

Amerika Birleşik Devletleri'nde Enfeksiyon Kontrol Uygulamaları

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İçerik

- **Sürveyans**
- **El Hijyeni**
- **İzolasyon**
- **Profilaktik Antibiyotik Uygulamaları – Antibiyotik Uygulamaları**
- **İnşaatlarda Enfeksiyon Kontrolü**
- **Dezenfeksiyon-Sterilizasyon-Antisepsi**
- **Ameliyathane**
- **Sağlık Çalışanlarının Sağlığı (Fit Testing)**
- **Hastane Temizliği**
- **Tıbbi Atık Kontrolü**

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Contact Us

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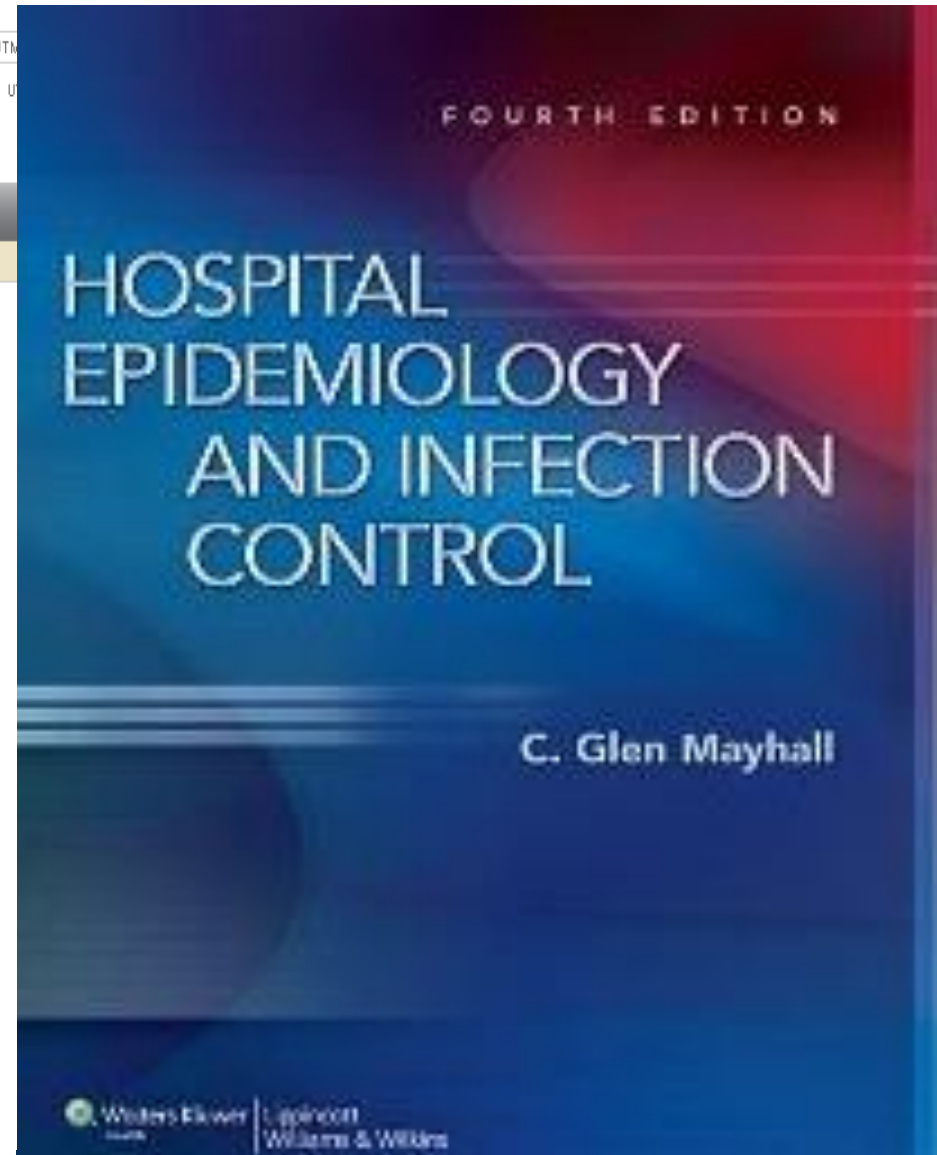
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Email: cmayhall@utmb.edu

« Back









MD Anderson Cancer Center



Sürveyans

Online Hasta Kayıt Sistemi!

Yöntem: Laboratuvar bazlı, hasta bazı bildirime bağlı

Online sistem ve izolasyonlu hastalar için yatak başı kontrol

CDC Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network | NHSN Home | My Info | Contact us | Help | Log Out

Logged into NHSN State Users Test Facility #1 (ID 15164) as JVINYARD.
Facility NHSN State Users Test Facility #1 (ID 15164) is following the PS component.

Memberships

✓ Conferred Rights saved successfully for group HAITexas (15833).

Groups that have access to this facility's data

Group	Confer Rights	Leave Group(s)
HAITexas (15833)	Confer Rights HELP	Leave Group(s) HELP

Enter ID and Password for this facility to join a new group

Group ID:

Group Joining Password:

[HELP](#)

El Hijyeni

Rehber ve Yöntem: CDC ve WHO rehberi

İzlem:

UTMB: Öğrencilerin gözlemine dayalı, aylık olarak birimlere raporlanır.

MDACC: Çalışanlar online sistemden kişilerin isimlerine göre sisteme giriş yapıyor.

Alkol bazlı el antiseptiği: Köpük, alkollü, SKT ürün üzerindeki geçerli

Sabun: İzolasyonlu odalarda Klorheksidinli, diğer alanlarda gliserinli köpük sabun



El Hijyeni Gözlemi

Date: 1/7/11

Session Time in: 9:16 AM

Session Time out: 10:11 am

Unit/Location: 7 - ER

Observer Name: Mihagun
Przybella

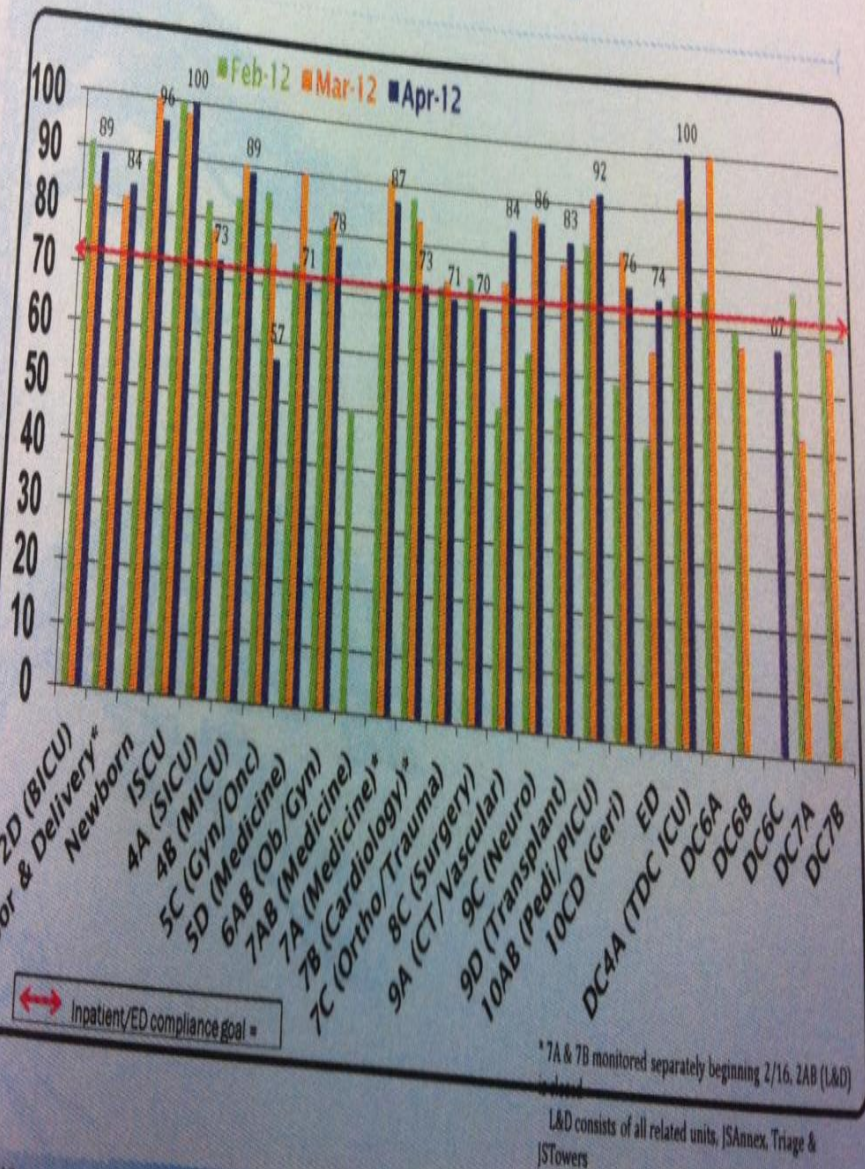
[illegible]

Schedule for Feb 11- Feb 17

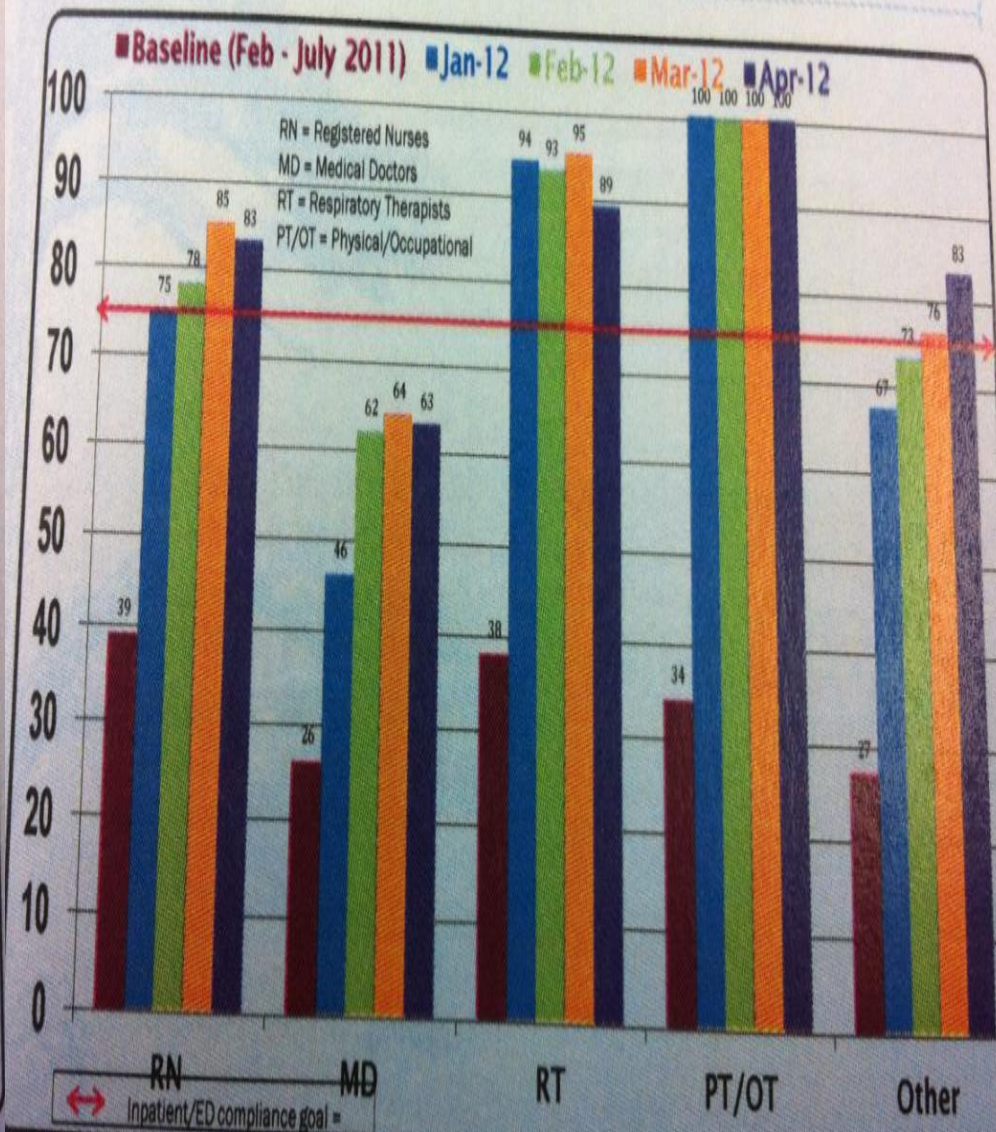
Mata, Christopher; Mehagan Przybilla, Tran, Qynh; Phyllis Lamesha Seamster; Ibraheem, Rasheed; John Powell; Brandy Rawls

	Unit/Location	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1	Emergency Dept ED		1 Hour		1 Hour	1 Hour		
2	2C Burn unit	1 Hour			1 Hour	1 Hour		
3	3B Nursery	1 Hour		1 Hour		1 Hour		
4	3A Triage	1 Hour		1 Hour		1 Hour		
5	3C/D Labor & Delivery	1 Hour		1 Hour		1 Hour		
6	3 rd flr infants ISCU	1 Hour		1 Hour		1 Hour		
7	2A SICU		1 Hour		1 Hour	1 Hour		
8	4B MICU		1 Hour		1 Hour		1 Hour	
9	5C Gyn/Oncology		1 Hour		1 Hour		1 Hour	
10	5D Medicine Dept	1 Hour		1 Hour		1 Hour		
11	6A/B Gyn/OB	1 Hour		1 Hour		1 Hour		
12	6 C/D Post-partum	1 Hour			1 Hour	1 Hour		
13	7A Medicine		1 Hour		1 Hour	1 Hour		
14	7B Medicine			1 Hour		1 Hour		
15	7C Ortho/Trauma			1 Hour	1 Hour		1 Hour	
16	8B Dialysis	1 Hour		1 Hour		1 Hour		
17	8C Surgery			1 Hour	1 Hour		1 Hour	
18	9A CT/Vascular			1 Hour	1 Hour			
19	9B Cardiology	1 Hour				1 Hour		
20	9C Neuro/Neurosurg	1 Hour			1 Hour	1 Hour		
21	9D Transplant	1 Hour		1 Hour	1 Hour			
22	10C/D Geriatrics			1 Hour	1 Hour	1 Hour		
23	10A/B PEDI PICU	1 Hour		1 Hour	1 Hour			
24	TDCJ 4 ICU			1 Hour			1 Hour	
25	TDCJ 6A						1 Hour	
26	TDCJ 6 B							
27	TDCJ 6 C						1 Hour	
28	TDCJ 7 A			1 Hour				
29	TDCJ 7 B							

Hand Hygiene by Unit



Hand Hygiene by Profession



El Hijyeni Posterleri



İzolasyon Uygulamaları



Standart Önlemler: Tüm hastalara uygulanıyor.

UTMB: MDRO, C.difficile, VRE, MRSA için ayrı ayrı Temas önlemleri uyguluyor.

Online Order sistemi ile izolasyon uygulanıyor.

Dezenfeksiyon Uygulamaları



MSÜ'ye alet transferi



Oda Dezenfeksiyonu

XENEX

Bakteri, virüs, sporlarda etkili

UV filtreli dezenfeksiyon

THE XENEX ROOM DISINFECTION SYSTEM
THE RESULTS ARE IN
(AND THEY'RE UNDENIABLE)

82% decrease
IN INFECTION RATES¹

20x more effective
THAN MANUAL CLEANING
WITH CHEMICALS²

\$2.3 million savings
FROM REDUCED COST OF INFECTIONS³

as little as 5 minutes
TOTAL TREATMENT TIME



SCHEDULE A DEMONSTRATION:
(888) 340-9028
VISIT US ONLINE AT: XENEX.COM

EVERY ROOM
EVERY TIME
5 MINUTE
CYCLE TIME

 **XENEX™**
EVERY ROOM. EVERY TIME.

1. "Results just in: UV room technology decreases infection rates." Press Release, Cooley Dickinson Hospital, May 24, 2011.
2. Shlich, et al. Infection Control & Hospital Epidemiology (ICHE), March, 2011.
3. Cost of care saving estimated over 6-month period, Q1 and Q2 2011, Cone Health MRSA reduction initiative which included using the Xenex room disinfection system.

Dezenfeksiyon Uygulamaları

Gastroenteroloji

Tek kullanımlık anestezi ilacı

Otomatik endoskopi yıkama Cihazı



Antibiyotik Uygulamaları

SCIP

Reasons for Vancomycin Usage

1. Documentation of Beta lactam allergy.
2. Documentation of MRSA colonization or infection.
3. Documentation of patient being high-risk due to nursing home or extended care facility setting within the last year.
4. Documentation of patient being high-risk due to acute in
5. Documentation of increased MRSA rate, either facility-wide or operation-specific.
6. Documentation of chronic wound care or dialysis.
7. Other physician documented reason.

Specifications Manual for National Hospital Outpatient Quality Measures Discharges 1-01-11 through 6-30-11 (1Q11)

utms
Working together to

SCIP

Prophylactic Antibiotic Selection

Surgical Procedure	Approved Antibiotics
Outpatient Pacemakers or AICD's	Cefazolin, Cefuroxime, or Vancomycin* If β-lactam allergy: Vancomycin or Clindamycin
Special Considerations	* Vancomycin is acceptable with a physician/APN/PA/pharmacist documented justification for its use

Specifications Manual for National Hospital Outpatient Quality Measures Discharges 1-01-11 through 6-30-11 (1Q11)

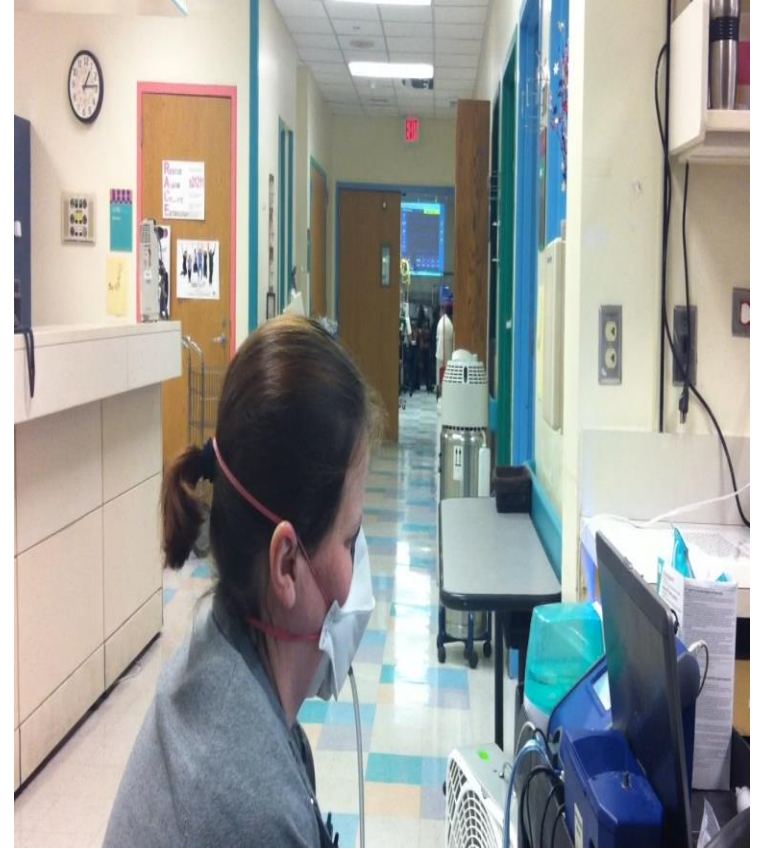
Sağlık Çalışanlarının Sağlığı

Aşılama Takibi

N95 Maske için Fit-Testing



Sağlık Çalışanlarının Sağlığı - Fit Testing



Ameliyathane



İnşaat Süreçleri



Infection Control Risk Assessment

Project Name: MRB Location Project Number: 12677
 Project Manager: Ruben Gonzalez Project Location: 4th JSA
 Effected Locations: 4.208 JSA
 Start date of Project: 1-23-2013
 Manager notified 24° prior to start yes
 Healthcare Epidemiology notified 24° prior to start yes

	Issue	Plan of Action
1	Type of dust protection	negative air machine / negative
2	Negative pressure required	yes
3	Pressure checked (beginning, middle, end of project)	yes
4	Air discharged outside	N/A
5	Ventilation system isolated	N/A
6	Windows sealed	N/A
7	Elevator door sealed	N/A
8	Pneumatic tube system sealed	N/A
9	Workers decontaminated before they leave the site	yes
10	Worksite is maintained clean	yes
11	Signage is posted to reroute pedestrian traffic	N/A
12	Site is terminally cleaned before it is reopened for use	yes
13	Water systems have no dead legs and have been adequately flushed	N/A
14	Staff have been educated about infection control risks of construction in the healthcare setting	yes

HCE Director: [Signature] Date: 1/23/13 Signature of Contractor: [Signature] Date: 1-22-2012
 Signature of UTMB Manager: David Hernandez Date: 1-22-2012

BIOGRAPHICAL SKETCH

Name: JAMES H. HARRIS
 Date of Birth: [illegible]
 Place of Birth: [illegible]
 Residence: [illegible]
 Education: [illegible]
 Military Service: [illegible]
 Civil Service: [illegible]
 Business and Professional Experience: [illegible]
 Publications: [illegible]
 Honors and Awards: [illegible]
 References: [illegible]

[illegible]

SPECIAL REPORT CARD

Student Name: JAMES E. SMITH
 Date of Birth: 10/15/58
 Home Address: 1234 Main St, Springfield, IL 62761
 Teacher: J. E. Smith
 Date: 10/15/58

Comments:

James E. Smith is a very bright and capable student. He is a good leader and a team player. He is a good student and a good citizen. He is a good friend and a good neighbor. He is a good son and a good brother. He is a good person and a good man. He is a good student and a good citizen. He is a good friend and a good neighbor. He is a good son and a good brother. He is a good person and a good man.

Brian Koster, Communications
 DuPont Center
 DuPont • 20077
 404/333-1414, Lyle Robinson
 Lyle Robinson, Manager, Development, 404/333-1414
 DuPont Group Project Manager, David DeGard, 202/341-4444
 DuPont Group, Corporate Director, DuPont Corporation, 713/475-4444

**Construction
Area
DO NOT ENTER**



İnşaat Sonrası Kontrol



Tıbbi Atık Süreçleri

			
Yellow Bag with cardboard box Infectious Waste label Picked up by Environmental Services	Yellow Sharps Container Infectious Waste label Picked up by Environmental Services	Red Bag with Cardboard box or assigned fiber drum Infectious Waste label Picked up by Environmental Services	Red Sharps Container Infectious Waste label Picked up by Environmental Services
Trace Chemotherapy & Pathological Waste: □ All supplies used to make and administer chemo medication <i>Example: tubing, empty bags, vials, syringes without needles, gloves, masks, gowns, wipes etc.</i> □ Pathological wastes: consisting of human body parts, tissues, fetuses, and human anatomical remains Yellow bag waste is incinerated and ash is disposed of in the landfill.	Trace Chemotherapy Sharps: □ Syringes with needles and sharps used during chemo treatment □ Empty U-listed containers (trace amounts of chemo medication) Yellow sharps waste is incinerated and ash is disposed of in the landfill.	Biohazardous Waste: □ Blood, blood products or tissue amounts of >100 ml □ Soaked / dripping bloody dressings □ Suction canister liners or Pleuravacuums □ Microbiological wastes (laboratory specimens) Red bag waste is autoclaved, macerated and disposed of in the landfill.	Biohazardous Sharps: □ Needles, broken glass, vials, and pipettes □ Empty syringes with attached needles □ Other sharps such as scalpels and trocars Red sharps waste is autoclaved, macerated and disposed of in the landfill.

Teşekkürler

Tuğçe Şahin Kafadar
tugcekafadar@gmail.com

