

General Resources

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Infection Prevention

- GR-1:* The Association for Professionals in Infection Control and Epidemiology (APIC): Infection Prevention and You Infographic: You Are an Important Part of Infection Prevention (English/Spanish/Portuguese)
- GR-2:* The Association for Professionals in Infection Control and Epidemiology (APIC): Infection Prevention and You: Isolation Precautions
- GR-3:* Centers for Disease Control and Prevention (CDC): Hand Hygiene Poster (English/Spanish) 11"x17"
- GR-4:* Centers for Disease Control and Prevention (CDC): Stop Germs! Stay Healthy! Wash Your Hands

- GR-5:* Centers for Disease Control and Prevention (CDC): Six Ways to Be A Safe Patient
- GR-6:* Henry the Hand: Hand Washing Guide (English/Spanish)
- GR-7:* Henry the Hand: Four Principles of Hand Awareness
- GR-8:* New Hampshire Department of Health and Human Services: Steps You Can Take To Prevent Healthcare-Associated Infections Brochure

GR-1: The Association for Professionals in Infection Control and Epidemiology (APIC): Infection Prevention and You Infographic: You Are an Important Part of Infection Prevention (English/Spanish/Portuguese)

Patient flyer designed to provide information about the patient role in infection prevention, infection preventionists, healthcare-associated infections.

<http://www.apic.org/For-Consumers/Materials-for-healthcare-facilities>




GR-2: The Association for Professionals in Infection Control and Epidemiology (APIC): Infection Prevention and You: Isolation Precautions

Flyer for patients and families explaining the three types of isolation precautions and what occurs during each. Can be provided to patients who may be undergoing isolation precautions or provided to family members of patients under isolation precautions.

<http://www.apic.org/For-Consumers/Materials-for-healthcare-facilities>

Infection Prevention and You

Isolation Precautions



In the hospital, isolation precautions are used to help stop the spread of germs from one person to another. We want to protect our patients, families, visitors, and healthcare workers from the spread of germs.

You or your family member has been placed on isolation precautions. There will be a sign at the door of your hospital room to remind visitors and healthcare workers which isolation precautions are needed.

It is important to understand what this means and what you should expect from the hospital staff and visitors. In some cases, visitors may have to be limited. Visitors and healthcare staff should not eat or drink in isolation rooms and should always clean their hands before entering the room and upon exiting the room. We will tell you when your family member is able to come out of isolation precautions.

You, or your family member, have been placed on the following isolation precautions:

Contact Isolation Precautions

Used for infections, diseases, or germs that are spread by touching the patient or items in the room (examples: MRSA, VRE, diarrheal illnesses, open wounds, RSV).

HEALTHCARE WORKERS, FAMILY MEMBERS, AND VISITORS WILL:

- Wear a gown and gloves while in your room.
- Remove the gown and gloves before leaving the room.
- Clean hands (hand washing or use hand sanitizer) when they enter the room and when they leave the room.
- Visitors must check with the nurse before taking anything into or out of the room.

PATIENTS WILL:

- Stay in the room except for medically necessary procedures or therapy.
- Wear a clean patient gown and clean hands before leaving the room.

Droplet Isolation Precautions

Used for diseases or germs that are spread in tiny droplets caused by coughing and sneezing (examples: pneumonia, influenza, whooping cough, bacterial meningitis).

HEALTHCARE WORKERS, FAMILY MEMBERS, AND VISITORS WILL:

- Wear a surgical mask while in the room. Mask must be discarded in trash after leaving the room.
- Clean hands (hand washing or use hand sanitizer) when they enter the room and when they leave the room.

PATIENTS WILL:

- Stay in the room except for medically necessary procedures or therapy.
- Wear a surgical mask when leaving the room.

Airborne Isolation Precautions


Used for diseases or very small germs that are spread through the air from one person to another (examples: Tuberculosis, measles, chickenpox).

HEALTHCARE WORKERS, FAMILY MEMBERS, AND VISITORS WILL:

- Wear a mask or special face protection while in the room. Mask must be discarded in trash after leaving the room.
- Clean hands (hand washing or use hand sanitizer) when they enter the room and when they leave the room.

PATIENTS WILL:

- Be placed in a room with special air flow. The door must stay closed at all times.
- Stay in the room except for medically necessary procedures or therapy.
- Wear a surgical mask when leaving the room. Visitors should wear a surgical mask in the room.



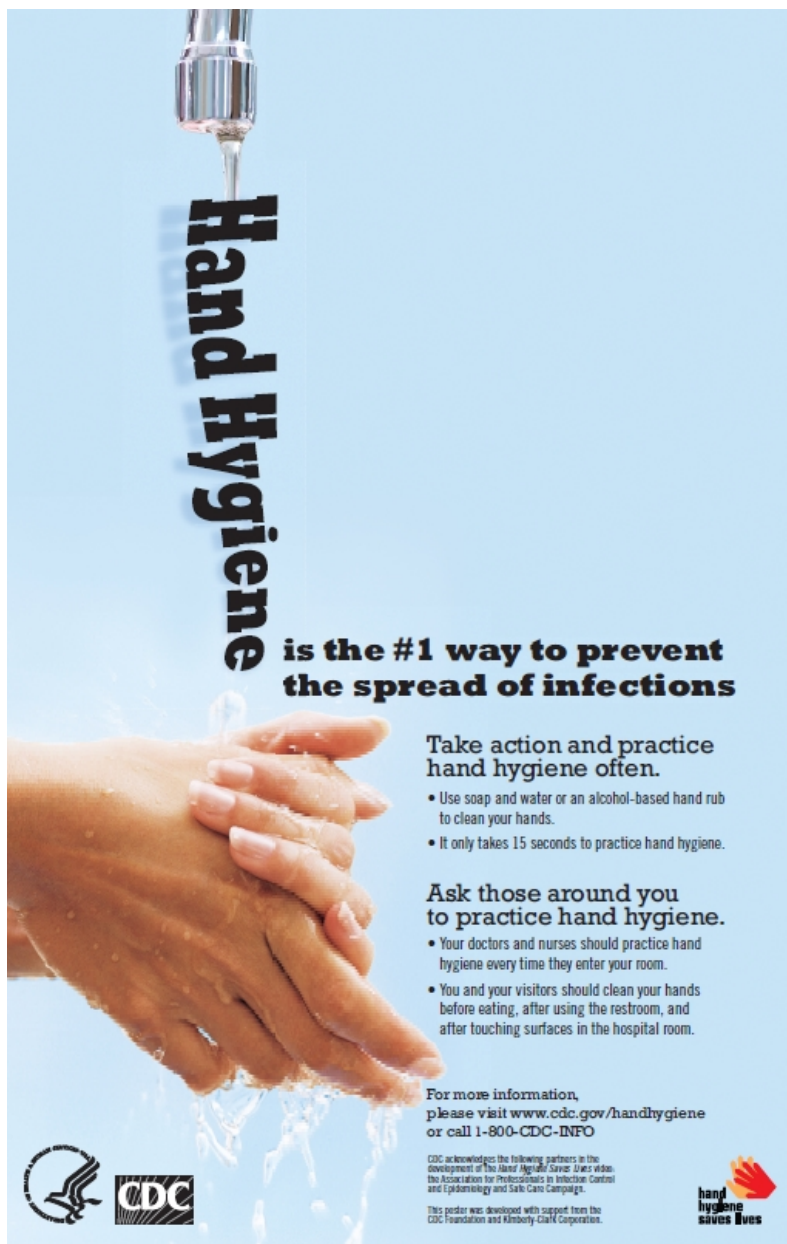
APIC The Association for Professionals in Infection Control and Epidemiology
1275 K Street NW, Suite 1000 • Washington, DC 20005 • 1-800-650-9570 • www.apic.org

© APIC, 2013. Adapted from Cedar Park Regional Medical Center, Cedar Park, TX.

GR-3: Centers for Disease Control and Prevention (CDC): Hand Hygiene Poster (English/Spanish) 11"x17"

Flyer explaining the importance of proper hand hygiene in preventing the spread of infections.


<http://www.cdc.gov/handhygiene/Resources.html>



GR-4: Centers for Disease Control and Prevention (CDC): Stop Germs! Stay Healthy! Wash Your Hands

One page fact sheet explaining when is the best time for hand washing and how to wash the hands appropriately to prevent the spread of germs.

<http://www.cdc.gov/handwashing/pdf/wash-your-hands-fact-sheet.pdf>



**Stop Germs! Stay Healthy!
Wash Your Hands**

WHEN?


- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone who is sick
- Before and after treating a cut or wound
- After using the toilet
- After changing diapers or cleaning up a child who has used the toilet
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage

HOW?

- **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
- **Lather** your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.
- **Scrub** your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.
- **Rinse** hands well under clean, running water.
- **Dry** hands using a clean towel or air dry them.

Keeping hands clean is one of the most important things we can do to stop the spread of germs and stay healthy.

For more details on handwashing, visit CDC's Handwashing Website at www.cdc.gov/handwashing

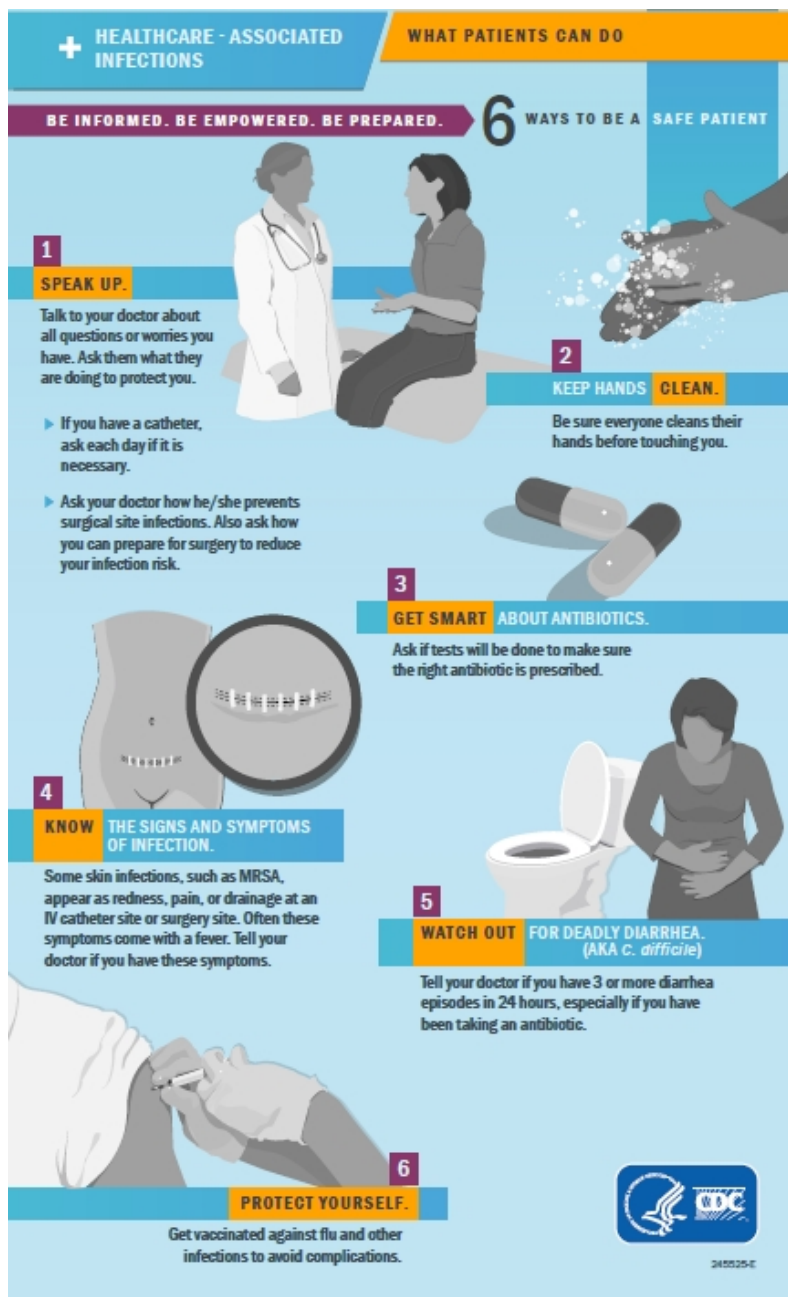
 U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

CS245255A

GR-5: Centers for Disease Control and Prevention (CDC): Six Ways to Be a Safe Patient

Patient empowerment infographic that explains ways patients can be active in infection prevention.

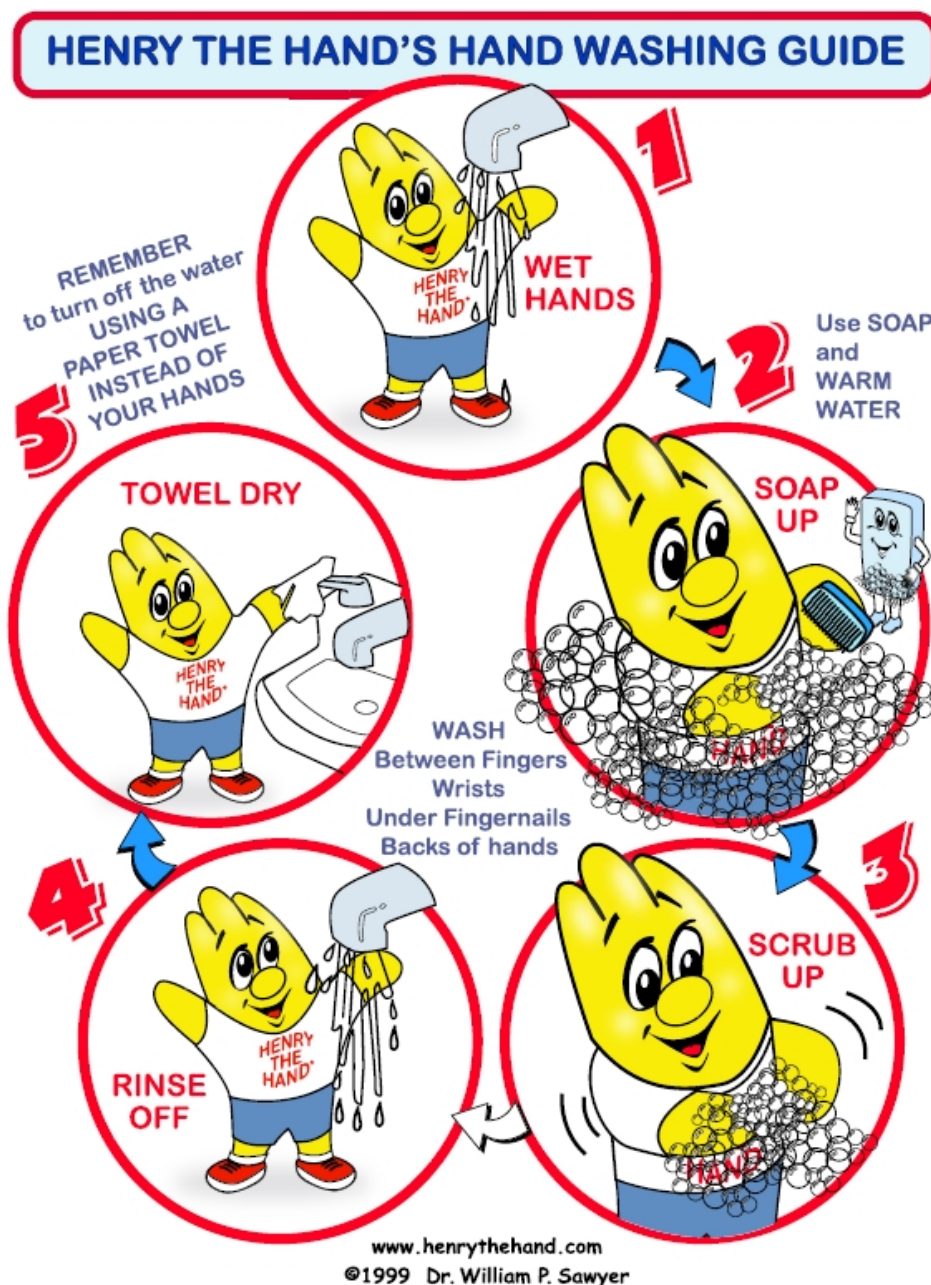
<http://www.cdc.gov/hai/patientSafety/patient-safety.html#>



GR-6: Henry the Hand: Hand Washing Guide (English/Spanish)

A colorful flyer targeted to children that shows the right way to wash their hands.

<http://www.henrythehand.com/download-posters/>



GR-7: Henry the Hand: Four Principles of Hand Awareness

Handout for children explaining 4 ways to keep their hands clean and avoid spreading germs.

<http://www.henrythehand.com/download-posters/>



GR-8: New Hampshire Department of Health and Human Services (NH DHHS): Steps You Can Take To Prevent Healthcare-Associated Infections Brochure

A patient empowerment brochure explaining the ways that patients can help prevent HAIs with specific guidance on CAUTI, CLABSI, and SSI.

<http://www.dhhs.nh.gov/dphs/cdcs/hai/publications.htm>

WHEN YOU GO HOME...

- 1) Make sure you understand how to care for your wound or catheter. (For example: bathing or changing bandages).
- 2) Know who to call if you have questions after you go home.
- 3) Wash your hands with soap and water before and after touching your catheter or wound.
- 4) **Call your doctor immediately if you notice signs or symptoms of infection.**

* Such as: **fever, soreness, redness, or drainage** at the catheter or surgery site.

FAMILY AND FRIENDS...

- 1) Wash your hands before and after visiting someone who is recovering from an illness or surgery.
- 2) Do not touch the wound, bandages, or catheter tubing unless you were shown how to provide care.
* Wash hands, put on gloves, provide care, discard gloves, and wash hands again.
- 3) Advocate for the patient if they cannot speak up for themselves.

**REMEMBER, IT'S OK TO
SPEAK UP and ASK QUESTIONS**

FOR ADDITIONAL INFORMATION:

NH Healthcare-Associated Infections (HAI) Program

<http://www.dhhs.nh.gov/dphs/cdcs/hai/index.htm>

HAI State Report

<http://www.dhhs.nh.gov/dphs/cdcs/hai/publications.htm>

Foundation for Healthy Communities:

<http://www.healthynh.com>

Centers for Disease Control and Prevention (CDC)

<http://www.cdc.gov/hai/>
<http://www.cdc.gov/Features/PatientSafety/>



Healthcare-Associated Infections Program
Bureau of Infectious Disease Control
Division of Public Health Services
NH Department of Health and Human Services
29 Hazen Drive

Concord, NH 03301-6504

Phone: 603-271-4496

Fax: 603-271-0545

E-mail: haiprogram@dhhs.state.nh.us

Adapted from materials developed by the Centers for Disease Control and Prevention, the Association for Professionals in Infection Control and Epidemiology, and the Joint Commission.

STEPS YOU CAN TAKE TO PREVENT HEALTHCARE- ASSOCIATED INFECTIONS



Be informed.

Be empowered.

Be prepared.

New Hampshire
Healthcare-Associated Infections
(HAI) Program

Antibiotic Resistance and Stewardship

GR-9: Centers for Disease Control and Prevention (CDC): Antibiotics Aren't Always the Answer Brochure
(English)

GR-10: Centers for Disease Control and Prevention (CDC): A Veces, el Remedio es Peor que la Enfermedad (Spanish)

GR-11: Centers for Disease Control and Prevention (CDC): CDC Cold or Flu. Antibiotics Don't Work For You Brochure

GR-12: Division of Public Health and Community Services (DPHCS): Superbugs Infographic

GR-13: Division of Public Health and Community Services (DPHCS): "Knowing When Antibiotics Are Right for You", PowerPoint Presentation

GR-14: Centers for Disease Control and Prevention (CDC): Antibiotic Resistance Threats in the United States, 2013

GR-9: Centers for Disease Control and Prevention (CDC): Antibiotics Aren't Always the Answer" Brochure (English)

Educational brochure detailing when antibiotics are truly beneficial to a child's illness and when they do not help.

<http://www.cdc.gov/getsmart/campaign-materials/print-materials/brochure-answer.pdf>

Viruses cause common illnesses that antibiotics CANNOT treat like:

- Colds
- Influenza (the flu)
- Runny noses
- Most coughs
- Most bronchitis
- Most sore throats
- Most sinus infections
- Some ear infections

Viral illnesses, like colds, usually go away without treatment in a week or two. Even many bacterial ear infections go away by themselves. When an antibiotic is not prescribed, ask your child's doctor or pharmacist what can be used to relieve symptoms.

Taking antibiotics for viral illnesses:

- Will NOT cure your child's illness
- Will NOT help your child feel better
- Will NOT keep others from catching your child's illness

Bacteria cause illnesses like strep throat that are often treated successfully with antibiotics.

Remember—there are potential risks when taking any prescription drug. Antibiotics should only be used when your child's doctor determines they are needed.

Antibiotic use can:

- Kill good bacteria in your child's body, which may lead to complications, such as diarrhea or yeast infection.
- Cause a serious allergic reaction that may require hospitalization.
- Result in an antibiotic-resistant infection. Resistant bacteria are stronger and harder to kill. They can stay in your child's body and can cause severe illnesses that cannot be cured with antibiotics. A cure for a resistant infection may require stronger treatment—and possibly a hospital stay.

Talk with your child's doctor about the best way to care for your child during this illness.

Get Smart symptom relief tips & tools for your child at: www.cdc.gov/getsmart or call 1-800-CDC-INFO (232-4636)



CS232630-B



Most cough and cold illnesses are caused by viruses. ANTIBIOTIC use can only cure bacterial illnesses—not viral illnesses.



Centers for Disease Control and Prevention
National Center for Immunization and Respiratory Diseases

GR-10: Centers for Disease Control and Prevention (CDC): A Veces, el Remedio es Peor que la Enfermedad” (Spanish)

A brochure for Spanish speakers explaining the difference between bacteria and viruses, what an antibiotic is, and how resistance occurs. Includes FAQs on when a child does or does not need an antibiotic.

<http://www.cdc.gov/getsmart/campaign-materials/print-materials/Brochure-Spanish-color.pdf>

*Los antibióticos matan las bacterias
pero no los virus*

No siempre son la solución

Siempre consulte a su doctor

*Tomar antibióticos inapropiadamente
puede ser muy dañino para su salud y
la de sus hijos*

A VECES, EL REMEDIO ES PEOR QUE LA ENFERMEDAD

**Los antibióticos NO combaten
los virus.**

**Como tratar un resfriado
o la gripe:**

Los niños y los adultos con infecciones virales se recuperan cuando la enfermedad pasa su curso. Los resfriados causados por virus pueden durar dos semanas o más.

Medidas que pueden ayudar a una persona a sentirse mejor del resfriado o de la gripe:

- Tomar más líquidos
- Usar un vaporizador o un pulverizador salino nasal para aliviar la congestión
- Aliviar la garganta con trocitos de hielo, con un pulverizador para el dolor de garganta, o pastillas (para jóvenes y adultos)

Las infecciones virales a veces pueden causar infecciones bacteriales. Los pacientes deben informar a sus doctores si la enfermedad se pone peor o dura mucho tiempo.

INFÓRMESE
Automedicarse con antibióticos
puede perjudicar su salud

Si desea más información en español, llame al
1-800-232-4636
www.cdc.gov/antibioticos

**Campana para promover el
uso correcto de los antibióticos.**

INFÓRMESE
Automedicarse con antibióticos
puede perjudicar su salud

CS121386

GR-11: Centers for Disease Control and Prevention (CDC): Cold or Flu. Antibiotics Don't Work For You Brochure

Brochure targeted to adults 18-49 explaining the difference between bacteria and viruses, how bacteria become resistant, and answering frequently asked questions about when it is appropriate to use an antibiotic.

<http://www.cdc.gov/getsmart/campaign-materials/print-materials/brochure-answer.pdf>

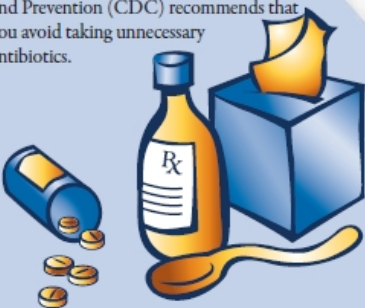
When you feel sick, you want to feel better fast. But antibiotics aren't the answer for every illness. This brochure can help you know when antibiotics work – and when they won't. For more information, talk to your healthcare provider or visit www.cdc.gov/getsmart.

The Risk:
Bacteria Become Resistant

What's the harm in taking antibiotics anytime? Using antibiotics when they are not needed causes some bacteria to become resistant to the antibiotic.

These resistant bacteria are stronger and harder to kill. They can stay in your body and can cause severe illnesses that cannot be cured with antibiotics. A cure for resistant bacteria may require stronger treatment – and possibly a stay in the hospital.

To avoid the threat of antibiotic-resistant infections, the Centers for Disease Control and Prevention (CDC) recommends that you avoid taking unnecessary antibiotics.



Antibiotics Aren't Always the Answer

Most illnesses are caused by two kinds of germs: bacteria or viruses. Antibiotics can cure bacterial infections – not viral infections.


Bacteria cause strep throat, some pneumonia and sinus infections. *Antibiotics can work.*

Viruses cause the common cold, most coughs and the flu. *Antibiotics don't work.*

Using antibiotics for a virus:

- Will NOT cure the infection
- Will NOT help you feel better
- Will NOT keep others from catching your illness

Protect Yourself With the Best Care



You should not use antibiotics to treat the common cold or the flu.

If antibiotics are prescribed for you to treat a bacterial infection – such as strep throat – be sure to take all of the medicine. Only using part of the prescription means that only part of the infection has been treated. Not finishing the medicine can cause resistant bacteria to develop.

Talk to Your Healthcare Provider to Learn More

Commonly Asked Questions:

How Do I Know if I Have a Viral or Bacterial Infection?

Ask your healthcare provider and follow his or her advice on what to do about your illness.

Remember, colds are caused by viruses and should not be treated with antibiotics.

Won't an Antibiotic Help Me Feel Better Quicker so That I Can Get Back to Work When I Get a Cold or the Flu?

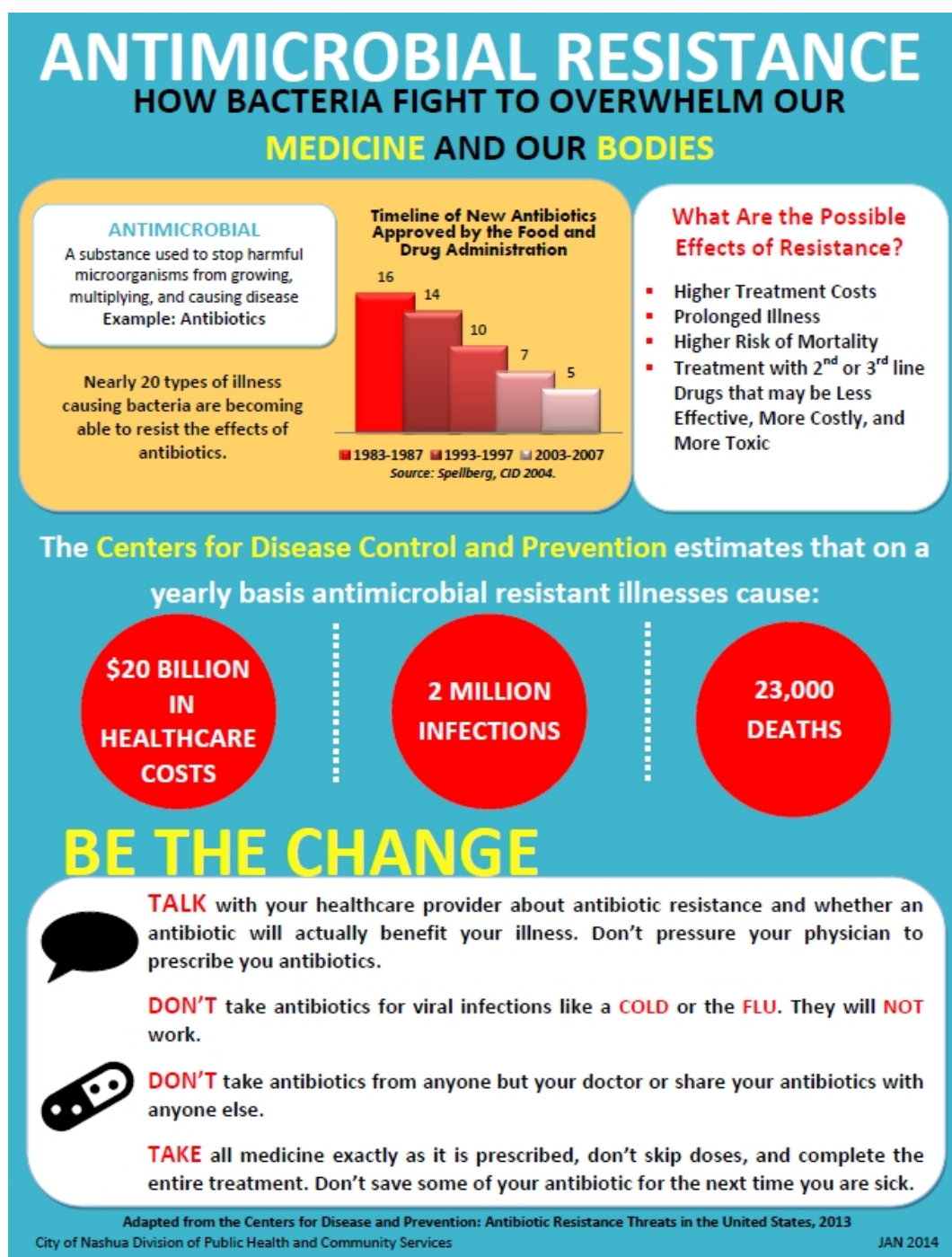
No, antibiotics do nothing to help a viral illness. They will not help you feel better sooner. Ask your healthcare provider what other treatments are available to treat your symptoms.

If Mucus from the Nose Changes from Clear to Yellow or Green — Does This Mean I Need an Antibiotic?

No. Yellow or green mucus does not mean that you have a bacterial infection. It is normal for mucus to get thick and change color during a viral cold.

GR-12: City of Nashua, Division of Public Health and Community Services (DPHCS): Superbugs Infographic

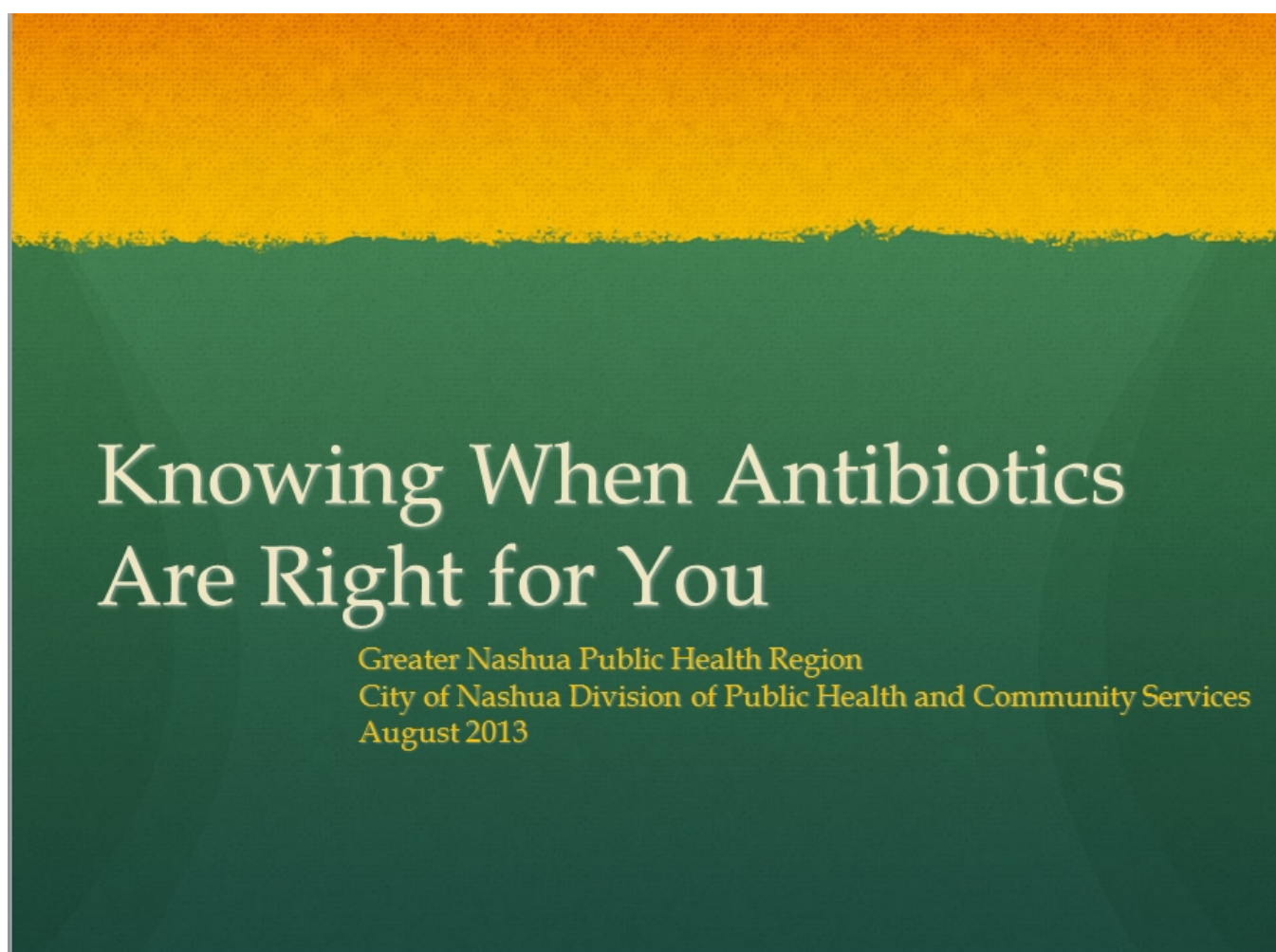
Antimicrobial resistance infographic explaining the impact of multidrug resistant organisms and ways to limit the spread of resistance on an individual level.



GR-13: City of Nashua, Division of Public Health and Community Services (DPHCS):

Knowing When Antibiotics Are Right for You

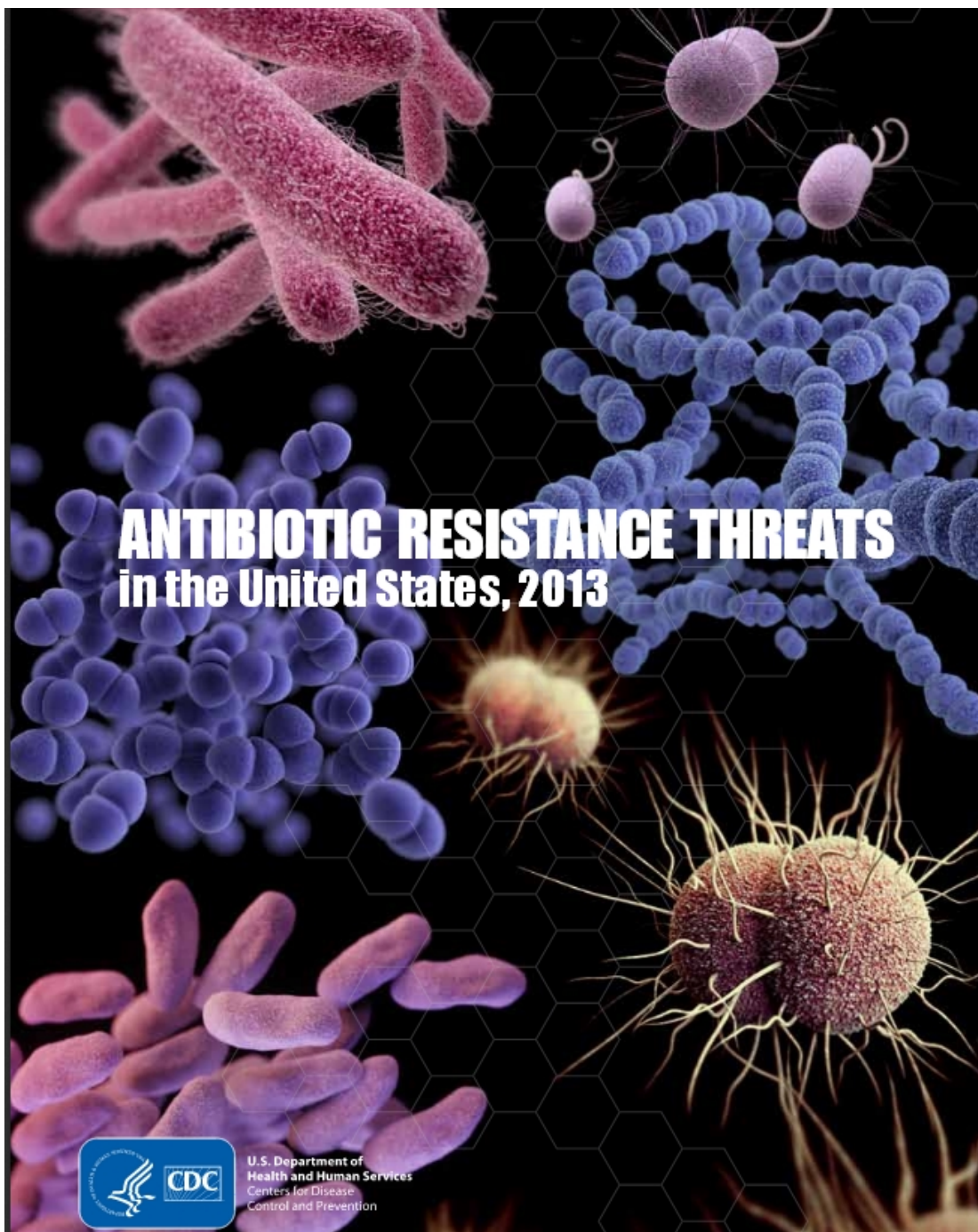
A PowerPoint presentation targeted to the general population. Explains the difference between viruses and bacteria, how bacteria become resistant, and how resistant bacteria impact the body.



GR14: Centers for Disease Control and Prevention (CDC): Antibiotic Resistance Threats in the United States, 2013

A snapshot of the burden and threats of antibiotic resistant microorganisms in the United States.

<http://www.cdc.gov/drugresistance/threat-report-2013/>



Clostridium Difficile

GR-15: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about
“*Clostridium difficile*” (English/Spanish)

GR-16: New Hampshire Department of Health and Human Services: *Clostridium difficile*, Fact Sheet

GR-17: Living with *Clostridium difficile*, Pamphlet

GR-15: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about “*Clostridium difficile*” (English/Spanish)

Patient flyer explaining *Clostridium difficile* and infection prevention inside of the hospital and after discharge.

<http://www.cdc.gov/hai/organisms/cdiff/Cdiff-patient.html>

FAQs (frequently asked questions)

about
“Clostridium Difficile”

What is Clostridium difficile infection?
Clostridium difficile [pronounced Klo-STRID-ee-um dif-uh-SEEL], also known as “*C. diff*” [See-dif], is a germ that can cause diarrhea. Most cases of *C. diff* infection occur in patients taking antibiotics. The most common symptoms of a *C. diff* infection include:

- Watery diarrhea
- Fever
- Loss of appetite
- Nausea
- Belly pain and tenderness

Who is most likely to get *C. diff* infection?
The elderly and people with certain medical problems have the greatest chance of getting *C. diff*. *C. diff* spores can live outside the human body for a very long time and may be found on things in the environment such as bed linens, bed rails, bathroom fixtures, and medical equipment. *C. diff* infection can spread from person-to-person on contaminated equipment and on the hands of doctors, nurses, other healthcare providers and visitors.

Can *C. diff* infection be treated?
Yes, there are antibiotics that can be used to treat *C. diff*. In some severe cases, a person might have to have surgery to remove the infected part of the intestines. This surgery is needed in only 1 or 2 out of every 100 persons with *C. diff*.

What are some of the things that hospitals are doing to prevent *C. diff* infections?
To prevent *C. diff* infections, doctors, nurses, and other healthcare providers:

- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for every patient. This can prevent *C. diff* and other germs from being passed from one patient to another on their hands.
- Carefully clean hospital rooms and medical equipment that have been used for patients with *C. diff*.
- Use Contact Precautions to prevent *C. diff* from spreading to other patients. Contact Precautions mean:
 - Whenever possible, patients with *C. diff* will have a single room or share a room only with someone else who also has *C. diff*.
 - Healthcare providers will put on gloves and wear a gown over their clothing while taking care of patients with *C. diff*.
 - Visitors may also be asked to wear a gown and gloves.
 - When leaving the room, hospital providers and visitors remove their gown and gloves and clean their hands.

Patients on Contact Precautions are asked to stay in their hospital rooms as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They can go to other areas of the hospital for treatments and tests.

- Only give patients antibiotics when it is necessary.

What can I do to help prevent *C. diff* infections?

- Make sure that all doctors, nurses, and other healthcare providers clean their hands with soap and water or an alcohol-based hand rub before and after caring for you.

If you do not see your providers clean their hands, please ask them to do so.

- Only take antibiotics as prescribed by your doctor.
- Be sure to clean your own hands often, especially after using the bathroom and before eating.

Can my friends and family get *C. diff* when they visit me?
C. diff infection usually does not occur in persons who are not taking antibiotics. Visitors are not likely to get *C. diff*. Still, to make it safer for visitors, they should:

- Clean their hands before they enter your room and as they leave your room.
- Ask the nurse if they need to wear protective gowns and gloves when they visit you.

What do I need to do when I go home from the hospital?
Once you are back at home, you can return to your normal routine. Often, the diarrhea will be better or completely gone before you go home. This makes giving *C. diff* to other people much less likely. There are a few things you should do, however, to lower the chances of developing *C. diff* infection again or of spreading it to others.

- If you are given a prescription to treat *C. diff*, take the medicine exactly as prescribed by your doctor and pharmacist. Do not take half-doses or stop before you run out.
- Wash your hands often, especially after going to the bathroom and before preparing food.
- People who live with you should wash their hands often as well.
- If you develop more diarrhea after you get home, tell your doctor immediately.
- Your doctor may give you additional instructions.

If you have questions, please ask your doctor or nurse.

Co-sponsored by:

GR-16: New Hampshire Department of Health and Human Services:

Clostridium difficile, Fact Sheet

This fact sheet provides all of the basic information about what is *Clostridium difficile* and how it is treated and prevented.

<http://www.dhhs.nh.gov/dphs/cdcs/documents/clostridium-difficile.pdf>

New Hampshire
Department of
Health and Human Services
Division of Public Health Services

Fact Sheet

Clostridium difficile

What is *Clostridium difficile*?

C. difficile is a spore-forming bacteria that causes severe diarrhea and more serious intestinal conditions such as colitis.

What is the meaning of the term *C. difficile* diseases?

They are diseases that result from *C. difficile* infections such as colitis, more serious intestinal conditions, sepsis, and rarely death.

What are the symptoms of *C. difficile* disease?

Symptoms include:

- Watery diarrhea (at least three times a day for two or more days)
- Fever
- Loss of appetite
- Nausea
- Abdominal pain/tenderness

How is *C. difficile* treated?

C. difficile is generally treated for 10 days with antibiotics prescribed by a healthcare provider.

How do people get *C. difficile* disease?

People in good health usually don't get *C. difficile* disease. People who have other illnesses or conditions requiring prolonged use of antibiotics and the elderly are at greater risk of acquiring this disease. The bacteria are found in feces. People can become infected if they touch items or surfaces that are contaminated with feces and then touch their mouths or mucous membranes. Healthcare workers can spread

the bacteria to other patients or contaminate surfaces through hand contact.

What should I do to prevent the spread of *C. difficile* to others?

If you are infected you can spread the disease to others. However, only people who are hospitalized or on antibiotics are likely to become ill. For health and safety reasons take the following precautions:

- Wash hands with soap and water, especially after using the restroom and before eating;
- Clean surfaces in bathrooms, kitchens and other areas on a regular basis with household detergent/disinfectants.

What should I do if I think I have *C. difficile*?

Contact your healthcare provider.

For specific concerns about *Clostridium difficile*, call the New Hampshire Department of Health and Human Services, Bureau of Infectious Disease Control at 603-271-4496 or 800-852-3345 x4496. For further information, refer to the Centers for Disease Control and Prevention website at www.cdc.gov or the New Hampshire Department of Health and Human Services website at www.dhhs.nh.gov.

GR-17: Living with *Clostridium difficile* Pamphlet

A pamphlet targeted for individuals with *Clostridium difficile* infections, their family members and caregivers. This pamphlet provides education and recommendations for self-care, reducing transmission, and when to see a healthcare provider.

<http://www.azdhs.gov/phs/oids/hai/advisory-committee/education-training.htm>

Living with C. diff

Learning how to control the spread of
Clostridium difficile (C. diff)



***This can be serious,
I need to do something about this now!***

Methicillin Resistant *Staphylococcus aureus* (MRSA)

GR-18: City of Nashua, Division of Public Health and Community Services (DPHCS): Frequently Asked Questions about MRSA Brochure

GR-19: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about MRSA (English/Spanish)

GR-20: Centers for Disease Control and Prevention (CDC): MRSA Fact Sheet (English/Spanish)

GR-21: New Hampshire Department of Health and Human Services Staph/MRSA Fact Sheet

GR-22: Living with MRSA (English/Spanish)

GR-23: MRSA and the Workplace

GR-18: City of Nashua, Division of Public Health and Community Services (DPHCS): Frequently Asked Questions about MRSA Brochure

Brochure explaining the signs of MRSA, how it is spread, and ways to prevent its transmission.

<http://bit.ly/1RMSNOT>

HOW CAN I PROTECT MY FAMILY FROM MRSA?

- Know the signs of a MRSA skin infection and get treated early.
- Keep cuts and scrapes clean and covered.
- Encourage good hygiene. Regularly wash your hands with soap and water.
- Discourage the sharing of personal items such as towels and razors.
- Maintain a clean environment by cleaning frequently touched surfaces that come into direct contact with your skin.
- Shower with soap and water after activities (e.g. sports) where you have had direct skin contact with other people.



FOR ADDITIONAL INFORMATION:

Centers for Disease Control and Prevention (CDC)

<http://www.cdc.gov/MRSA>

New Hampshire Department of Health and Human Services

MRSA Skin Infection Fact Sheet

<http://www.dhhs.nh.gov/dphs/cdcs/staph/documents/mrsa.pdf>



City of Nashua, NH
Division of Public Health and Community Services
18 Mulberry St. Nashua, NH 03060
603-589-4560
www.nashuanh.gov

NH Department of Health & Human Services
Division of Public Health Services
Healthcare-Associated Infections Program
Division of Public Health Services
29 Hazen Drive Concord, NH 03301
603-271-4496
<http://www.dhhs.nh.gov/dphs/cdcs/hai/index.htm>

Adapted from the New York State Department of Health and the Centers for Disease Control and Prevention

MRSA

Frequently Asked Questions About MRSA



GR-19: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about MRSA (English/Spanish)

A one-page resource to help the public understand more about MRSA. Also covers what individuals can do to safeguard their health and what healthcare facilities can do to reduce the spread of MRSA.

<http://www.cdc.gov/mrsa/healthcare/patient/index.html>

FAQs

(frequently asked questions)

about

"MRSA"

(Methicillin-Resistant *Staphylococcus aureus*)

What is MRSA?

Staphylococcus aureus (pronounced staff-ill-oh-KOK-us AW-ree-us), or "Staph" is a very common germ that about 1 out of every 3 people have on their skin or in their nose. This germ does not cause any problems for most people who have it on their skin. But sometimes it can cause serious infections such as skin or wound infections, pneumonia, or infections of the blood.

Antibiotics are given to kill Staph germs when they cause infections. Some Staph are resistant, meaning they cannot be killed by some antibiotics. "Methicillin-resistant *Staphylococcus aureus*" or "MRSA" is a type of Staph that is resistant to some of the antibiotics that are often used to treat Staph infections.

Who is most likely to get an MRSA infection?

In the hospital, people who are more likely to get an MRSA infection are people who:

- have other health conditions making them sick
- have been in the hospital or a nursing home
- have been treated with antibiotics.

People who are healthy and who have not been in the hospital or a nursing home can also get MRSA infections. These infections usually involve the skin. More information about this type of MRSA infection, known as "community-associated MRSA" infection, is available from the Centers for Disease Control and Prevention (CDC). <http://www.cdc.gov/mrsa>

How do I get an MRSA infection?

People who have MRSA germs on their skin or who are infected with MRSA may be able to spread the germ to other people. MRSA can be passed on to bed linens, bed rails, bathroom fixtures, and medical equipment. It can spread to other people on contaminated equipment and on the hands of doctors, nurses, other healthcare providers and visitors.

Can MRSA infections be treated?

Yes, there are antibiotics that can kill MRSA germs. Some patients with MRSA abscesses may need surgery to drain the infection. Your healthcare provider will determine which treatments are best for you.

What are some of the things that hospitals are doing to prevent MRSA infections?

To prevent MRSA infections, doctors, nurses, and other healthcare providers:

- clean their hands with soap and water or an alcohol-based hand rub before and after caring for every patient.
- Carefully clean hospital rooms and medical equipment.
- Use Contact Precautions when caring for patients with MRSA. Contact Precautions mean:
 - o Whenever possible, patients with MRSA will have a single room or will share a room only with someone else who also has MRSA.
 - o Healthcare providers will put on gloves and wear a gown over their clothing while taking care of patients with MRSA.
 - o Visitors may also be asked to wear a gown and gloves.
 - o When leaving the room, hospital providers and visitors remove their gown and gloves and clean their hands.
 - o Patients on Contact Precautions are asked to stay in their hospital rooms as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They may go to other areas of the hospital for treatments and tests.
- May test some patients to see if they have MRSA on their skin. This test involves rubbing a cotton-tipped swab in the patient's nostrils or on the skin.

What can I do to help prevent MRSA infections?

In the hospital

- Make sure that all doctors, nurses, and other healthcare providers clean their hands with soap and water or an alcohol-based hand rub before and after caring for you.

If you do not see your providers clean their hands, please ask them to do so.

When you go home

- If you have wounds or an intravascular device (such as a catheter or dialysis port) make sure that you know how to take care of them.

Can my friends and family get MRSA when they visit me?

The chance of getting MRSA while visiting a person who has MRSA is very low. To decrease the chance of getting MRSA your family and friends should:

- Clean their hands before they enter your room and when they leave.
- Ask a healthcare provider if they need to wear protective gowns and gloves when they visit you.







What do I need to do when I go home from the hospital?

To prevent another MRSA infection and to prevent spreading MRSA to others:

- Keep taking any antibiotics prescribed by your doctor. Don't take half-doses or stop before you complete your prescribed course.
- Clean your hands often, especially before and after changing your wound dressing or bandage.
- People who live with you should clean their hands often as well.
- Keep any wounds clean and change bandages as instructed until healed.
- Avoid sharing personal items such as towels or razors.
- Wash and dry your clothes and bed linens in the warmest temperatures recommended on the labels.
- Tell your healthcare providers that you have MRSA. This includes home health nurses and aides, therapists, and personnel in doctors' offices.
- Your doctor may have more instructions for you.

If you have questions, please ask your doctor or nurse.

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GR-20: Centers for Disease Control and Prevention (CDC): MRSA Fact Sheet (English/Spanish)

Fact sheet detailing what MRSA is, signs and symptoms of infection, and ways to prevent its spread.

<http://www.cdc.gov/mrsa/community/posters/index.html>



MRSA FACT SHEET

What is MRSA?

MRSA is methicillin-resistant *Staphylococcus aureus*, a potentially dangerous type of staph bacteria that is resistant to certain antibiotics and may cause skin and other infections. As with all regular staph infections, recognizing the signs and receiving treatment for MRSA skin infections in the early stages reduces the chances of the infection becoming severe. MRSA is spread by:

- > Having direct contact with another person's infection
- > Sharing personal items, such as towels or razors, that have touched infected skin
- > Touching surfaces or items, such as used bandages, contaminated with MRSA

What are the signs and symptoms?

Most staph skin infections, including MRSA, appear as a bump or infected area on the skin that may be:

- > Red
- > Swollen
- > Painful
- > Warm to the touch
- > Full of pus or other drainage
- > Accompanied by a fever

What if I suspect an MRSA skin infection?

Cover the area with a bandage and contact your healthcare professional. It is especially important to contact your healthcare professional if signs and symptoms of an MRSA skin infection are accompanied by a fever.

How are MRSA skin infections treated?

Treatment for MRSA skin infections may include having a healthcare professional drain the infection and, in some cases, prescribe an antibiotic. Do not attempt to drain the infection yourself – doing so could worsen or spread it to others. If you are given an antibiotic, be sure to take all of the doses (even if the infection is getting better), unless your healthcare professional tells you to stop taking it.

How can I protect my family from MRSA skin infections?

- > Know the signs of MRSA skin infections and get treated early
- > Keep cuts and scrapes clean and covered
- > Encourage good hygiene such as cleaning hands regularly
- > Discourage sharing of personal items such as towels and razors



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**For more information, please call
1-800-CDC-INFO or visit www.cdc.gov/MRSA.**

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GR-21: New Hampshire Department of Health and Human Services:

Staph/MRSA Fact Sheet

This fact sheet provides quick answers to all of the basic questions that one needs to know about Staph/MRSA skin infections.

<http://www.dhhs.nh.gov/dhhs/edss/staph/mrsa/factsheet.htm>

New Hampshire
Department of
Health and Human Services
Division of Public Health Services

Fact Sheet

Staph/MRSA Skin Infections

Recently New Hampshire has been seeing an increase in the number of cases of skin infections caused by *Staphylococcus aureus* (Staph) bacteria that are resistant to many antibiotics (drugs that kill bacteria), also called methicillin-resistant *Staphylococcus aureus* (MRSA).

What is a Staph/MRSA skin infection?

A Staph/MRSA skin infection can be a pimple, rash, boil, or an open wound. Staph/MRSA is often misdiagnosed as spider bites. Staph bacteria are commonly found on the skin of healthy persons. Staph/MRSA infections often begin with an injury to the skin. Symptoms of Staph infection include redness, warmth, swelling, tenderness of the skin, and boils or blisters. Sometimes it does not cause any problems; sometimes it causes minor infections, such as pimples or boils. If left untreated, it can cause serious skin infections or worse.

How do Staph/MRSA skin infections spread?

Staph/MRSA lives on skin and survives on objects for 24 hours or more. The cleanest person can get a Staph/MRSA infection. Antibiotic-resistant Staph/MRSA skin infections are found in places where there are crowds of people (school, jails, gyms). Staph/MRSA can rub off on the skin of an infected person onto the skin of another person during skin-to-skin contact. Or, the Staph can come off of the infected skin of a person onto a shared object or surface, and get onto the skin of the next person who uses

it. Examples of commonly shared objects include towels, soap, benches in hot tubs, and athletic equipment—anything that could have touched the skin of a Staph-infected person can carry the bacteria to the skin of another person.

How can I prevent myself or my family members from getting infected?

Wash your hands with soap and warm water. Keep cuts and scrapes clean with soap and water. Avoid skin contact and sharing personal items with anyone you suspect could have a Staph skin infection. When using protective gloves to treat infected area, remove and dispose of properly; wash your hands with soap and water after removing them. Do not share personal items with other persons who might have skin infections.

What should I do if I think I have a skin infection?

Consult your healthcare provider as soon as possible if you think you have a skin infection. Early treatment can help prevent the infection from getting worse. Be sure to follow directions from your doctor or healthcare provider closely, even when you start to feel better. Not taking all of your pills leads to stronger, antibiotic-resistant bacteria.

If I was told by my healthcare provider that I have a Staph/MRSA skin infection, how do I keep others from getting infected?

- Keep the infected area covered with clean, dry bandages. Pus from infected wounds is very infectious.

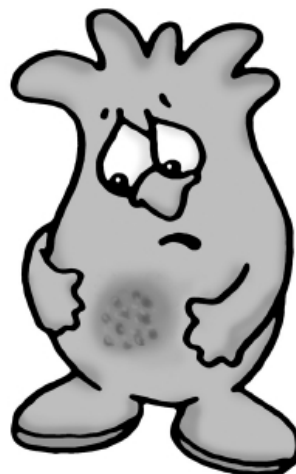
GR-22: Living with MRSA (English/Spanish)

A pamphlet for individuals with MRSA infections, their family members and caregivers. Provides education and recommendations for self-care, reducing transmission, and when to see a healthcare provider.

<http://here.doh.wa.gov/materials/living-with-mrsa>

Living with MRSA

*This is really serious.
I need to do something
about this now!*



Learning how to control the spread of
Methicillin-Resistant Staphylococcus Aureus (MRSA)

GR-23: MRSA and the Workplace

A two page handout for all non-healthcare workplaces that covers what is MRSA, how its spread can be limited in the workplace, and when it is and isn't safe for an employee with MRSA to go to work.

<http://www.cdc.gov/niosh/docs/2013-112/pdfs/2013-112.pdf>

MRSA and the Workplace

Note: This information is for general workplaces, not healthcare facilities.

What is MRSA?

MRSA (methicillin-resistant *Staphylococcus aureus*) is a potentially dangerous type of staph bacteria. Staph is commonly carried on the skin or in the nose of healthy people and can sometimes cause infection. MRSA is resistant to treatment by certain antibiotics. Although the infection may start as a minor skin sore, it can become serious, sometimes even fatal.



MRSA Infection
Public Health Image Library
<http://phil.cdc.gov/phil/home.asp>

What are the signs and symptoms?

Staph skin infections, including MRSA, usually start as a bump on the skin that may be red, warm, swollen, full of pus, or painful. They may look like a pimple, a boil, or a spider bite. Photos of MRSA skin infections are available at www.cdc.gov/mrsa/symptoms/index.html.

How does MRSA spread?

MRSA usually spreads by touching infected skin. It can also spread by touching materials or surfaces that had contact with an infection (e.g., towels, clothing, faucets, door knobs).



Washing your hands stops MRSA

In what work settings is exposure to MRSA most likely?

MRSA skin infections can occur in any work setting. However, certain factors make it easier for MRSA to spread. These are the 5 Cs: **C**rowding, frequent skin-to-skin **C**ontact, **C**ompromised skin (cut, scrape, or rash), **C**ontaminated items and surfaces, and lack of **C**leanliness.

Workplaces where the 5 Cs are common include schools and daycare facilities, dormitories, military barracks, and correctional facilities.

People who work with farm animals or pets may also be at risk of MRSA infections from animals.

Is it safe to work with someone who has a staph or MRSA infection?

It is safe to work with them as long as their wound is kept clean, dry, and covered.

Who should be restricted from work?

- Restrict workers with wound drainage (pus) that cannot be covered and contained with a clean, dry bandage or who cannot maintain good hygiene practices, until the infection has healed.
- Restrict workers with active infections from activities where it is likely that others will contact the affected skin, until the infection has healed.
- Restrict food handlers with a lesion containing pus (such as a boil) or infected wound that is open and draining unless it is covered in accordance with the Food Code 2009 (www.fda.gov/FoodCode2009).

Department of Health and Human Services
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health



Surgical Site Infections (SSIs)

GR-24: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about Surgical Site Infections (English/Spanish)

GR-24: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about Surgical Site Infections (English/Spanish)

A one page resource to help the public understand Surgical Site Infections. Also covers what individuals can do to safeguard their health and what healthcare facilities can do to reduce the spread of SSIs.

<http://www.cdc.gov/hai/ssi/ssi.html>



FAQs
(frequently asked questions)

about
"Surgical Site Infections"

What is a Surgical Site Infection (SSI)?
A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Most patients who have surgery do not develop an infection. However, infections develop in about 1 to 3 out of every 100 patients who have surgery.

Some of the common symptoms of a surgical site infection are:

- Redness and pain around the area where you had surgery
- Drainage of cloudy fluid from your surgical wound
- Fever

Can SSIs be treated?
Yes. Most surgical site infections can be treated with antibiotics. The antibiotic given to you depends on the bacteria (germs) causing the infection. Sometimes patients with SSIs also need another surgery to treat the infection.

What are some of the things that hospitals are doing to prevent SSIs?
To prevent SSIs, doctors, nurses, and other healthcare providers:

- Clean their hands and arms up to their elbows with an antiseptic agent just before the surgery.
- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for each patient.
- May remove some of your hair immediately before your surgery using electric clippers if the hair is in the same area where the procedure will occur. They should not shave you with a razor.
- Wear special hair covers, masks, gowns, and gloves during surgery to keep the surgery area clean.
- Give you antibiotics before your surgery starts. In most cases, you should get antibiotics within 60 minutes before the surgery starts and the antibiotics should be stopped within 24 hours after surgery.
- Clean the skin at the site of your surgery with a special soap that kills germs.

What can I do to help prevent SSIs?
Before your surgery:

- Tell your doctor about other medical problems you may have. Health problems such as allergies, diabetes, and obesity could affect your surgery and your treatment.

- Quit smoking. Patients who smoke get more infections. Talk to your doctor about how you can quit before your surgery.
- Do not shave near where you will have surgery. Shaving with a razor can irritate your skin and make it easier to develop an infection.

At the time of your surgery:

- Speak up if someone tries to shave you with a razor before surgery. Ask why you need to be shaved and talk with your surgeon if you have any concerns.
- Ask if you will get antibiotics before surgery.

After your surgery:

- Make sure that your healthcare providers clean their hands before examining you, either with soap and water or an alcohol-based hand rub.

If you do not see your providers clean their hands, please ask them to do so.

- Family and friends who visit you should not touch the surgical wound or dressing.
- Family and friends should clean their hands with soap and water or an alcohol-based hand rub before and after visiting you. If you do not see them clean their hands, ask them to clean their hands.

What do I need to do when I go home from the hospital?

- Before you go home, your doctor or nurse should explain everything you need to know about taking care of your wound. Make sure you understand how to care for your wound before you leave the hospital.
- Always clean your hands before and after caring for your wound.
- Before you go home, make sure you know who to contact if you have questions or problems after you get home.
- If you have any symptoms of an infection, such as redness and pain at the surgery site, drainage, or fever, call your doctor immediately.

If you have additional questions, please ask your doctor or nurse.

Co-sponsored by:

[Catheter Associated Urinary Tract Infections \(CAUTI\)](#)

GR-25: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about Catheter-associated Urinary Tract Infection (English/Spanish)

GR-25: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about Catheter-Associated Urinary Tract Infection (English/Spanish)

A one page flyer to help the public understand Catheter-Associated Urinary Tract Infection. Also covers what individuals can do to safeguard their health and what healthcare facilities can do to reduce the spread of these infections.

http://www.cdc.gov/HAI/ca_uti/uti.html



FAQs
(frequently asked questions)

about
"Catheter-Associated Urinary Tract Infection"

What is "catheter-associated urinary tract infection"?
A urinary tract infection (also called "UTI") is an infection in the urinary system, which includes the bladder (which stores the urine) and the kidneys (which filter the blood to make urine). Germs (for example, bacteria or yeasts) do not normally live in these areas; but if germs are introduced, an infection can occur.
If you have a urinary catheter, germs can travel along the catheter and cause an infection in your bladder or your kidney; in that case it is called a catheter-associated urinary tract infection (or "CA-UTI").

What is a urinary catheter?
A urinary catheter is a thin tube placed in the bladder to drain urine. Urine drains through the tube into a bag that collects the urine. A urinary catheter may be used:
• If you are not able to urinate on your own
• To measure the amount of urine that you make, for example, during intensive care
• During and after some types of surgery
• During some tests of the kidneys and bladder
People with urinary catheters have a much higher chance of getting a urinary tract infection than people who don't have a catheter.

How do I get a catheter-associated urinary tract infection (CA-UTI)?
If germs enter the urinary tract, they may cause an infection. Many of the germs that cause a catheter-associated urinary tract infection are common germs found in your intestines that do not usually cause an infection there. Germs can enter the urinary tract when the catheter is being put in or while the catheter remains in the bladder.

What are the symptoms of a urinary tract infection?
Some of the common symptoms of a urinary tract infection are:
• Burning or pain in the lower abdomen (that is, below the stomach)
• Fever
• Bloody urine may be a sign of infection, but is also caused by other problems
• Burning during urination or an increase in the frequency of urination after the catheter is removed.
Sometimes people with catheter-associated urinary tract infections do not have these symptoms.

Can catheter-associated urinary tract infections be treated?
Yes, most catheter-associated urinary tract infections can be treated with antibiotics and removal or change of the catheter. Your doctor will determine which antibiotic is best for you.

What are some of the things that hospitals are doing to prevent catheter-associated urinary tract infections?
To prevent urinary tract infections, doctors and nurses take the following actions:

Catheter insertion
• Catheters are put in only when necessary and they are removed as soon as possible.
• Only properly trained persons insert catheters using sterile ("clean") technique.
• The skin in the area where the catheter will be inserted is cleaned before inserting the catheter.
• Other methods to drain the urine are sometimes used, such as:
• External catheters in men (these look like condoms and are placed over the penis rather than into the penis)
• Putting a temporary catheter in to drain the urine and removing it right away. This is called intermittent urethral catheterization.

Catheter care
• Healthcare providers clean their hands by washing them with soap and water or using an alcohol-based hand rub before and after touching your catheter.
If you do not see your providers clean their hands, please ask them to do so.
• Avoid disconnecting the catheter and drain tube. This helps to prevent germs from getting into the catheter tube.
• The catheter is secured to the leg to prevent pulling on the catheter.
• Avoid twisting or kinking the catheter.
• Keep the bag lower than the bladder to prevent urine from backflowing to the bladder.
• Empty the bag regularly. The drainage spout should not touch anything while emptying the bag.

What can I do to help prevent catheter-associated urinary tract infections if I have a catheter?
• Always clean your hands before and after doing catheter care.
• Always keep your urine bag below the level of your bladder.
• Do not tug or pull on the tubing.
• Do not twist or kink the catheter tubing.
• Ask your healthcare provider each day if you still need the catheter.

What do I need to do when I go home from the hospital?
• If you will be going home with a catheter, your doctor or nurse should explain everything you need to know about taking care of the catheter. Make sure you understand how to care for it before you leave the hospital.
• If you develop any of the symptoms of a urinary tract infection, such as burning or pain in the lower abdomen, fever, or an increase in the frequency of urination, contact your doctor or nurse immediately.
• Before you go home, make sure you know who to contact if you have questions or problems after you get home.
If you have questions, please ask your doctor or nurse.

Co-sponsored by:

Catheter Associated (Central Line) Bloodstream Infections (CLABSI)

GR-26: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about Catheter-associated Bloodstream Infections (English/Spanish)

GR-26: Centers for Disease Control and Prevention (CDC): Frequently Asked Questions about Catheter-Associated Bloodstream Infections

A one page flyer to help the public understand Catheter-Associated/Central Line Associated Bloodstream Infections. Also covers what individuals can do to safeguard their health and what healthcare facilities can do to reduce the spread of these infections.

<http://www.cdc.gov/hai/bsi/bsi.html>

FAQs
(frequently asked questions)

about
**"Catheter-Associated
Bloodstream Infections"**
(also known as "Central Line-Associated Bloodstream Infections")

What is a catheter-associated bloodstream infection?
A "central line" or "central catheter" is a tube that is placed into a patient's large vein, usually in the neck, chest, arm, or groin. The catheter is often used to draw blood, or give fluids or medications. It may be left in place for several weeks. A bloodstream infection can occur when bacteria or other germs travel down a "central line" and enter the blood. If you develop a catheter-associated bloodstream infection you may become ill with fevers and chills or the skin around the catheter may become sore and red.

Can a catheter-related bloodstream infection be treated?
A catheter-associated bloodstream infection is serious, but often can be successfully treated with antibiotics. The catheter might need to be removed if you develop an infection.

What are some of the things that hospitals are doing to prevent catheter-associated bloodstream infections?
To prevent catheter-associated bloodstream infections doctors and nurses will:

- Choose a vein where the catheter can be safely inserted and where the risk for infection is small.
- Clean their hands with soap and water or an alcohol-based hand rub before putting in the catheter.
- Wear a mask, cap, sterile gown, and sterile gloves when putting in the catheter to keep it sterile. The patient will be covered with a sterile sheet.
- Clean the patient's skin with an antiseptic cleanser before putting in the catheter.
- Clean their hands, wear gloves, and clean the catheter opening with an antiseptic solution before using the catheter to draw blood or give medications. Healthcare providers also clean their hands and wear gloves when changing the bandage that covers the area where the catheter enters the skin.
- Decide every day if the patient still needs to have the catheter. The catheter will be removed as soon as it is no longer needed.
- Carefully handle medications and fluids that are given through the catheter.

What can I do to help prevent a catheter-associated bloodstream infection?

- Ask your doctors and nurses to explain why you need the catheter and how long you will have it.
- Ask your doctors and nurses if they will be using all of the prevention methods discussed above.
- Make sure that all doctors and nurses caring for you clean their hands with soap and water or an alcohol-based hand rub before and after caring for you.

If you do not see your providers clean their hands, please ask them to do so.

- If the bandage comes off or becomes wet or dirty, tell your nurse or doctor immediately.
- Inform your nurse or doctor if the area around your catheter is sore or red.
- Do not let family and friends who visit touch the catheter or the tubing.
- Make sure family and friends clean their hands with soap and water or an alcohol-based hand rub before and after visiting you.

What do I need to do when I go home from the hospital?
Some patients are sent home from the hospital with a catheter in order to continue their treatment. If you go home with a catheter, your doctors and nurses will explain everything you need to know about taking care of your catheter.

- Make sure you understand how to care for the catheter before leaving the hospital. For example, ask for instructions on showering or bathing with the catheter and how to change the catheter dressing.
- Make sure you know who to contact if you have questions or problems after you get home.
- Make sure you wash your hands with soap and water or an alcohol-based hand rub before handling your catheter.
- Watch for the signs and symptoms of catheter-associated bloodstream infection, such as soreness or redness at the catheter site or fever, and call your healthcare provider immediately if any occur.

If you have additional questions, please ask your doctor or nurse.

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