# **Infection Prevention Office Hours** 5/12/2023





## AGENDA

- Overview of Medication/Injection Safety
- "One and Only" Campaign
- DOs and DON'Ts of Safe Injection Practice
- Medication Storage and Handling
- Glucometers
- Staff Safety

## MEDICATION/INJECTION SAFETY- AN OVERVIEW

#### • What is it?

- Proper use and handling of supplies for administering injections or infusions
- Proper handling of medications

#### • Why is it important?

- To prevent transmission of infectious diseases from one resident to another or to the clinical staff
- Reuse of needles/syringes, IV bags for flushes, unclean equipment, and shared medications have resulted in serious outbreaks
- The safety of your residents is paramount



### "ONE AND ONLY" CAMPAIGN



 CDC's campaign launched in 2019 to bring awareness to unsafe injection practices that resulted from improper use of single and multi-dose vials

https://www.cdc.gov/injectionsafety/one-and-only.html

### SAFE INJECTION PRACTICES- THE "DOS"

- Use aseptic technique when preparing and administering medications
- Use a new needle and syringe for every injection
- Clean the diaphragm with alcohol before accessing (even if it's a new vial)
- Single use vials are preferable but multi-dose vials may also used
  - Dedicate multi-dose vials to one resident (whenever possible)
  - Do not leave a needle in a multi-dose vial to draw up additional medication for the resident OR for another resident (even if you change syringes)
  - Date multi-use vials
    - What is the recommended discard date?
    - Clearly label the vial with the open and discard date
  - Discard any time there is a question/risk of contamination (when in doubt, throw it out)
- Dispose of sharps in a sharp-proof container as close to resident as possible



### SAFE INJECTION PRACTICES- THE "DON'TS"

- Do not use IV solution bags and administration sets for more than one resident
- Never re-use syringes for multiple residents, even if the needle was changed
- Do not use single-dose or single-use medications for more than one resident (and do not combine leftover contents for later)
- Do not use saline IV bags to "pull" flushes. Preferably, use commercially manufactured or pre-filled syringes prepared by pharmacy
- Do not prepare or store multi-dose medications in a resident's room; prepare in a clean medication preparation area



#### MEDICATION STORAGE AND HANDLING

- Store all medications in accordance with manufacturer's instructions (e.g., shelf-life, temperature)
- Have a process to check expiration dates both before and after opening a vial
- Store medications that require refrigeration in a dedicated, labeled refrigerator that meets requirements for such storage (e.g., thermostat control, separate exterior door for refrigerator and freezer compartments)
- Medications should not be stored on the door of the refrigerator as temperatures fluctuate on opening and closing the refrigerator
- Designate personnel to maintain the temperature log
- Have a plan in the event of a power outage and know your facility policy if pertinent temperatures are out of range (e.g. a medication refrigerator)

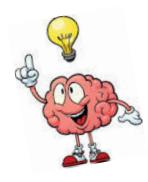
#### GLUCOMETERS

- Multiple outbreaks have been linked to contaminated lancet devices
- Lancet pens, as well as insulin pens, should be single-use only
- Always wear gloves to perform testing and clean your hands after
- Always clean the device per manufacturer's directions, after every use
- Consider IPC audits for cleanliness of high risk equipment, such as glucometers



#### STAFF SAFETY

- OSHA standards (bloodborne pathogen and PPE) require employers to protect workers from occupational exposure to infectious agents.
- Staff should utilize PPE when appropriate per standard precautions
  - Per CDC: "Adhere to federal and state requirements for protection of healthcare personnel from exposure to bloodborne pathogens"
    - Gloves- when anticipating contact with blood or other possible infectious material/secretions
    - Gown- when anticipating skin and clothing contact with blood or other possible infectious material/secretions
    - Surgical Mask- for lumbar punctures
    - Eye protection- when anticipating splashes or sprays of blood or other possible infectious material/secretions
- One of the best resources for staff safety = knowledge (Educate! Evaluate! Reeducate!)



# Let's Discuss!

Remember - The Best Learning We Do is from Each Other!

- What are your Facility Practices/Protocols?
- What are your Successes?
- What are your Challenges?



• Do you have any Questions or Topic Suggestions?

#### **References and Helpful Resources**

#### • CDC One and Only Campaign

Protect Patients Against Preventable Harm from Improper Use of Single–Dose/Single–Use Vials | Injection Safety | CDC

- Infection Prevention during Blood Glucose Monitoring and Insulin Administration <a href="http://www.cdc.gov/injectionsafety/blood-glucose-monitoring.htm">http://www.cdc.gov/injectionsafety/blood-glucose-monitoring.htm</a>
- CDC Safe Injection Practices to Prevent Transmission of Infections to Patients <u>https://www.cdc.gov/injectionsafety/ip07\_standardprecaution.html#anchor\_1556196842</u>
- OSHA <a href="https://www.osha.gov/bloodborne-pathogens/worker-protections">https://www.osha.gov/bloodborne-pathogens/worker-protections</a>