PURPOSE:
To provide an environment which minimizes the risk of infection for patients and personnel.

APPLIES TO: All Wound Care Center Employees

SCOPE: Program Director, Administrative Assistant, RNs, and Hyperbaric Techs

RESPONSIBLE PERSON: Infection Control Officer

POLICY:
A. PERSONNEL ILLNESS AND EXPOSURES
Employees with communicable disease must report to the Program Director and to the Employee Health nurse to assess their potential risks to other personnel and to patients. Those with upper respiratory or gastrointestinal infections should not report for duty until recovered. Those with acute infections or disease may need a physician's certification of recovery. Open lesions must be checked, treated, and kept properly dressed.

Personnel should report exposure to blood and body fluids immediately to the Program Director and Employee Health.

B. PERSONNEL PROTECTIVE EQUIPMENT
Gowns, gloves, mask, and eye goggles are available in the patient care areas to use as the situation demands to comply with standard precautions and contact precautions. Once the task is completed the PPE’s should be disposed of prior to leaving the work area and hands are to be washed.

C. HANDWASHING—Refer to Hand Hygiene Policy IC-003
Hand washing and personal hygiene are the most important factors in infection control in any area of the hospital. Hands should be washed routinely at the following times:

a. Before beginning work and before leaving work
b. Before and after patient contact (including between each patient contact)
c. Before starting an invasive procedure (sterile or aseptic) or before preparation or administration of medication or treatment
d. Before and after using gloves
e. After contact with a source of microorganisms (body fluids, mucous membranes, non-intact skin, inanimate objects that are likely to be contaminated)
f. Before moving from a dirty to a clean site on the same patient
g. After using the restroom
h. After using hands to cover sneeze or cough
i. Before and after eating
j. When hands are visibly dirty or contaminated with proteinaceous material or are visibly soiled with blood or other body fluids, wash hands with either a non-antimicrobial soap and water or an antimicrobial soap and water.
k. Alcohol based hand rubs may be used for routine decontamination of hands, if the hands are not visibly soiled.

D. PATIENT TREATMENTS
Personnel will wash hands before receiving patients or before transporting patients to exam room. All equipment used to transport the patient is cleaned following care of a patient and checked prior to use.

Source: Barbara Shelton, Wayne Memorial Hospital, Goldsboro, NC. Reprinted with permission.
Therapy equipment is disinfected after use and checked prior to use. The patient is provided with a clean gown, linens, and towels for personal use if necessary. Personnel will wear a clean gown over uniform if in direct contact with the patient. If personnel have a cold, they will wear a mask and sterile gloves if the patient has an open wound (See Isolation Procedures). After treatment, clean reusable equipment and place surgical instruments in biohazard storage box for transport to Central Sterile—Refer to Surgical Instruments Procedure # A129.4 Discard the protective gown and gloves and wash hands.

E. ISOLATION PROCEDURES
Known colonized or infected patients with MRSA and/or VRE should be scheduled for treatment as close to the end of an a.m. or p.m. period as possible to eliminate as much contact with other patients as possible. Exam Room One is designated the Isolation Room, and patients requiring Isolation Precautions will be placed in this room. The Blue Flag over the door to exam room will indicate to all Healthcare workers involved that Contact Isolation Precautions should be maintained. The chart will be flagged with an Isolation Sticker on front.

F. TREATMENT IN PATIENT ROOM
The nurse in charge will assist and explain. PPE shall include any or all of the following depending on type of isolation: Gown, cap, mask, face shield, gloves. After treatment, PPE’s shall be removed at the door and discarded in a trashcan located in the room. Anything taken into the room must be either discarded or disinfected.

G. TREATMENTS FOR ISOLATION PATIENTS
Only personnel involved with patient treatment are permitted to be in the immediate area where the isolated patient is receiving treatment. All such persons must wear the appropriate personal protection equipment. PPE’s should be removed and discarded before leaving the treatment area/exam room and hands washed.

H. LINEN DISPOSAL
All linen hampers have a cloth linen bag, which is surrounded by an impervious bag for dirty linen, in accordance to the hospital policy.

I. SOILED DRESSING
Soiled dressings must be discarded in a red biohazard bag if saturated or soaked with blood or body fluid, that if compression of the bag would cause seepage of blood or body fluid from the dressing.

J. WASTE DISPOSAL
Soiled waste is placed in a regular trash container. Small volumes (<20ccs) of blood and blood products may be placed in regular trash containers. All blood or blood products (>20ccs) can be discarded in a toilet. Handwashing sinks may never be used for disposal of blood or body fluids. Sharps disposal containers should be used for needle, syringe, and razors (or other sharp-edged items) disposal. Containers are full when 2/3 contents are visible. When filled close securely and place in dirty utility room for pick up by EVS.

K. CLEANING PROCEDURES FOR TREATMENT ROOMS AND PATIENT CARE AREAS
EPA approved disinfectants and Germicidal Wipes provided by Environmental Services will be used to clean surfaces in these areas.
- In between patients, all surfaces, including treatment chairs, stretchers, mayo carts, counters, floor lights, step stools will be wiped down using a Germicidal Wipe.
  – Transport equipment will be wiped down with an approved disinfectant after each patient use.
  – Floors and walls will be spot cleaned with an approved disinfectant solution

Source: Barbara Shelton, Wayne Memorial Hospital, Goldsboro, NC. Reprinted with permission.
– Weekly, all surfaces in the patient treatment rooms, including treatment chairs, stretchers, all stools, will be sprayed down with SaniMaster and allowed to sit for 10 minutes prior to being wiped down.

L. HYPERBARIC CHAMBER ROOM
HI-TOR PLUS is the only EPA approved disinfectant that shall be used for the Hyperbaric Chamber Room and for all surfaces that may come in contact with the chambers.
– Stretchers will be cleaned between each patient treatment and at the end of each day.
– Environmental Services will clean the bathroom and the floor only outside of the yellow and black boundary marked on the floor. The floor under and around the chambers will be cleaned by the HBO Technicians.
– Floors and walls will be spot cleaned with HI-TOR PLUS.

M. REFRIGERATORS
All refrigerators will be cleaned when soiled. Temperature should be monitored and recorded daily and should not exceed 45 degrees F. Food, medication, and specimen refrigerators should be stored in separate refrigerators. Medications should be labeled as per Pharmacy protocol. Specimens should be clearly dated and labeled as to contents. Food should have name and date. All non-staple food should be removed after 72 hours.

DEVELOPED BY OR IN COLLABORATION WITH

REPLACES

ORIGINAL DATE:
REVIEWED DATES:
REVISED DATES:

SIGNATURE OF APPROVAL

Name
Title Vice President Patient Services/CNO Infection Control Officer
Date
Name

Title Program Director, Wound Care Center Vice President, Operations

Date

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