

**HACKETTSTOWN MEDICAL CENTER
PHYSICAL/OCCUPATIONAL THERAPY PROCEDURE MANUAL
INFECTION CONTROL GUIDELINES**

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Effective Date: March, 1988

Policy No: 5200-2.019/5300-2.019

Cross Referenced:

Origin: Physical/Occupational Therapy

Reviewed Date: 09/12, 03/16

Authority: Therapy Services Manager

Revised Date:

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PURPOSE

To provide departmental guide to staff for the care of patients with potentially communicable diseases and to protect the patient as well as the personnel from unnecessary exposure to a potentially contaminated environment. To prevent cross-infection and secondary infection.

POLICY/PROCEDURE

Personnel Policy for Infection Control

1. Employee Health

- a. When an employee has contracted an infectious/contagious illness, they are to inform Therapy Manager or immediate supervisor who will in turn inform the Infection Control nurse.
- b. The Infection Control nurse will inform the department head how long the employee is contagious and what the incubation period is and who is at risk. If the employee worked during the communicable phase, an investigation of those exposed will be conducted.

2. Education - Documentation

- a. Annually each staff member is required to attend the complete educational modules, which will include infection control.
- b. Evaluations of the program will be completed as directed by the Education Department.
- c. A unit-specific review of Infection Control policies will be conducted annually.

3. Staffing Policies

- a. Employees with open cuts or wounds must have an adequate dressing covering the area. This will provide a barrier to prevent patients from contracting a possible infection from a patient.
- b. If wound cannot be contained with a dressing, the department head must be informed in order that the employee's work schedule may be adjusted preventing patient contact.
- c. All employees will follow standard precautions as outlined in the Infection Control Manual. (See appendix.)

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Responsibilities of Personnel

1. **Dress Code**

- a. Employees are expected to wear lab coats/clothing, which has been properly laundered.
- b. When working with a patient under respiratory/strict isolation, proper precautions will be followed as outlined in the infection control manual.

2. **Procedures for Handling Patients Not on Isolation**

a. Handwashing

- 1) Handwashing is essential before and after each and every patient contact, before and after dressing changes, after linen changing, and after using bathroom facilities.
- 2) Personnel are to wash their hands before beginning work and before leaving duty.

- b. Care of room or cubicle between patients: All linen is removed from the therapy table after patient leaves. The pad is wiped with a cleaner/disinfectant wipe and dried before new linen is replaced.

3. **Infection Control Procedures**

All dressings will be treated as potentially infected. Dressing application procedure will be followed as outlined under Dressing Application.

Responsibilities and Procedures for Care of Equipment and Materials

1. **Equipment**

- a. Any equipment that is used by or comes in contact with a patient is to be cleaned with hospital approved germicide.
- b. Whirlpool: Equipment is cleaned after each use. See procedures for cleaning whirlpools (policy 5200 5.003).

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Disposal of Waste

1. Environmental Services makes daily rounds to pick up and remove trash.
2. All blood-soaked dressings will be placed in red plastic trash bags and will be collected by Environmental Services.

Cleaning

Floors, walls and ceiling will be the responsibility of Environmental Services. Additional cleaning will have to be arranged by Therapy personnel under special circumstances.

Cleaning Solutions for Decontamination

1. Hospital approved germicide solution.
2. Hospital approved germicide wipes for ultrasound, electrotherapy equipment.
3. Germicide wipes and disinfectant as needed.