

# Best practices to prevent health care-associated infections

## Hand hygiene

- Clean hands with soap and water or waterless alcohol product before and after contact with patients or contaminated surfaces
- Encourage the appropriate use of surgical scrubs in operating-room settings
- Install alcohol-based waterless cleaning products inside and outside all patient rooms and in other locations where clinical care will be provided
- Do not allow clinical staff to wear artificial nails

## Catheter-related bloodstream infections

- Remove unnecessary vascular lines.
- Use recommended hand hygiene before insertion or manipulation of vascular lines
- Use maximal barrier precautions (gowns, gloves, masks, head covers) for insertion of vascular lines
- Apply appropriate skin antiseptics (chlorhexidine is the agent of choice) for insertion of vascular lines, dressing changes, and reinsertion
- Use the subclavian site whenever possible, as this site is associated with the lowest risk of infection
- Maintain clean and dry dressings
- Do not use antibiotics for the procedure

## Surgical site infections

- Assure that no infections are present preoperatively unless the surgery is an emergency procedure
- Control plasma glucose levels (ideally  $\leq 110$  mg/dL), especially in the 24 hours pre- and postoperatively
- Do not remove hair unless necessary; if hair removal is necessary, use clippers rather than a razor
- Use appropriate skin preparation and surgical scrub and technique
- Use perioperative antibiotics when evidence supports their use; give the antibiotics between 30 minutes and one hour prior to the incision
- Stop antibiotics at the end of the surgical procedure or, at most, 24 hours postoperatively
- Control body temperature intraoperatively (maintain normothermia)
- Provide adequate supplemental inspired oxygen
- Record infections using standardized definition and feedback to providers

## Urinary tract infections

- Remove all unnecessary catheters
- Use sterile technique for insertion of catheters
- Do not remove urine samples from lines or open systems
- Do not use antibiotics prophylactically

## Prevention of ventilator-associated pneumonia

- Sterilize and maintain respiratory equipment appropriately
- Raise the head of the bed at a 45-degree angle (use the semi-recumbent position)
- Prevent aspiration
- Use noninvasive ventilation techniques when possible
- Use oscillation or rotate the patient
- Use good oral care
- Use endotracheal tubes that allow for subglottic suctioning in high-risk patients