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Infection Control Directorate  
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Ministry of Health - Kuwait



**Infection Control Educational Guide  
for Patients, visitors & Sitters  
2017**

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## **Introduction**

- Our patient and their families have the right to receive standard healthcare and to be entitled and explained about medical procedures & treatment including health education regarding infection prevention & control
- In this guide infection control directorate had chosen the most important topics which need education and clarification to patients , sitter ,visitors or family members
- Health education must be done by care givers (doctors & nurses) in hospitals and primary health care centers who have sufficient knowledge about infection control principals and good communication skills.
- Orientation and health education should be done in clinical areas upon arrival of patient or his family , during daily rounds and on discharge, this education could be verbal, demonstrations, role playing with provision of handouts.
- The education have to be stratified by choosing the appropriate target, introduction, choosing the appropriate time and place for privacy and confidentiality and using the best strategy for education.
- Performance of the education session starts by approval of the target then keeping spontaneity of talk with good quality of voice & body language with clarification and stimulation of the target to ask and provision of conclusions
- Termination of the education cession by conclusions , complimenting the target and giving them the required brochures or leaflets or copy of the needed topics, documentation of the education session and giving feedback to infection control department

# Personal hygiene

Proper grooming and healthy personal habits can protect you from illnesses. Find out which personal hygiene habits should be part of your regular routine.

Being in hospitals as a patient, sitter or visitor, you are likely to be exposed to infectious risk if you do not follow the necessary precautions

## What should you do as a patient?

- Keep good oral hygiene by brushing your teeth after every meal. At least, brush your teeth twice a day to minimize the accumulation of bacteria in your mouth.
- Wash your body and hair (showering or bed bath) daily.
- Wear clean and tidy clothes every day. Unclean clothes should be washed with laundry soap before wearing them again.
- Follow sneeze and cough etiquette by turning away from other people and covering the nose and mouth with a tissue. If this is not done, droplets containing germs from the nose and mouth will spread to the air and other people can breathe it in, or the droplets can contaminate the environment.
- Wash your hands before preparing food or eating, after going to the bathroom, after coughing or sneezing to prevent spread of germs.
- Use personnel protective equipment when required.
- Refrain from smoking in hospitals.

## What should you do as a visitor?

- Ensure that you are in a good health before visiting your patient.
- Do not bring children inside the hospital.
- Clean your hands before and after patient's visit.

## What should you do as a sitter?

- Have a daily bath.
- Clean your hands frequently.
- Do not accumulate food inside the room.
- Keep your clothes clean all times.

# Hand Hygiene

Hand hygiene is an important measure in infection prevention and control when you visit a healthcare facility to protect patient from acquiring infections .

## How to clean your hands?

Hand hygiene can be performed by hand washing using liquid soap and water or by alcohol-based hand rub. Use alcohol based -hand rub to clean your hands only if your hands are not visibly soiled.

## When should you clean your hands?

1. On entering and before leaving hospital wards, outpatients clinics or any other health care facility
2. Before and after visiting a patient.
3. After touching contaminated surfaces.
4. After coughing or sneezing.
5. After visiting the toilet.
6. Before food preparation or eating.

## Consider the followings:

- Hand washing should be properly performed as shown in the diagram. Use clean paper towels to dry your hands.
- The same steps should be followed while using the alcohol-based hand rub but leave your hand to dry spontaneously.
- As you clean your hands, make sure the cleaning solution is covering all hands, paying attention to the thumbs, fingertips, between fingers and back of the hands.
- If the hands are not properly cleaned, many areas may be neglected.
- Gloves are sometimes useful and important for safe hands. However, they do not replace the need for hand cleaning.

## What is your role in the hand hygiene activity?

- Healthcare personnel may carry harmful germs on their hands. Your role is to make sure that they have cleaned their hands before touching you.
- Participate in preventing infection transmission by reminding health care personnel to clean their hands if they forget. You should not feel embarrassed. We encourage you to do so in a kind way.

**During your hospital stay or visit ,kindly join us and help preventing infection transmission by proper hand hygiene.**



Ministry of Health  
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# 8 Steps For Hand Washing



1 Remove watch and hand jewellery



2 Palm to palm



3 Palm to palm with fingers interlaced



4 Palm of right hand over back of left hand and palm of left hand over back of right hand.



5 Rotational rubbing of right thumb clasped in left palm and vice versa.



6 Rotational rubbing, backwards with clasped fingers of right hand in left palm and vice versa.



7 Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.



8 dry using paper towel

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**Hand Hygiene Campaign**

# Antibiotics

## What are antibiotics

Antibiotics are the group of medications which is used for destruction of bacteria.

It acts by direct killing of bacteria (bactericidal) or by stopping its multiplication (bacteriostatic) to enable human immune response to overcome it.

## Uses:

Antibiotics are used for treatment of bacterial infection or for prophylaxis from infections in certain situations.

## Some adverse effects:

- Some gastric upset or diarrhea.
- Allergic reactions in some persons to some certain antibiotics.
- Some side effects on kidney, kidney and blood components.
- Destruction of normal flora (beneficial bacteria) beside destruction of harmful bacteria which lead to disruption of normal balance of bacteria inside the body, this can lead to appearance of opportunistic infections e.g. oral thrush (candida infection).
- Increase the length of hospital stay and the cost of health care when used to treat health care-associated infections.

## What do you know about the problems of antibiotics resistance?

Bacteria are a living organisms can adapt & defend themselves against antibiotics.

They secrete some enzymes that minimize the effect of antibiotic especially if the antibiotic is used in insufficient dose or duration or if it is used haphazardly on a large scale.

This leads to emergence of resistant strains of bacteria which spread in health care facilities leading to an increasing rate of infections and outbreaks which become difficult to treat & control and increase patient's suffering and the cost burden due to using new antibiotics which are highly toxic.

## What is your role as a patient & family member to solve the problem of antibiotic resistance?

- Do not take an antibiotic for a viral infection like a cold, a cough, or the flu.
- Do not demand antibiotics, Never insist or ask the physician for prescribing antibiotic when he says they are not needed. They will not help in treating your infection.

## What to do when you are prescribed an antibiotic?

- Ask the physician about the reasons for prescribing antibiotics, how to use them, the precautions for their use with food, & drugs and in cases of pregnancy and lactation
- Take it exactly as the doctor & pharmacist instructions regarding the doses, timing & durations.
- Complete the prescribed course even if you are feeling better. If treatment stops too soon, some bacteria may survive and re-infect you.
- This goes for children, too. Make sure your children take all medication as prescribed, even if they feel better.

- consultation of the physician if there is adverse effect & Not to stop the antibiotic without his permission
- keeping the antibiotic in cold place away from children
- dissolving the powder of antibiotic with cold sterile water and use it within 10 day after dilution
- Throw away any leftover medication once you have completed your prescription

### **What **not to do** when you are prescribed an antibiotic?**

- Do not skip doses.
- Do not save any antibiotics for the next time you get sick
- Do not take antibiotics prescribed for someone else. The antibiotic may not be appropriate for your illness. Taking the wrong medicine may delay correct treatment and allow bacteria to multiply.

# 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.
- 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.

## To prevent SSIs, doctors, nurses, and other healthcare providers should:

- 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 you do to help preventing SSIs?

### *Before your surgery:*

- Tell your doctor about other medical problems you may have. Health problems such as allergies or diabetes 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 don't 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 dressings.
- 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 you need to do when you go home?**

- 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.
- 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.

## WOUND CARE

After surgery, you will need to take care of the incision as it heals. Doing so may limit scarring, may help you avoid pain or discomfort, and may help in preventing infection(s). Your doctor used stitches, staples, tissue glue, or tape strips to close the incision. And you will need to keep the area clean, change the dressing according to your doctor's instructions, and watch for signs of infection.

### How to reduce the risk of infection?

- Ask your doctor how long you need to keep the area dry. Follow your doctor's instructions exactly.
- Look at the incision every day, checking for signs of infection.
- Change the dressing as your doctor recommends.
- **Do not:**
  - scrub or rub incisions.
  - remove the tape strips from incisions unless your doctor tells you to do.
  - use lotion or powder on incisions.
  - expose incisions to sunlight.
  - take a bath unless you can keep the incision dry. Instead, take showers or sponge baths until your doctor says it's okay to take baths. before you shower, cover the dressing with a plastic bag or use another method of keeping it dry.

*You may notice some soreness, tenderness, tingling, numbness, and itching around the incision. There may also be mild oozing and bruising, and a small lump may form. This is normal and no cause for concern.*

### Call your doctor if you notice signs of an infection, such as:

- A yellow or green discharge that is increasing.
- A change in the size of the incision
- Increasing or unusual pain
- Excessive bleeding that has soaked through the dressing
- A change in the odor of the discharge.
- Redness or hardening of the surrounding area
- The incision is hot to the touch
- Fever

### How to change dressing?

Before you start, make sure you have gauze pads, a box of medical gloves, surgical tape, a plastic bag and scissors Then:

- Prepare supplies by opening the gauze packages and cutting new tape strips.
- Put on medical gloves.
- Loosen the tape around the old dressing.
- Remove the old dressing.
- Remove the gloves. At this point, clean the incision if your doctor told you to do so.
- Wash your hands, and put on another pair of medical gloves.
- Inspect the incision for signs of infection.
- Hold a clean, sterile gauze pad by the corner and place over the incision.
- Put all trash, including gloves, in a plastic bag. Seal plastic bag and throw it away.
- Wash your hands.

### How to clean the incision?

- Gently wash it with soap and water to remove the crust.
- Do not scrub or soak the wound.
- Do not use rubbing alcohol, hydrogen peroxide, or iodine, which can harm the tissue and slow wound healing unless recommended by your doctor.
- Before reapplying the dressing, make sure the incision is dry.

# Patients on Central Venous Catheter

## What is a catheter-associated bloodstream infections?

A “central line” is a tube that is placed into a patient’s large vein, usually in the neck, chest, arm, or groin to draw blood, or give fluids or medications. It may be left in place for several weeks. A bloodstream infection can occur when germs travel down a “central line” and enter the blood and it is called catheter-associated bloodstream infection.

## What are the symptoms of catheter-associated bloodstream infections?

Fever and chills or the skin around the catheter may become sore and red.

## What are actions taken to prevent catheter-associated bloodstream infections?

### Catheter Insertion:

Doctors and nurses will:

Choose an appropriate vein, 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. The patient will be covered with a sterile sheet and clean the patient’s skin with an antiseptic cleanser.

### Catheter Care:

Doctors and nurses will:

- 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.

## What can you do to help prevent catheter-associated bloodstream infections?

- 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 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.

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

# **Patients on Urinary Catheter**

## **What is Catheter-Associated Urinary Tract Infection (CAUTI)?**

A urinary tract infection is an infection in the urinary system, which includes the bladder and the kidneys. If you have a urinary catheter, it is called a catheter-associated urinary tract infection (CAUTI).

## **How do you get a CAUTI?**

If germs enter the urinary tract, they may cause an infection. 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?**

- Burning or pain in the lower abdomen, 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 are asymptomatic.

## **Can CAUTI be treated?**

Yes, most CAUTI can be treated with antibiotics and removal or change of the catheter. Your doctor will determine which antibiotic is best for you.

## **What are the actions taken to prevent CAUTI?**

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 & after cleaning The skin in the area.

### **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.

## **Remind your healthcare provider to clean their hands before touching you**

## **What can you do to help prevent CAUTI?**

- 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 you need to do when you go home?**

- Follow the instructions given by your doctor or nurse about taking care of the catheter.
- Contact your doctor or nurse immediately if you develop any of the symptoms of a urinary tract infection, such as burning or pain in the lower abdomen or fever.
- Make sure you know whom to contact if you have questions or problems.

# Patients on Ventilators

## What is a Ventilator-associated Pneumonia (VAP)?

Ventilator-associated pneumonia (VAP) is a lung infection that develops in a person who is on a ventilator. A ventilator is a machine that is used to help a patient breathe by giving oxygen through a tube placed in a patient's mouth or nose, or through a hole in the front of the neck. An infection may occur if germs enter through the tube and get into the patient's lungs.

## Why do patients need a ventilator?

A patient may need a ventilator when he or she is very ill or during and after surgery. Ventilators can be life-saving, but they can also increase the chance of getting pneumonia by making it easier for germs to get into the lungs.

## What are the signs and symptoms?

- Fever
- New purulent sputum (foul smelling infectious mucous coughed up from the lungs or air way into the mouth)
- Decreasing amounts of oxygen in the blood

## Can VAP be treated?

VAP is a very serious infection. Most of the time, it can be treated with antibiotics. The choice of antibiotics depends on which specific germs are causing the infection. Your doctor will decide which antibiotic is best.

## What can the family members do to help preventing VAP?

- Make sure that all healthcare providers caring for a ventilated patient clean their hands with soap and water or an alcohol-based hand rub.
- Keep hands clean.
- Ensure that the head of the bed is adjusted as indicated.
- Ask when the patient's own breathing will be allowed.
- Ensure the proper oral care for the ventilated patient.

# **MRSA Information for PATIENTS, Relatives and Sitters**

## **What is MRSA?**

MRSA is short for Methicillin Resistant Staphylococcus aureus. *Staphylococcus aureus* is a type of germ which often found in one out of 100 healthy people in nose or skin. Only in few occasions it may lead to serious infections such as blood, joints and wound infections.

## **Is MRSA a problem in the community?**

MRSA is not a problem for healthy people, children or pregnant women. However, people staying in hospital, receiving treatment and undergoing investigations are more at risk. Also people who have long-term skin lesions (such as leg ulcers), long-term urinary catheters and for those receiving frequent courses of antibiotics.

## **How can you get MRSA?**

Often it is difficult to determine how someone gets MRSA. It can be acquired both in the community as well as the hospital. It is usually spread by human contact, and can easily be transferred by hand contact. It can also be found in the environment or on equipment used by people carrying the germ if cleanliness standards are not maintained. Some people may have MRSA and be unaware of it.

Problems may arise when the MRSA gets the opportunity to enter the body to cause an infection. This can happen after surgery or if patient has a device such as a urinary catheter, a feeding or breathing tube (tracheostomy), or where there are leg ulcers or bedsores.

MRSA is more likely to colonise people with skin conditions such as eczema or psoriasis.

## **Can I pass it on to others?**

In the community, MRSA presents a very low risk indeed and you should proceed with all your activities as normal. You are generally in contact with other people who are healthy, so there is no risk of passing MRSA on. If you have any wounds they should be covered with waterproof dressings to protect yourself and others.

You can be visited and if you have to visit others in their own homes and concerned about certain individuals such as those on chemotherapy or skin conditions such as eczema, seek advice from your healthcare provider.

You can continue to have a normal life and maintain your usual relationship with your partner as transmission is usually through:

- Direct skin contact with one of those infected,
- touching surfaces contaminated with bacteria from infected persons.
- Infection is not transmitted through the air except in some cases of extensive eczema or psoriasis.

## **Can it be treated?**

Yes. The type of treatment will depend on where the MRSA has been found. These may include an ointment for the nose and/or antiseptic skin wash. Sometimes antibiotics are required.

## **What easiest way to prevent MRSA infection?**

Hand washing is the easiest way to prevent infection or if hand looks clean, you can use alcohol hand rub.

## **When should you wash your hands?**

- After using the toilet.
- Before preparing food, eating or drinking
- Each time you come into contact with other people or with surfaces or tools used by others.
- After touching any material contaminated with body fluids such as wound dressings.
- Before exercise or sports or training
- After sneezing, coughing or blowing.
- Before and after touching open sores and skin rashes.

# Information for MRSA Infected Patients on Discharge

## Family, friends and relatives

Normal social contact with family, relatives and friends is of no risk and shouldn't be prohibited. No special precautions will need to be taken. Tell the nurse before you go home if any one living with you in the same house is sick or is a hospital worker. He/ she will discuss this with the Infection Control professional to see if any special precautions need to be taken.

## Pregnant or a nursing mother

If you are pregnant and healthy, there are no additional risks from MRSA. Breastfeeding is safe for you and your baby. If you notice any of the following symptoms, you should contact your doctor :

- Painful breasts.
- Red patches or a sense of 'lumpiness' around the breasts.
- Flu-like symptoms, including high temperature.

## Treatment to continue when you go home may include:

### Ointment for your nostrils:

Your nurse or doctor will tell you how and when to use this. It is usually easiest to use a cotton bud to put a small amount of the ointment into each nostril three times a day for five days, and then pinch the nostrils together to spread the ointment.

### A special antiseptic soap to use when you have a bath or a shower:

A bath or shower should be taken every day, and your hair should be washed twice every five days using the antiseptic foam/soap, which you are given. A clean towel should be used after each bath and shampoo and this should be kept for your use only. Put on clean clothes, change bed sheets and pillowcases, if possible. All the used clothes and bed linen can be safely hand or machine-washed using a normal washing program, suitable for the fabric.

**If any of the above treatments cause you skin irritation, please stop using them immediately and inform your Doctor.**

# *Clostridium difficile*

## **What is *Clostridium difficile* infection?**

*Clostridium* is a germ that can cause diarrhea. *C. diff* spores can live outside the human body for a very long time and may be found on the environmental surfaces such as bed linens, bed rails, bathroom fixtures, and medical equipment. *C. diff* infection can spread from person-to-person through contaminated equipment or hands of healthcare providers and visitors.

## **Who is most likely to get *C. diff* infection?**

- Most cases of *C. diff* infection occur in patients taking antibiotics.
- The elderly and people with certain medical problems

## **What are the most common symptoms of a *C. diff* infection?**

Watery diarrhea, fever, loss of appetite, nausea, abdominal pain and tenderness.

## **Can *C. diff* infection be treated?**

Yes, there are antibiotics that can be used to treat *C. diff*. In certain severe cases (1-2%), surgery can be indicated to remove the infected part of the intestines.

## **What are the measures done in the hospitals to prevent *C. diff* infections?**

- Healthcare providers should clean their hands with soap and water after caring for each patient.
- Hospital rooms that have been used for patients with *C. diff* should be carefully cleaned and disinfected with chlorine based agent. Follow the proper procedures for reprocessing of medical equipment.
- Contact Precautions should be followed:
  - ✓ Patients with *C. diff* should be placed in a single room or share a room only with someone else who also has *C. diff*.
  - ✓ Healthcare providers should put on gloves and wear a yellow gown over their clothing while taking care of patients with *C. diff* and to remove them when leaving the room.
  - ✓ Visitors may also be asked to wear a gown and gloves.

## **What can you do to help preventing *C. diff* infections?**

- Make sure that all doctors, nurses, and other healthcare providers clean their hands with soap and water after caring for you.
- Only take antibiotics as prescribed by your doctor.
- Be sure to wash your own hands often, especially after using the bathroom and before eating.
- Keep your movement outside your room up to minimum.

## **What do you need to do when you go home?**

Once you are back home, you can return to your normal routine.

# **Influenza (Flu)**

## **What is influenza (also called flu)?**

Influenza, is a respiratory infection caused by the influenza virus, which infects the respiratory tract (nose, throat, lungs). It is very contagious and tends to occur during winter months.

## **How influenza spreads?**

The flu usually spreads from person to person through the air when an infected person coughs or sneezes and by direct contact via shaking hands or touching a contaminated surface.

## **What are the symptoms of Influenza?**

Symptoms of flu include fever, headache, extreme tiredness, cough, sore throat, runny nose, and muscle aches. Children can have additional gastrointestinal symptoms, such as nausea, vomiting, and diarrhea.

## **How do you find out if you have Influenza?**

There are tests available to diagnose flu through nasal and throat swabs .Your doctor may order a chest X-ray if he or she suspects that the influenza virus has caused respiratory complications.

## **How Influenza can be treated?**

Your doctor will recommend that you take rest and drink plenty of fluids .Take pain relievers for muscle aches and fever. There are also influenza antiviral drugs that can be used within 48 hours of the start of symptoms to treat flu illness.

## **What are the complications of Influenza?**

Bacterial pneumonia, dehydration, and worsening of chronic medical conditions, such as congestive heart failure, asthma, or diabetes. Children may have sinus problems and ear infections as complications.

## **What can you do to protect yourself from Influenza?**

- The best way to prevent the flu is by getting the seasonal flu vaccine each year.
- Wash your hands frequently with soap and water, especially before touching food and after using the bathroom.
- Use an antibacterial hand gel for the times you cannot wash your hands with soap and water.
- Use a tissue to cover your nose and mouth when you cough or sneeze, throw away the tissue, then wash your hands.
- Stay home from work if you have symptoms until 48 hours after the symptoms stop.
- Stay away from people who are sick.
- Eat right, exercise, and get plenty of sleep.
- Wash frequently touched objects, such as door handles, kitchen and bathroom surfaces, and phone receivers, with a household disinfectant.
- Avoid sharing your personal belongings with others.

# Instructions for Immunocompromised Patients

If you are "immunocompromised." This means that your immune system is very weak, making it difficult to fight off infection depending on your specific condition and the treatment you have. Certain cancers, cancer treatments, HIV infection, and transplant surgery are examples of things that can make you immunocompromised. You must be very careful-even the slightest infection can carry the risk of hospitalization or death. The following information will help you protect yourself from infection.

## What can you do to prevent infection?

- Hand hygiene is the best way to prevent infection. Wash your hands often, especially after using the bathroom. Make sure you wash them before and after changing any dressing or bandages.
- Carry hand sanitizer with you at all times.

## What precautions should you follow about your personal care?

- Do not schedule any dental procedures (including cleaning and minor surgery) without your oncologist's permission.
- Do not use tampons or douche, enemas or suppositories.
- Do not apply artificial fingernails, overlays or nail tips.
- Do not have manicures or pedicures.
- Gently file and care for cuticles.
- Do not share personal items, such as nail polish, nail file or makeup, with anyone.
- Only use electric razors to shave.
- Check your skin daily for irritation, cracks, or rashes.

## How can you make sure that your food and water are safe to eat and drink?

- Wash hands with soap and warm water before and after preparing food and before eating.
- Clean the areas where you prepare food. Use a separate cutting board for raw meat.
- Throw out all prepared foods that have been opened, used and left over after 72 hours in the refrigerator
- Refrigerate leftovers within 2 hours of cooking time in small shallow containers. Throw leftovers away that have been at room temperature more than 2 hours.
- Meat, fish and shellfish should be cooked well done.
- Eggs and foods containing eggs must be fully cooked.
- Always check the "sell by" and "use by" dates. Do not buy or use products that are out of date.
- Avoid salad bars and buffets.
- Raw fruits and vegetables should be washed and or peeled.
- Use only pasteurized dairy, eggs, juice, honey and beer products.
- Never eat anything that has mold on it.

## How can you prevent colds and flu?

- Wash your hands or use hand sanitizer often. Try to keep your hands away from your mouth, nose, and face. Make sure you wash your hands before eating.
- Avoid public places such as shopping malls, especially when crowded.
- Limit visits with young children as they are frequently having colds or flu. Tell friends and family who are sick not to visit.
- Avoid contact with anyone who has a cold, flu, or another contagious condition (such as measles, chickenpox, herpes, pinkeye, cough, or sore throat).
- Check with your doctor about whether or not you should wear a mask when you are around people.
- Check with your doctor about recommended immunizations or vaccines.

## **What are the other ways to lower your risk of infection?**

- Wear mask when you go to and come from the hospital, when you are in the hospital and in public crowded areas.
- Check with your doctor before having close contact with others.
- Ask your doctor before using certain items like cosmetics and contact lenses.
- Don't smoke or use tobacco products.
- Don't use portable humidifiers or vaporizers.
- Avoid contact with animals.
  - If you do touch an animal, wash your hands immediately afterward.
  - Avoid contact with pet urine or feces.
  - Don't clean their waste boxes, cages, or aquariums.
- Always wear shoes to avoid injuring your feet or coming in contact with germs.
- Keep your home always clean by cleaning floors, carpets, furniture, and countertops regularly. Ensure cleanliness of the kitchen and bathroom.

## **Can you travel?**

- Check with your doctor about traveling abroad or using public transportation.

## **What conditions should you call your doctor about?**

- Fever, chills or shaking.
- Soreness, swelling, redness or pus from a wound, central line or other IV
- New cough
- Sinus pain or drainage
- White patches in the mouth
- Frequency, urgency or burning when urinating
- Sore throat
- New hard lumps

# **Instructions for dialysis patients and their families**

## **How to care for your vascular access site for hemodialysis?**

- The skin around the vascular access area should be kept clean and dry. Once dialysis started, the fistula or graft must be cleansed with soap and water prior to each dialysis treatment.
- Patients should be encouraged to check the access daily, especially feeling for presence of a “thrill.”
- Tight clothes or jewelry should not be worn in the access arm.
- Sleeping on the access arm should be avoided.
- Lifting heavy objects or putting pressure on the access arm should be avoided.
- Extra care must be taken by the patient in order not to bump or cut the fistula or graft.
- Avoid accidental traction or trauma to the catheter and exit site during daily activities.

## **How to care for your peritoneal dialysis (PD) at home?**

- The patient’s and/or carer’s hands must be washed and dried (with a clean towel) before initiating the exchange.
- The location for exchanges must be clean.
- Personal hygiene products including towels, soap and dressing materials, should not be shared between patients and household contacts/family members.
- Tub baths are not recommended for patients with PD catheters.
- Refilling /transferring liquid soap between containers should be avoided.
- Bar soap should not be used.
- Proper exit site dressing must be carried out immediately after the showering.
- Application of safety pins or brooches near a peritoneal dialysis catheter should be avoided as this may lead to accidental puncture of the catheter.

# **Needle stick and Sharps Injuries**

## **What do you know about Needle stick and Sharps Injuries?**

Needle stick and other sharps injuries are serious hazards. Contact with contaminated needles, and other sharps may expose you to blood that contains pathogens (hepatitis B & C or HIV) which pose a serious risk.

## **What are the situations that increase the risk for needle stick or sharps injuries?**

- Handling needles that must be taken apart or manipulated after use.
- Disposing needles attached to tubing.
- Recapping a needle and use needles or glass equipment to transfer body fluid between containers.
- Failing to dispose of used needles in puncture-resistant sharps containers.
- Exposing to a needle/ sharp while other person is holding it.

## **How to Prevent Needle stick and Sharps Injuries?**

- Avoid using needles whenever safe and effective alternatives are available.
- Avoid recapping or bending needles that might be contaminated.
- Bring standard-labeled, leak-proof, puncture-resistant sharps containers to patient homes.
- Promptly dispose of used needle devices and sharps, which might be contaminated, in the containers.
- Plan for the safe handling and disposal of needles before use.
- Store sharps containers out of the reach of children, pets, and others not needing access.
- Secure used sharps containers during transport to prevent spilling.
- Follow standard precautions, infection prevention, and general hygiene practices consistently.
- Use devices with safety features if possible.
- Report any needle stick and other sharps injury immediately to your area clinic.

## **What to do if you experience a needle stick or sharps injury?**

- Wash needle stick site and cuts with soap and water.
- Flush splashes to the nose, mouth, or skin with water.
- Irrigate eyes with clean water, saline, or sterile irrigants.
- Report the incident to area clinic
- Immediately seek medical treatment.

# Household Medical Waste

It is the waste resulting from health care home treatment and home remedies

## What are the types of household medical waste?

- **Infectious waste:** the wastes that contain the secretions of the body of the patient which carry microbes leading to the spread of infection such as cotton, gauze and contaminated dressings - diapers - blister cover wounds – gloves.
- **Sharp waste:** Such as syringes and insulin syringes - scalpels - injection heads for sugar meters - razors and broken glass contaminated with secretions or blood of the patient.
- **Pharmaceutical waste:** Such as remnants, damaged or expired medicines whether they are syrups, pills, capsules, eye, nose, ear drops, creams or ointments.
- **Chemical waste:** Such as household cleaning and disinfection chemicals (e.g. dettol and chlorine) and materials used for wound dressing (e.g. alcohol and iodine dye).
- **Waste containing hazardous heavy metals:** Such as x ray films and mercury leaking from broken pressure devices and thermometers.
- **Pressurized gas containers waste:** Such as sprays and aerosols cans used in treatment.

## What are the risks arising from household medical waste?

- Pollution of air and drinking water and the spread of infectious microbes through it.
- Exposure to blood-contaminated wastes and body secretions can lead to hepatitis B & C –AIDS.
- Inhalation of waste contaminated with respiratory secretions of patients can lead to pulmonary tuberculosis - influenza - chickenpox – meningitis.
- Touching waste contaminated with patient secretions can lead to hepatitis A -typhoid - eye infections - infection of highly resistant microbes such as MRSA- chickenpox - Skin and respiratory diseases as influenza and SARS
- Exposure to expired drugs can lead to toxic effects.
- Exposure to expired antibiotic drugs can lead to killing beneficial bacteria and emergence of microbial strains resistant to antimicrobial therapy.
- Exposure to chemotherapy drugs can lead to killing and poisoning of cells of the body , health problems and congenital defects.

## Who are at high risk from household medical waste

Family members especially children , Domestic workers , Medical and nursing staff who provide care to patients at home , Domestic garbage collection workers , Wastewater treatment workers , Homeless domestic waste scavengers and Domestic and stray animals.

## What are the methods of handling and safe disposal of household medical waste?

- **Household infectious waste:** Place in sealed plastic bags and send to the nearest health center to be placed in yellow-colored containers for contaminated waste to be sent for incineration.
- **sharp waste:** place in thick plastic containers such as empty detergent cans, seal and send to the nearest health center to be placed in yellow-colored containers for contaminated waste to be sent for incineration.
- **Pharmaceutical, chemical waste:** Collect in a thick, sealed plastic bag or container separated from any other waste and send to the nearest pharmacy of health center.
- **Waste containing hazardous heavy metals:** Collect in a sealed box and put a sticker on its type and send it to the nearest health center to deal with it specifically in a safe manner.
- **Pressurized gas containers waste:** empty the contents completely then dispose with household rubbish.

# Isolation Precautions

- In the hospital, isolation precautions are used to help stop the spread of germs from one person to another aiming at protection of patients, visitors, and healthcare workers from getting infections.
- If you, your family member or your friend has been placed on isolation precautions, you will find a sign at the door of hospital room to remind visitors and healthcare workers about the required isolation precautions.
- Consult the nurse before entering the room to know the precautions you should follow. It is important to understand that visitors will be limited.
- Visitors should not eat or drink in isolation rooms and should always clean their hands before entering the room and upon exiting it. They should ask the in charge nurse before taking anything into or out of the room.

**You or your family member may be placed on the following transmission based isolation precautions:**

## 1. Contact isolation precautions

Used for infections, diseases, or germs that spread by touching the patient or items in the room. Examples: Methicillin resistant Staphylococcus aureus (MRSA) and other multidrug resistant organisms (MDROs).

**Healthcare workers, family members and visitors will:**

- Clean hands (hand washing or use alcohol based hand rub) when they enter and leave the room.
- Wear a gown and gloves before entering the patient's room.
- Remove the gown and gloves before leaving the room (at the doorway) and clean hands.

**Patient will:**

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

## 2. Droplet isolation precautions

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

**Healthcare workers, family members, and visitors will:**

- Clean hands (hand washing or use alcohol based hand rub) when they enter and leave the room.
- Wear a surgical mask before entering the room.
- Discard mask before leaving the room (at the doorway) and clean hands.

**Patient will:**

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

## 3. Airborne Isolation precautions

Used for diseases caused by very small germs that are spread through the air from one person to another (example: tuberculosis, measles, chickenpox).

**Healthcare workers, family members, and visitors will:**

- Clean hands (hand washing or use alcohol based hand rub) when they enter and leave the room .
- Wear a particulate respirator before entering the room.
- Discard the respirator after leaving the room and closing the door then clean hands.

**Patient will:**

- Be placed in a room with special airflow. The door must stay closed at all times.
- Stay in the room except for medically necessary procedures or therapy.
- Wear a surgical mask (if tolerable) when leaving the room.



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**CONTACT ISOLATION  
PRECAUTIONS SIGN**

**Contact Precautions**



**Clean Hands**



**Wear gloves**



**Wear gown**



**DROPLET ISOLATION  
PRECAUTIONS SIGN**

**Droplet Precautions**



**Wear surgical mask**



**Clean Hands**



**AIRBORNE ISOLATION  
PRECAUTIONS SIGN**

**Airborne Precautions**



**Clean Hands**



**Wear Particulate  
Respirator**



**Close Door**

## Putting on personal protective equipment (PPE)

### 1. Wash Hands

- Perform proper Hand Hygiene.



### 2. GOWN

- Fully cover torso from neck to knees, arms to end of wrist, and wrap around the back.
- Fasten in back at neck and waist.



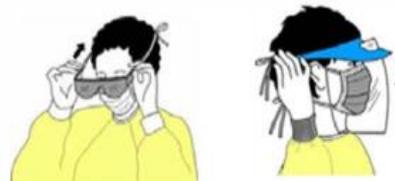
### 3. MASK OR RESPIRATOR

- Secure ties or elastic band at middle of head and neck.
- Fit flexible band to nasal bridge.
- Fit snug to face and below chin.
- Fit-check respirator.



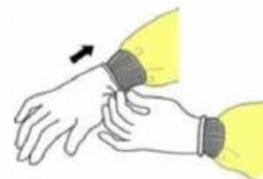
### 4. GOGGLES/FACE SHIELD

- Put on the face and eyes and adjust to fit.



### 5. GLOVES

- Use non-sterile for isolation.
- Select according to hand size.
- Extend to cover wrist of isolation gown.



### SAFE WORK PRACTICES

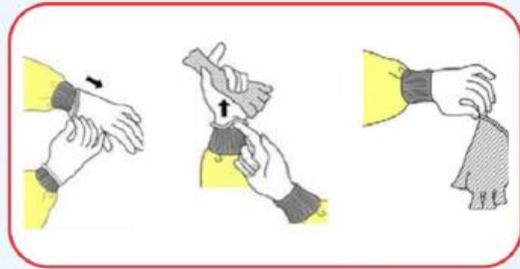
- Keep hands away from face.
- Limit surfaces touched.
- Work from clean to dirty.
- Change when torn or heavily contaminated.

## REMOVING PPE

1. PPE should be removed in an order that minimizes the potential for cross-contamination.
2. Except for respirator, remove PPE at doorway or in anteroom.
3. Remove respirator after leaving patient room and closing door.

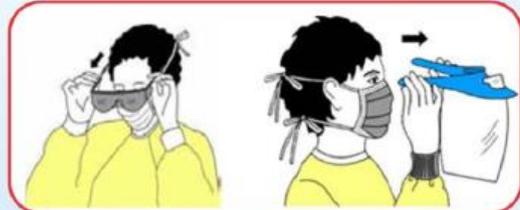
### 1- GLOVES

- Outside of gloves are contaminated.
- Grasp outside of glove with opposite gloved hand; peel off.
- Hold removed glove in gloved hand.
- Slide fingers of ungloved hand under remaining glove at wrist.
- Peel glove off over first glove
- Discard gloves in waste container.



### 2- GOGGLES/FACE SHIELD

- Outside of goggles or face shield are contaminated!
- To remove, handle by "clean" head band or ear pieces
- Place in designated receptacle for reprocessing or in waste container.



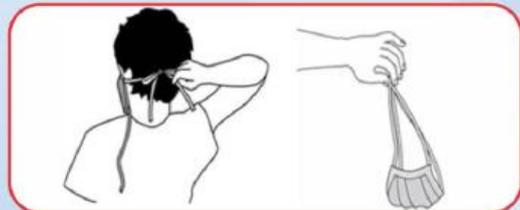
### GOWN

- Gown front and sleeves are contaminated!
- Unfasten neck, then waist ties.
- Remove gown using a peeling motion; pull gown from each shoulder toward the same hand.
- Gown will turn inside out.
- Hold removed gown away from body, roll into a bundle and discard into waste or linen receptacle.



### MASK OR RESPIRATOR

- Front of mask/respirator is contaminated – DO NOT TOUCH!
- Grasp ONLY bottom then top ties/elastics and remove.
- Discard in waste container.



### HAND HYGIENE

- Perform hand hygiene immediately after removing all PPE!





Ministry of Health  
Directorate of Infection Control

## **Dear visitor.... Dear client:**

**For your safety and the safety of others, please follow the following instructions before you visit a patient in an airborne isolation room:**

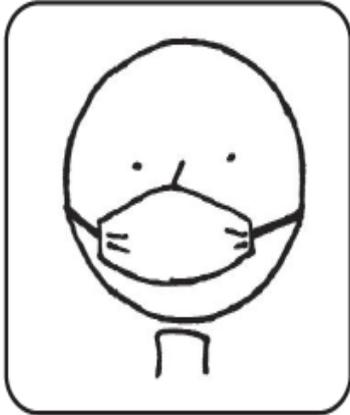
- 1- Do not visit patients if you have symptoms such as high temperature or cough or severe fatigue, diarrhea and vomiting.
- 2- Maintain the number of visitors to a minimum during the patient stay in the isolation room.
- 3- Go first and directly to the nurse in charge of the patient to take instructions and get trained on wearing the personal protective equipment.
- 4- Make sure not to bring children, pregnant women, the elderly, or those with weak immune system and chronic lung or heart disease.
- 5- Record your name and the required information fully in the register book.
- 6- Clean your hands using an alcohol-based hand sanitizer and wear protective equipment, a respirator (N95) and a medical glove.
- 7- Do not touch your eyes, nose, mouth or surfaces and do not use the patient's personal stuff or the patient's bathroom during your visit to the patient in isolation.
- 8- Stand at a distance from the patient at least one meter to avoid any transmission of droplets to you.
- 9- Do not bring or eat or drink in the patient's room. It is not allowed for any person to stay as a company to the patient in the isolation room.
- 10- Before leaving the patient's room, get rid of the glove and then gown in the waste container placed for this purpose then sanitize your hands, then go outside the room while wearing the respirator and remember to close the door of the isolation room.
- 11- Dispose the respirator outside the patient's room by holding the rubber bands from the back and then sanitize your hands again by alcohol-based hand rub.
- 12- Do not visit other patients at the hospital after visiting a patient in the isolation room.

**With our best wishes for a speedy recovery**

# Respiratory Cough Etiquette

## When you are at a clinic or hospital:

- Cover your cough or sneeze with a tissue and dispose of the used tissue in the waste basket.
- Clean your hands with soap and water or an alcohol-based hand cleaner.



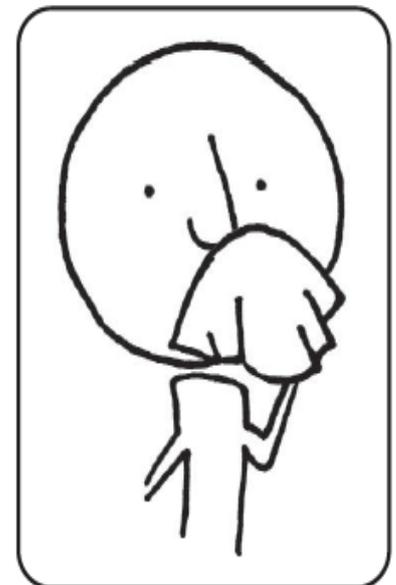
- You may also be asked to wear a mask to protect others.
- Don't worry if you see staff and other people wearing masks. They are preventing the spread of germs.



Stop the spread of germs that make you and others sick!

Clean  
your  
Hands  
after coughing or sneezing.

Cover  
your  
Cough



For more information please contact the following address  
Directorate of Infection Control - Al-Sabah Health Region  
P.O.Box 12414 Alshamiya - Tel: 24917392 - 24917391  
[www.icdkwt.com](http://www.icdkwt.com)

إدارة منع العدوى والتعقيم  
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