISTICS

- Annual direct cost for HAIs ranges from \$35.7 billion to \$45 billion nationwide
- Benefits of prevention is from \$25.0 to \$31.5 billion
- Approximately 70 percent of infections are preventable



# HAND HYGIENE SAVES LIVES

- Hand washing is like a "do-it-yourself" vaccine—
  - Simple
  - Most effective way to reduce HAIs
  - Prevents the spread of infection
- Your 5 moments for Hand Hygiene are:
  - Before patient contact
  - Before a clean/aseptic procedure
  - After body fluid exposure risk
  - After patient contact
  - After contact with patient's surroundings

See Procedure: [Hand Hygiene SMH IP 4000](#)



# TWO FORMS OF HAND HYGIENE

## When to Use Soap and Water

- When hands are visibly soiled
- When caring for patients with diarrhea and/or *Clostridium difficile* (*c. diff*)

Note: For *c. diff*/diarrhea, soap and water must be followed by the use of alcohol hand rub

## When to Use Alcohol Hand Rub

- Many routine brief activities do not require hand washing; the use of an alcohol-based hand sanitizer is sufficient.
- Examples:
  - taking vitals
  - administering medications
  - delivering food



# TWO FORMS OF HAND HYGIENE

## How to Use Soap and Water

- Turn water on
- Wet hands with water
- Apply 1 pump of soap
- Rub together for 15 - 20 seconds
- Rinse soap from hands
- Dry hands thoroughly
- Use a clean paper towel to turn off the faucet

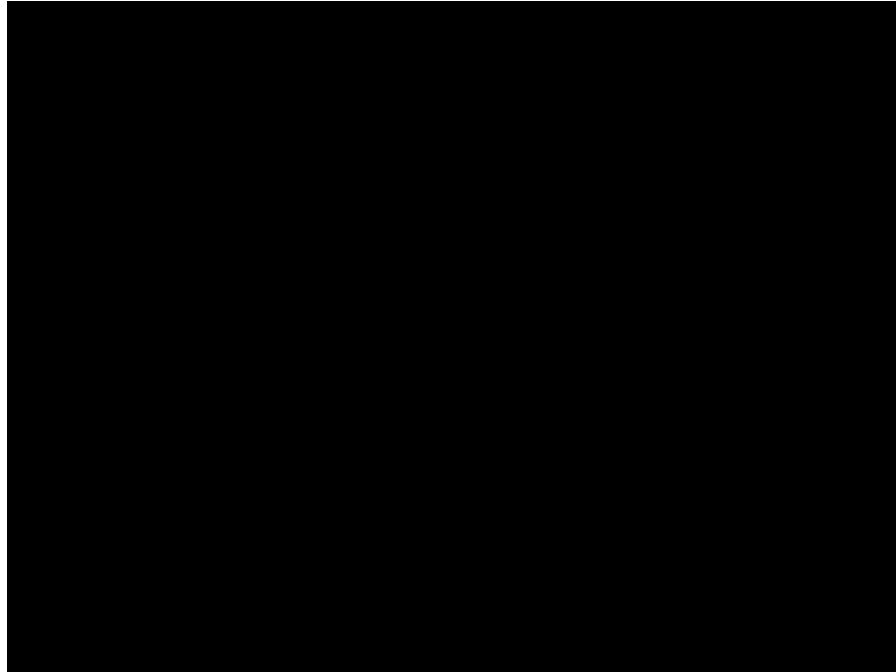
## How to Use Alcohol Hand Rub

- Apply 3-5 ml of alcohol-based hand-rub to dried hands
- Use scrubbing action for no less than 20 seconds or until dry



# PUT YOUR HANDS TOGETHER

Click on box below to watch Video:



[http://www.cdc.gov/CDCTV/HandsTogether/Mp4/HandsTogether\\_OC.mp4](http://www.cdc.gov/CDCTV/HandsTogether/Mp4/HandsTogether_OC.mp4)



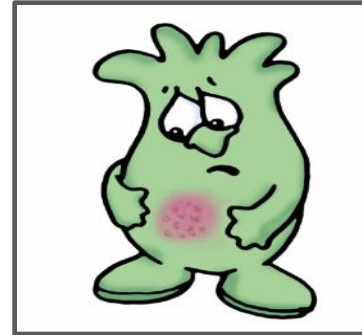
# STANDARD PRECAUTIONS

- **Standard Precautions - Applies to all patients**
  - Hand hygiene
  - Clean and disinfect shared equipment before using on another patient
  - Safe injection practices
  - Cough etiquette
  - Use PPE as needed

# TRANSMISSION-BASED PRECAUTIONS

## ○ Transmission-Based Precautions

- Contact (e.g. MRSA, c. diff, patients with diarrhea, uncontained wound with copious drainage, etc)
- Droplet (Influenza, Meningitis, etc)
- Airborne (Tuberculosis, Measles, etc)



## ○ Used for patients:

- Known to be infected
- Suspected of being infected

**REMEMBER:** PPE must be donned before entering the patient's room

See Procedures: [Two Tiered Transmission Based Isolation SMH IP 4200](#), [C.diff SMH IP 4150](#), [MDRO SMH IP 4225](#), [Appendix A SMH IP 4225 A](#)

# CONTACT PRECAUTIONS

## STOP

Visitors: Please report to the Nurse's Station  
for instructions **BEFORE** entering room

*Visitantes, por favor, dirigirse a la Estación de Enfermería  
para recibir instrucciones ANTES de entrar a la habitación*

## CONTACT PRECAUTIONS

- 1 Perform hand hygiene before entering and again before exiting this room
- 2 Wear gown and gloves upon entering and discard before exiting this room



SMH 4648 Rev. 4/16

PPE - Gown and gloves must be:

- donned before entering patient's room
- removed and discarded inside the patient's room before exiting

### Examples:

1. Multidrug-resistant organisms (MDRO) causing infections
2. Neonatal Herpes simplex
3. Impetigo
4. Wounds with copious/ noncontained drainage
5. Pediculosis
6. Scabies
7. Viral/hemorrhagic conjunctivitis
8. Herpes Zoster (Shingles) localized
9. Varicella (Chickenpox) and Herpes Zoster (Shingles) disseminated\*

\* Include Airborne

# CONTACT PRECAUTIONS

## STOP

Visitors: Please report to the Nurse's Station  
for instructions **BEFORE** entering room

*Visitantes, por favor, dirigirse a la Estación de Enfermería  
para recibir instrucciones ANTES de entrar a la habitación*

## CONTACT PRECAUTIONS

**1** Perform hand hygiene before  
entering and again before exiting  
this room

**2** Wear gown and gloves upon  
entering and discard before exiting  
this room



USE  
SOAP & WATER  
AND  
ALCOHOL RINSE  
AFTER CONTACT

SMH 4648-A Rev. 4/16

PPE - Gown and gloves must be:

- donned before entering patient's room
- removed and discarded inside the patient's room before exiting

### Examples:

1. Patients with diarrhea (defined as having 3 or more loose/watery stools in a 24-hour period that are not related to a known cause, e.g. bowel prep, etc.)

2. Enteric infections caused by:

- *Clostridium difficile* (*C. diff*)
- Hepatitis A
- Shigella
- Norovirus
- Rotavirus

See Procedure: [C.diff SMH IP 4150](#)

# DROPLET PRECAUTIONS

## STOP

Visitors: Please report to the Nurse's Station  
for instructions **BEFORE** entering room

*Visitantes, por favor, dirigirse a la Estación de Enfermería  
para recibir instrucciones ANTES de entrar a la habitación*

## DROPLET PRECAUTIONS

**1** Perform hand hygiene before entering and again before exiting this room

**2** Wear a surgical mask upon entering and discard before exiting this room



PPE - Surgical mask must be:

- donned before entering patient's room
- removed and discarded inside the patient's room before exiting

### Examples:

1. Influenza
2. Meningitis (Neisseria meningitides)
3. Rubella
4. Mumps
5. Pertusis
6. Respiratory Syncytial Virus (RSV)\*

\*Include Contact for infants and children

# AIRBORNE PRECAUTIONS

## STOP

Visitors: Please report to the Nurse's Station  
for instructions BEFORE entering room

*Visitantes, por favor, dirigirse a la Estación de Enfermería  
para recibir instrucciones ANTES de entrar a la habitación*

## AIRBORNE PRECAUTIONS

- 1 Perform hand hygiene before entering and again before exiting this room
- 2 Wear a N95\* mask upon entering and remove after exiting this room
- 3 Private negative airflow room only, keep door closed at all times



\* Visitors should wear a surgical mask  
when in room with patient

- PPE - N95 mask must be:
- donned before entering patient's room
  - removed after exiting the patient's room

### Examples:

1. Tuberculosis
2. Measles
3. Chickenpox (Varicella), Herpes Zoster (Shingles) disseminated\*

\*Include Contact

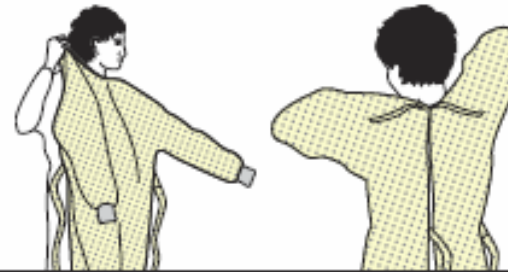
SMH 4648-C Rev. 4/16

See Procedure: [TB SMH IP 4115](#)

# CORRECT SEQUENCE FOR DONNING PPE

## 1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



## 2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



## 3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



## 4. GLOVES

- Extend to cover wrist of isolation gown

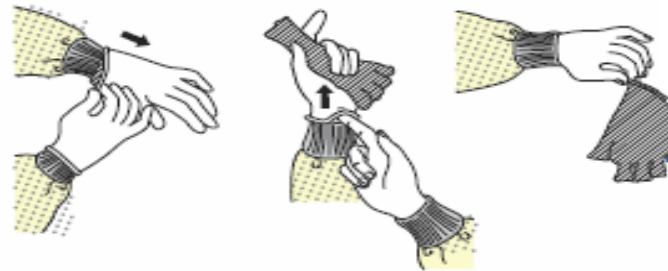


# CORRECT SEQUENCE FOR REMOVING PPE

Except for respirator, remove PPE at doorway or in anteroom. Remove respirator after leaving patient room and closing door.

## 1. GLOVES

- Outside of gloves is contaminated!
- Grasp outside of glove with opposite gloved hand; peel off
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist
- Peel glove off over first glovet
- Discard gloves in waste container



## 2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield is contaminated!
- To remove, handle by head band or ear pieces
- Place in designated receptacle for reprocessing or in waste container



## 3. GOWN

- Gown front and sleeves are contaminated!
- Unfasten ties
- Pull away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard



## 4. MASK OR RESPIRATOR

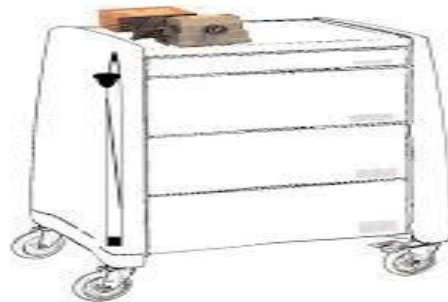
- Front of mask/respirator is contaminated — DO NOT TOUCH!
- Grasp bottom, then top ties or elastics and remove
- Discard in waste container





# PLACING A PATIENT ON ISOLATION:

1. Call Sterile Processing Department (SPD) to order supplies
2. Obtain isolation cart or hanger
3. Select the appropriate **STOP** sign
4. Place large **STOP** sign outside patient's door and mini **STOP** sign on patient's chart
5. Update Patient Factor Screen (PFS) with isolation type



CONTACT  
INFECTION CONTROL AT:  
EXT 28060  
OR EMAIL  
DG-SM INFECTION CONTROL

# RESOURCES

- ◉ SMH IP 4200 Two Tiered Transmission Based Isolation
- ◉ SMH IP 4225 A - Appendix
- ◉ SMH IP 4000 Hand Hygiene
- ◉ SMH IP 4225 Preventing the Spread of Multi-Drug Resistant (MDRO) Organisms in Hospital
- ◉ SMH IP 4115 Mycobacterium Tuberculosis Control Program
- ◉ SMH 4150 Prevent and Reduce the Risk of Infection and Spread of Clostridium difficile
- ◉ SMH IP 4028 Exposure Control Plan
- ◉ NPSG.07.01.01 Comply with either the current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines or the current World Health Organization (WHO) hand
- ◉ Centers for Disease Control and Prevention. Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare settings 2007.
- ◉ Centers for Disease Control and Prevention. (2008). Put Your Hands Together Video, Retrieved from <http://www.cdc.gov/cdctv/handstogether/>