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IPC.37.2 The anti-biogram is regularly discussed by infection prevention and control committee.

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**Standard Intent:**

Current evidences clearly demonstrate that the inappropriate use of broad-spectrum antibiotics is associated with the development of antibiotic resistant bacteria. Availability of anti-biogram helps in organizing a systematic approach to optimize the utilization of antimicrobials that subsequently improves patient's outcomes, ensures cost effective therapy, and minimizes adverse consequences, including antimicrobial resistance, toxicity, morbidity and mortality. Each hospital must have antimicrobial sensitivity pattern (Anti-biogram Report) that is produced at least yearly and based on high quality diagnostic microbiology services and discussed regularly during Infection Control Committee meetings. Organizational antimicrobial prescribing guidelines should be updated based on anti-biogram.

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**IPC.38 The hospital adopts safe injection practices that minimize or prevent transmission of infection.**

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IPC.38.1 Staff use aseptic technique for injections preparation.

IPC.38.2 Staff use sterile syringes and needles.

IPC.38.3 Staff use single-dose vials as appropriate.

IPC.38.4 Staff use mask during injecting a medicine or placing a catheter into a spinal place.

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**Standard Intent:**

Injected medications are commonly used in healthcare settings for the prevention, diagnosis, and treatment of various illnesses. Unsafe injection practices increase the patients and healthcare providers' risk to be exposed to infectious and non-infectious adverse events. Unsafe injection practices have been associated with a wide variety of procedures in different hospital settings. Safe injection practices should be implemented by the hospital as a part of the standard precautions and guided by written policies and procedures that address required aseptic techniques, appropriate use of single-dose vials and infection control practices for special lumbar puncture procedures.

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**IPC.39 The hospital implements evidence-based interventions to prevent ventilator-associated pneumonia.**

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IPC.39.1 The hospital adopts and implements care bundle for prevention of ventilator-associated pneumonia (VAP) consistent with recognized professional practices