

# Infection Control Plan for Shoal Creek Animal Clinic, 2009

## National Association of Public Health Veterinarians (NASPHV) Veterinary Infection Control Committee (VICC)

Clinic: Shoal Creek Animal Clinic, P.C.

Date of Plan Adoption: 01/01/2009

Date of Next Review: 12/01/09

Infection Control Officer: Christopher M. Elder, DVM

This plan will be followed as part of our clinic's routine practices. The plan will be reviewed at least annually and as part of new employee training.

### PERSONAL PROTECTIVE ACTIONS AND EQUIPMENT

**Hand Hygiene:** Wash hands before and after each patient encounter and after contact with blood, body fluids, secretions, excretions or articles contaminated by these fluids. Wash hands prior to handling any clean equipment or supplies following contact with contaminants or patients. Wash hands before eating, drinking or smoking; after using the toilet; after cleaning animal cages or animal care areas; and whenever hands are visibly soiled. Alcohol-based gels may be used if hands are not visibly soiled, but hand washing with soap and running water is preferred. Keep fingernails short. Keep hand washing supplies stocked at all times. Staff responsible: Marsha Mitchell.

#### Correct hand washing procedure:

- Thoroughly wet hands and rinse with running water
- Place soap in palms
- Rub hands together to make a lather
- Scrub hands vigorously for 20 seconds
- Dry hands with a disposable towel
- Turn off faucet handle using the disposable towel

**Use of Gloves and Sleeves:** Wear gloves when touching blood, body fluids, secretions, and excretions. Wear gloves for dentistry, resuscitations, necropsies, and obstetrical procedures; when cleaning contaminated environmental surfaces and equipment; when handling laundry soiled by urine, feces, blood, secretions or excretions; when handling diagnostic specimens that may contact skin; and when handling an animal with a suspected infectious disease. When gloves are

used they should be changed between examination of individual animals or animal groups (e.g., a litter of puppies) and between dirty and clean procedures on the same patient. Gloves should be removed promptly and disposed of after use. Disposable gloves should not be washed and reused. Hands should be washed immediately after glove removal.

Note: Gloves are not necessary when examining or handling normal, healthy animals.

**Facial Protection:** Wear facial protection whenever exposure to splashes or sprays is likely to occur. Facial protection should include a mask worn with either glasses, goggles or a face shield. Wear facial protection for the following procedures: dentistry, resuscitation, nebulization, suctioning, bronchoscopy, wound irrigation, obstetrical procedures, and necropsies. Use a surgical mask when cleaning with high-pressure sprayers.

**Protective Outerwear:** Wear a protective outer garment such as a lab coat, smock, non-sterile gown, or coveralls when attending animals and when conducting cleaning chores. These should be changed whenever soiled, after handling an animal with a known or suspected infectious disease, after working in the isolation room, and after performing a necropsy or other high-risk procedure. In addition, lab coats or smocks should be laundered at the end of each day and a clean lab coat or smock used the following day. Shoes or boots should have thick soles and closed toes, and be water resistant and easily cleanable. Disposable shoe covers should be worn when heavy quantities of infectious materials are present or expected. Impermeable outwear should be worn during obstetrical procedures and necropsies and whenever substantial splashes or large quantities of body fluids may be encountered. Keep clean outer garments available at all times. Staff responsible: all veterinary assistants are responsible for proper maintenance of their outerwear.

**Bite and Other Animal-Related Injury Prevention:** Take precautions to prevent bites and other injuries. Use physical restraints, muzzles, bite-resistant gloves, and sedation or anesthesia as needed. Do not rely on owners or untrained staff for animal restraint. Notify the veterinarian on duty if there is concern for personal safety. When bites or scratches occur, wash the site with soap and water immediately. Report all bites and other injuries to the veterinarian on duty. Consult a physician whenever the skin is broken. An evaluation of the need for medical attention, tetanus immunization, antibiotics, and rabies post-exposure prophylaxis will be made by a physician.

## **PROTECTIVE ACTIONS DURING VETERINARY PROCEDURES**

**Intake:** Use proper caution when bringing potentially infectious animals in through the reception area.

**Examination of Animals:** Wear appropriate protective outwear and wash hands before and after examination of individual animals or animal groups (e.g., a litter of puppies). Potentially

infectious animals will be examined in a dedicated exam room and remain there until diagnostic procedures and treatments have been performed.

**Injections, Venipuncture, and Aspirations:** Wear gloves while performing venipuncture on animals suspected of having a zoonotic disease. Currently, there is no data indicating that venipuncture on healthy animals carries a significant risk of infection.

**Needlestick Injury Prevention:** Do not recap needles except in rare instances when required as part of a medical procedure or protocol. Dispose of all sharps in designated puncture-proof sharps containers. Dispose of the used syringe with attached needle in the sharps container when injecting live vaccines or aspirating body fluids from animals suspected of having a zoonotic disease. For most other veterinary procedures, use the needle removal device on the sharps container and dispose of the syringe in the regular trash. Sharps containers are located in every area of the clinic where sharps are used. Do not transfer sharps from one container to another.

**Dental Procedures:** Wear protective outerwear, gloves, mask, and a face shield or goggles when performing dental procedures or working nearby (such as when monitoring anesthesia).

**Resuscitation:** Wear gloves, mask, and a face shield or goggles.

**Obstetrics:** Wear gloves and/or shoulder-length sleeves, mask or respirator, face shield or goggles, and impermeable outerwear.

**Necropsy:** Wear cut-resistant gloves, mask, face shield or goggles, and impermeable outerwear. Only necessary personnel are allowed in the vicinity of the procedure. If an animal is suspected of having a notifiable infectious or a foreign animal disease, consult with the State Veterinarian before proceeding with a necropsy. Contact information for State Veterinarian's office: (404) 656-3671.

**Diagnostic Specimen Handling (Urine, Feces, Blood, Secretions or Excretions):** Wear protective outerwear and gloves when appropriate. Discard gloves and wash hands before touching clean items (e.g., microscope, telephone). Eating and drinking are not allowed in the laboratory.

## **ENVIRONMENTAL INFECTION CONTROL**

**Isolation of Infectious Animals:** Animals with a contagious or zoonotic disease will be housed in isolation as soon as possible. Clearly mark the room or cage to indicate the patient's status and describe additional precautions. Only equipment needed for the care and treatment of the patient should be kept in the isolation room, and there should also be dedicated cleaning supplies.

Disassemble and thoroughly clean and disinfect any equipment that must be taken out of the room. Discard gloves after use. Leave other personal protective equipment (e.g., gown, mask) in the isolation room for reuse. Clean and disinfect protective equipment between patients and whenever contaminated by body fluids. Bag potentially contaminated materials before removal from the isolation room. Use disinfectant footbath before entering and leaving the room. Access to the isolation room is limited. Keep a sign-in log of all people (including owners or other non-employees) having contact with a patient in isolation. Monitor air pressure daily while the room is in use.

Staff responsible: Marsha Mitchell

**Cleaning and Disinfection of Equipment and Environmental Surfaces:** Clean surfaces and equipment first to remove organic matter, and then use an EPA-registered hospital disinfectant, applied according to manufacturer's instructions. Minimize dust and aerosols when cleaning. Clean and disinfect animal cages, toys, and food and water bowls between animals and whenever visibly soiled. Clean litter boxes once a day. Wear gloves when cleaning, and wash hands afterwards. There is a written checklist for each area of the facility (e.g., waiting room, exam rooms, treatment area, kennels) specifying the frequency of cleaning and staff responsible.

**Handling Laundry:** Wear gloves when handling laundry soiled by urine, feces, blood, secretions or excretions. Wash animal bedding and other laundry with standard laundry detergent and appropriate amount of bleach and machine dry. Use separate storage and transport bins for clean and dirty laundry.

**Decontamination and Spill Response:** Immediately spray a spill or splash of blood or body fluids with disinfectant and contain it with absorbent material (e.g., paper towels, sawdust, cat litter). Pick up the material then place in leak-proof plastic bags (lined garbage cans). Clean the area, and disinfect according to manufacturer's instructions. Keep clients, patients and employees away from the spill area until disinfection is completed.

**Environmental Controls:** There are designated areas for eating, drinking, smoking, applying make-up and similar activities. These activities should never be done in animal care areas or in the laboratory area. Human food or drink should not be kept in the same refrigerator as animal food, biologics, or laboratory specimens. Dishes for human use should be cleaned and stored away from animal care and animal food preparation areas.

## **EMPLOYEE HEALTH**

The following personnel are responsible for developing and maintaining the practice's infection control policies, keeping records, and managing workplace exposure and injury incidents.

Staff Responsible: Marsha Mitchell

## **Employee Immunization Policies and Record Keeping:**

**Record Keeping:** Current emergency contact information will be maintained for each employee. Records will be maintained on exposure and injury incidents. Report and record changes in health status (e.g. pregnancy, immunocompromise) that may affect work duties.

**Rabies Preexposure Vaccination:** Although not required, all staff with animal contact are encouraged to be vaccinated against rabies, followed by periodic titer checks and rabies boosters as needed. This is a recommendation of the Advisory Committee on Immunization Practices (CDC, 1999).

**Tetanus Vaccination:** Tetanus immunizations must be up to date. Report and record puncture wounds and other possible exposures to tetanus. Consult a health care provider regarding the need for a tetanus booster.

**Seasonal Influenza Vaccination:** Unless contraindicated, veterinary personnel are encouraged to receive the current seasonal influenza vaccine. *Check with CDC for updated recommendations at [www.cdc.gov](http://www.cdc.gov).*

**Staff Training and Education:** Infection control training and education will be documented on the staff training checklist.

**Documenting and Reporting Exposure Incidents:** Report incidents that result in injury or potential exposure to an infectious agent to Marsha Mitchell or the veterinarian on duty. The following information will be collected for each exposure incident: date, time, location, person(s) injured or exposed, other persons present, description of the incident, the status of any animals involved (e.g., vaccination history, clinical condition, diagnostic information), and plans for follow-up. If consultation with a health care provider is necessary, be sure to inform them of the exposure to the animal(s).

**Pregnant and Immunocompromised Personnel:** Pregnant and immunocompromised employees are at increased risk from zoonotic diseases. Inform Marsha Mitchell if you are concerned about your work responsibilities, so that accommodations may be made. Consultation between the supervising veterinarian and a health care provider may be needed.