Infection Control

PTA1010

Objectives

Upon completion of this lecture the student will:

- Understand the cycle of infection
- Become familiar with the types of precautions
- Become familiar with the application and removal of protective garments

Terms to Know:

- AIDS
- Asepsis
- Contamination
- Decontamination
- Disinfection
- Health care-associated infection (HAI)
- Hepatitis
- Infection
- Isolation
- Medical asepsis

- Microorganism
- Nosocomial
- Pathogen
- Personal protective equipment (PPE)
- Respiratory hygiene
- Sepsis
- Sterile
- Sterilization
- Surgical asepsis
- Wound

OSHA Mandated Safety and Health Controls

- Training and administrative controls: Annual training required for all healthcare professionals
- Engineering Controls: Handwashing stations, Needleless IV systems, Sharps Containers, Eyewash stations, Biohazard labels
- Work Practice Controls: provide and train employees in PPE use



Nosocomial Infections or Healthcare associated infection" (HAI)

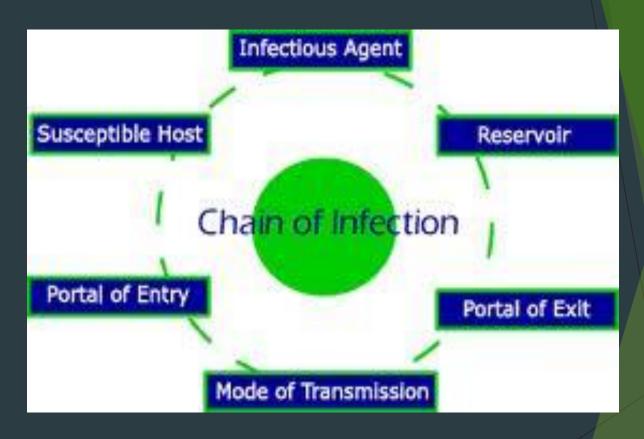
- Facility acquired infection
- Caregiver to patient contact
- Patient to patient contact

the infection must occur:

- up to 48 hours after hospital admission
- up to 3 days after discharge
- up to 30 days after an operation
- in a healthcare facility when someone was admitted for reasons other than the infection



Cycle of Cross-contamination



The goal is to break the cycle at any stage

Caregiver Responsibility

Caregivers provide barrier to infection by:

- Hand hygiene
- Gloves and protective equipment
- Proper removal of dressings
- Proper disposal of needles, dressings
- Using isolation techniques

Two Methods for Destroying Microorganisms

- Sterilization
 - **▶**Steam
 - Gas
 - **▶** Ultraviolet
 - ► Dry heat

- Altering Environment
 - Changing light
 - Oxygen
 - Changing moisture

Aseptic Techniques

- Protecting the caregiver and others
- Barriers: skin and cilia in the lungs
- Cleanliness of equipment, floors, and restroom
- Proper control of heat, light, and air
- PPE use and disposal
- ► Hand hygiene activities

Medical Asepsis:

Designed to keep pathogens in a specific area, object, or person

Goal = CONFINE pathogen

- May involve patient isolation
- Use of the "clean approach"

Surgical Asepsis:

Sterilization of all instruments, drapes, and other inert objects that may come in contact with the surgical site

Creating a sterile field

Goal = ELIMINATE pathogen

- Perform a surgical hand scrub
- Donning gloves, mask or respirator, goggles or face shield and gown

Modes of Transmission of Pathogens

- Direct contact (most common)
- Air currents
- Contaminated linen or clothing
- Inadequately cleansed eating utensils, instruments, toys, or equipment
- Moisture droplets
- Routine hand hygiene techniques DO reduce crosscontamination of pathogens.

Primary Transmission Routes

- Contact: direct/indirect ie linen
- **Droplet:** sneeze, cough, talking
- Airborne: evaporated droplet dust particle
- Common vehicle (food, H2O)
- Vector (flies, rats, mosquitoes)

Standard Precautions

- Group of infection prevention practices that apply to all patients
- All blood, body fluids, excretions except sweat, secretions, nonintact skin, and mucous membranes may contain transmissible infectious agents.



Protection or Precautions:

- Protects persons or objects from contamination or infection
- Standard Precautions
- Transmission-Based Precautions
 - Droplet
 - Airborne
 - Contact



Know the MODE of Transmission!

Standard Precautions - Barriers

- ▶ Gloves
- Protective clothing
- Eye protection
- ► Face shield
- **►** Mask
- Mouthpiece CPR

Standard Precautions - Sharps

- Dispose of sharps in puncture proof container immediately after use
- Do not uncap or expose needles until required for use
- Do not re-cap needles
- Broken glass use rigid board or dust pan – never pick up with gloved hands

Standard Precautions - Miscellaneous

No eating, smoking, drinking, applying cosmetics/lip balm, work with contact lenses

► Handle linen carefully

Report incident of contact with patient's body fluid

Transmission Precautions

https://www.cdc.gov/quarantine/index.html

Based upon method pathogens are transmitted

Patient will be isolated

Precautions used in addition to Standard Precautions

Routes of Transmission

- Contact: direct (person) or indirect (object)
- Respiratory droplets: sneezing, coughing, talking
- ► Airborne: small infectious particles in the respirable size range
- **Environmental**: contaminated water or food

Airborne Diseases: remain in air

- Measles
- **►**Tuberculosis
- **►** Varicella



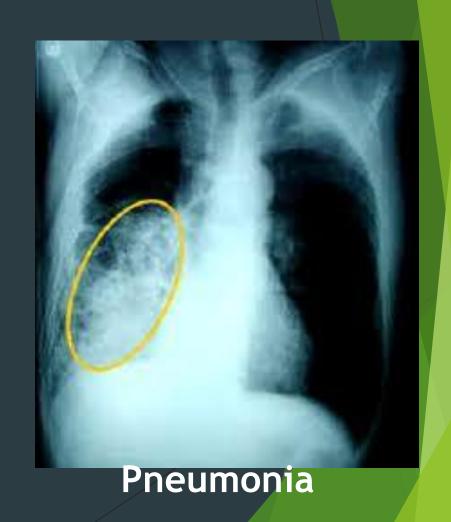
Airborne Precautions

- Handwashing
- ► Mask N-95 respirator
- Room with negative airflow
- Transport with mask
- https://www.youtube.co m/watch?v=7xnr60sXnXA



Droplet Transmission Diseases: close contact

- Meningitis
- Influenza
- Strep throat
- Pneumonia



Droplet Precautions

- Handwashing
- ► Mask 3 ft from patient
- Private room
- Transport with mask



Contact Transmission

- Skin infections
- ► GI Tract
- **▶** Wounds
- **►**MRSA



Contact Precautions

- Handwashing with antiseptic soap
- Gloves
- Gown
- May need mask
- Private room
- Dedicated equipment



Protective Isolation (reverse)

Used to protect a patient with condition or disease with high risk of infection from others:

Open burns and wounds

Compromised immune system

Sepsis

Protective Isolation Precautions

- ▶ Handwashing
- Caregiver wears
 - Gown
 - **►** Mask
 - Gloves
 - ► Possibly Cap



Don/Doff Protective Equipment https://www.youtube.com/watch?v=iwvnA_b9Q8Y

Donning

- 1. Wash Hands
- 2. Gown
- 3. Mask/respirator
- 4. Goggles
- 5. Gloves

See pages 39-43 in Pierson

Doffing:

- 1. Gloves
- 2. Goggles
- 3. Gown
- 4. Mask/Respirator
- 5. Wash hands

See pages 44-45 in Pierson