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Effective initiatives in decreasing the incidence of C.diff

Conclusion: A sustained decrease in the incidence of C.diff over the last 3 years is attributed to the implementation of all the Task Force recommendations.

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Initiatives to decrease the incidence of methicillin resistant Staphylococcus aureus (MRSA)

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Background: Nationally MRSA has been identified as both a hospital and community concern. The CDC and some national healthcare organization have implemented on admission screening cultures and contact isolation in an effort to prevent transmission of MRSA in the healthcare environment. The system infection preventionists addressed this issue of universal screening cultures in 2006. Retrospective surveillance of our facility demonstrated we that we exceeded our 7.1 mean per 10,000 patient days. The Infection Control committee after reviewing our data determined that screening cultures and contact isolation on admission was not warranted. We acknowledge the seriousness of this rapidly escalating healthcare infection in our community and elected to implement a conservative approach based on clinical symptomatology, in conjunction with laboratory findings.

Methods: The Infection preventionist(s) review the daily microbiology findings, and note MRSA identification. The physical condition of the affected patient(s) is assessed for temperature, erythema, cellulitis, and drainage. Positive findings requires that the patient be placed in a private room and contact isolation precautions be instituted. Based on the recommendation of the Infection Control Committee, the practice of hand antisepsis among the medical staff has increased due to the installation of hand washing sinks in close proximity to the physicians charting area on each medical surgical unit. Hand hygiene compliance data was collected, reviewed and communicated to staff. Education was provided through general orientation, annual mandatory education, and the infection control newsletter "Bug of the Month". The Hand washing Team and Infection Control Week activities promoted a heightened awareness of the need for continued hand hygiene compliance. Implementing changes in hand antisepsis (new dispenser for alcohol hand rinse and foam hand soap) for increased acceptance and usage of Hand hygiene products by all healthcare workers.

Results: Through heightened awareness, proper isolation precaution implementation and increase in hand hygiene compliance we have decreased the incidence of MRSA.

Conclusion: Increased hand antisepsis compliance had a significant effect on the decreasing rate of MRSA infection in our facility. Infection control and New Product committees need to continue to investigate new products that will increase hand hygiene in healthcare workers, patients, and visitors.

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