PREVENT PATIENT-TO-PATIENT TRANSMISSION OF BLOODBORNE PATHOGENS

RECOMMENDED INFECTION CONTROL AND SAFE INJECTION PRACTICES IN LONG-TERM CARE (LTC) FACILITIES

Diabetes Care Procedures & Techniques

- Prepare medications, such as insulin, in a centralized medication area; multiple dose insulin vials should be assigned to individual patients and labeled appropriately.
- Never reuse needles, syringes, or lancets.
- Restrict use of fingerstick capillary blood sampling devices to individual patients. Consider selecting single-use lancets that permanently retract upon puncture.
- Dispose of used fingerstick devices and lancets at the point of use in an approved sharps container.
- Environmental surfaces such as glucometers should be decontaminated regularly and anytime contamination with blood or body fluids occurs or is suspected.
- Glucometers should be assigned to individual patients. If a glucometer that has been used for one patient must be reused for another patient, the device must be cleaned and disinfected.
- Maintain supplies and equipment such as fingerstick devices and glucometers within individual patient rooms if possible.
- Any trays or carts used to deliver medications or supplies to individual patients should remain outside patient rooms. Do not carry supplies and medications in pockets.
- Because of possible inadvertent contamination, unused supplies and medications taken to a patient's bedside during fingerstick monitoring or insulin administration should not be used for another patient.

Hand Hygiene and Gloves

- Wear gloves during fingerstick glucose monitoring and during any other procedure that involves potential exposure to blood or body fluids.
- Change gloves between patient contacts. Change gloves that have touched potentially blood-contaminated objects or fingerstick wounds before touching clean surfaces.
- Remove and discard gloves in appropriate receptacles after every procedure that involves potential exposure to blood or body fluids, including fingerstick blood sampling.
- Perform hand hygiene (i.e., hand washing with soap and water or use of an alcohol-based hand rub) immediately after removal of gloves and before touching other medical supplies intended for use on other residents.

Medical Management

- Review regularly the individual patients' schedules for fingerstick blood glucose sampling and insulin administration and reduce the number of percutaneous procedures to the minimum necessary for appropriate medical management of diabetes and its complications.
- Assure that adequate staffing levels are maintained to perform all scheduled diabetes care procedures, including fingerstick blood glucose monitoring.
- Consider the diagnosis of acute viral hepatitis infection in LTC residents who develop an illness that includes hepatic dysfunction or elevated aminotransaminase levels (AST or ALT).

Training and Oversight

- Provide a full hepatitis B vaccination series to all previously unvaccinated LTC staff persons whose activities involve contact with blood or body fluids. Check and document post-vaccination titers one to two months after completion of the vaccination series.
- Establish responsibility for oversight of infection control activities. Investigate and report any suspected case that may represent a newly acquired bloodborne infection.
- Have staff demonstrate knowledge of standard precautions guidelines and proficiency in application of these guidelines during procedures that involve possible blood or body fluid exposures.
- Provide staff members who assume responsibilities involving percutaneous procedures with infection control training that includes practical demonstration of aseptic techniques and instruction regarding reporting exposures or breaches. Direct annual retraining to all staff members who perform procedures that involve exposure to blood or body fluids.
- Assess compliance with infection control recommendations for fingerstick glucose monitoring (such as hand hygiene and glove changes between patients) by periodically observing personnel and tracking use of supplies.

CDC. Transmission of Hepatitis B Virus Among Persons Undergoing Blood Glucose Monitoring in Long-Term--Care Facilities --- Mississippi, North Carolina, and Los Angeles County, California, 2003—2004. MMWR 2005; 54(09):220-223.

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