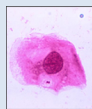
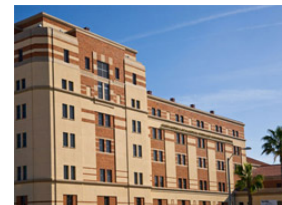




The Quarterly BUG

Infection Prevention Newsletter

UCLA Health System, Quarter 4 2011



MENINGITIS Q & A

What is meningitis? Meningitis is inflammation of the meninges. Knowing whether meningitis is caused by a bacterium or virus is important because severity of illness, type of isolation, and treatment may differ.

BACTERIAL: *Streptococcus pneumoniae* and *Neisseria meningitidis* are the leading causes of bacterial meningitis. *Haemophilus influenzae* type b (Hib) also causes bacterial meningitis, but the incidence has decreased due to routine childhood vaccination.

Transmission: Spread via contact with respiratory and throat secretions.

Isolation: Place on Droplet precautions until 24 hours after effective therapy. Patients with Hib, should remain on isolation for the duration of illness.

VIRAL: Different viruses can cause viral meningitis. Most cases in the U.S., particularly during summer and fall, are caused by **enteroviruses**. Other viruses causing viral meningitis are **mumps**, **Epstein-Barr virus**, herpes simplex viruses, varicella-zoster, **measles**, and **influenza**.

Transmission: Spread via direct contact with an infected person's stool or through direct or indirect contact with respiratory secretions of an infected person, surfaces, or objects.

Isolation: Use Standard Precautions. However, you may have to also add precautions for specific viruses (e.g. such as Droplet for mumps). Consult Hospital Epidemiology with questions on these patients.

<http://www.cdc.gov/meningitis/about/faq.html>

SPOTLIGHT on EVS

Keeping us clean!



EVS is implementing a new training aid for staff. The training aid consists of a fluorescent marker and black light detector.

1. EVS supervisor dabs the marker on high-touch surfaces before the room is cleaned.
2. EVS personnel clean room.
3. EVS supervisor returns with black light to see if surfaces were cleaned appropriately (i.e. marker is no longer present on surfaces), shares results with EVS personnel.

Performance data is being collected. Stay tuned!

<http://www.cdc.gov/hai/toolkits/evaluating-environmental-cleaning.html>

HAVE YOU SEEN THIS VIDEO YET?

To reach our ultimate goal of patient safety and quality care, The Department of Health and Human Services has released a free, online, interactive, role-based infection prevention training module. It's an excellent video, check it out!

<http://www.hhs.gov/ash/initiatives/hai/training/partneringtoheal.html>



FACT OR FICTION?

Answers on p. 2

- I am pregnant and therefore can't care for the shingles patient.
- I can get the flu from the influenza vaccination.



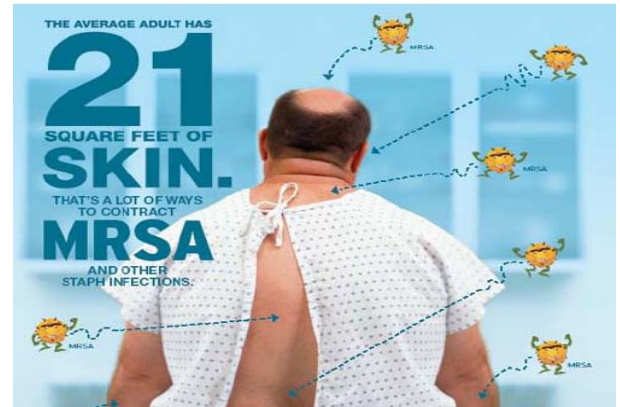
Ambulatory Care Clinics

Taken straight from the CDC's [Guide to Infection Prevention for Outpatient Settings: Minimum Expectations for Safe Care](#)

Use of alcohol-based hand rub as the primary mode of hand hygiene in healthcare settings is recommended by the CDC and the World Health Organization (WHO) because of its activity against a broad spectrum of epidemiologically important pathogens, and because compared with soap and water, use of ABHR in healthcare settings can increase compliance with recommended hand hygiene practices by requiring less time, irritating hands less, and facilitating hand hygiene at the patient bedside. For these reasons, alcohol-based hand rub is the preferred method for hand hygiene except when hands are visibly soiled (e.g., dirt, blood, body fluids), or after caring for patients with known or suspected infectious diarrhea (e.g., *Clostridium difficile*, norovirus), in which case soap and water should be used.

Important Prevention Initiative BATHING PROTOCOL

Our adult ICUs (plus 8N) have begun bathing patients daily with chlorhexidine gluconate (aka CHG, HIBICLENS). CHG is an antiseptic that has activity against MRSA and VRE. Great job to all those involved in this important intervention!



Can I Answer the Phone While in an Isolation Room?



From an infection control standpoint, YES.

When you need to answer the phone, you MUST: remove gloves and wash hands before touching the phone. When done, wash hands again, don gloves and return to activity. This will ensure the phone stays clean by touching it with clean hands only. There is no need to take your isolation gown off, however, do not let the phone touch the gown or the patient environment.

FACT or FICTION ANSWERS

- **IT DEPENDS!** If you are immune to varicella zoster virus (i.e., if you have had the chicken pox), you can not 'catch' the virus from someone and pass it to your fetus. If you are not immune, you should not care for the shingles patient.
- **FICTION** - You cannot get the flu from the flu vaccine.
<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flu.pdf>

Micro Lab Corner



Urine Cultures

For best results, refrigerate!

UTIs account for a large percentage of physician office visits and hospital admissions per year. Urine is normally a sterile body fluid, but is easily contaminated with normal bacterial flora from the urethra. Proper specimen collection and transport to the microbiology lab is critical in assessing bacterial growth in a urine sample. **Clean catch, midstream urine collected in a sterile cup should be kept refrigerated until pickup.** The lab will then see to it that the specimen be transported to the microbiology lab in a sterile tube containing a preservative (boric acid) that inhibits overgrowth of contaminating bacteria. This way, the microbiology lab can ensure that quantitative bacterial cultures are relevant indicators of disease.

Thanks to this issue's contributors:

Genie de Couto, Ambulatory: Gdecouto@mednet.ucla.edu
Omai Garner, Clinical Lab: ogarner@mednet.ucla.edu
Laura Levinson, Nursing: llevinson@mednet.ucla.edu
Tracy Hoos, Nursing Admin.: thoos@mendnet.ucla.edu
Kelly Peck, EVS: kpeck@mednet.ucla.edu
Dana Russell, IP: danarussell@mednet.ucla.edu
Teresa Zaroda, IP: nstesz@mednet.ucla.edu



HAPPY TRAILS

DAVID A. PEGUES, M.D.

Best of luck to you, Dr. Pegues. Thank you for your mentorship and for all you have done reduce the risk of infection at UCLA.