

## Infection Control Program

### Surveillance

- 1- The organization maintains a list of Infectious diseases, which are reportable at the national level.
- 2- Notification of these diseases is performed either by the individual's physician or laboratory performing diagnostic study or both.
- 3- The organization maintains a record of this in the employee's health record. The following diseases need to be reported by the employee to the Human Resources Manager.

- |                   |            |                 |
|-------------------|------------|-----------------|
| * Diphtheria      | * Mumps    | * Influenza     |
| * Encephalitis    | * Pertusis | * Hep A.B.C     |
| * Measles         | * Rubella  | * Streptococcus |
| * Strep Pneumonia |            |                 |

### Identification

Patterns or trends are identified by the President. To establish a course of action, the Quality Improvement team is utilized to apply problem-solving techniques and establish corrective action.

4- Patient Reporting: Patient information regarding infections may be given at the time of referral or directly from the caregiver. Due to Patient Confidentiality the staff cannot directly inquire if the patient is being treated for an active infection. If the diagnosis identifies HIV, AIDS, Hepatitis or TB, the information is relayed to the Director of Patient Services. Patient infection information will be recorded in the Patient file and shared with appropriate staff on a need to know basis.

List of Infectious Diseases notifiable at the National level

**Refer to attached listed CDC Nationally notifiable diseases**

## **Infection Control Program**

### Control

- \* Staff exposure to blood-borne pathogen is covered in the Work Exposure Plan
- \* If a staff member is diagnosed with one of the diseases listed, the staff member will be unable to perform patient contact functions until cleared by a physician.
- \* Staff member performing other functions in the company and diagnosed with the listed diseases will still need a Physician's clearance to resume job duties.

### **Respiratory Protection Plan**

All employees at risk for exposure will be trained and information given on TB transmission, signs and symptoms, treatment and the organization's policy on the use of the particulate respirator mask.

1. Employee files will include information on TB skin testing and results and any history of possible exposure.
2. All personnel at risk will wear the appropriate mask when a patient is known to have or is suspected of having TB.
3. Known exposure to a patient with a diagnosis of Tuberculosis should be reported to the Human Resource manager.

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## 2020 National Notifiable Conditions

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Anthrax

Arboviral diseases, neuroinvasive and non-neuroinvasive

- California serogroup virus diseases

- Chikungunya virus disease

- Eastern equine encephalitis virus disease

- Powassan virus disease

- St. Louis encephalitis virus disease

- West Nile virus disease

- Western equine encephalitis virus disease

Babesiosis

Botulism

- Botulism, foodborne

- Botulism, infant

- Botulism, wound

- Botulism, other

Brucellosis

Campylobacteriosis

Cancer

*Candida auris*, clinical

Carbapenemase Producing Carbapenem-Resistant Enterobacteriaceae (CP-CRE)

- CP-CRE, *Enterobacter* spp.

- CP-CRE, *Escherichia coli* (*E. coli*)

- CP-CRE, *Klebsiella* spp.

Carbon monoxide poisoning

Chancroid

*Chlamydia trachomatis* infection

Cholera

Coccidioidomycosis

- Congenital syphilis

  - Syphilitic stillbirth

Cryptosporidiosis

Cyclosporiasis

Dengue virus infections

Dengue

Dengue-like illness

Severe dengue

Diphtheria

Ehrlichiosis and anaplasmosis

*Anaplasma phagocytophilum* infection

*Ehrlichia chaffeensis* infection

*Ehrlichia ewingii* infection

Undetermined human ehrlichiosis/anaplasmosis

Foodborne Disease Outbreak

Giardiasis

Gonorrhea

*Haemophilus influenzae*, invasive disease

Hansen's disease

Hantavirus infection, non-Hantavirus pulmonary syndrome

Hantavirus pulmonary syndrome

Hemolytic uremic syndrome, post-diarrheal

Hepatitis A, acute

Hepatitis B, acute

Hepatitis B, chronic

Hepatitis B, perinatal virus infection

Hepatitis C, acute

Hepatitis C, chronic

Hepatitis C, perinatal infection

HIV infection (AIDS has been reclassified as HIV Stage III)

Influenza-associated pediatric mortality

Invasive pneumococcal disease

Lead, elevated blood levels

Lead, elevated blood levels, children (< 16 Years)

Lead, elevated blood levels, adult (≥16 Years)

Legionellosis

Leptospirosis

Listeriosis

Lyme disease

Malaria

Measles

Meningococcal disease

Mumps

Novel influenza A virus infections

Pertussis

Pesticide-related illness and injury, acute

Plague

Poliomyelitis, paralytic

Poliovirus infection, nonparalytic

Psittacosis

Q fever

Q fever, acute

Q fever, chronic

Rabies, animal

Rabies, human

Rubella

Rubella, congenital syndrome

*Salmonella* Paratyphi infection (*Salmonella enterica* serotypes Paratyphi A, B [tartrate negative], and C [*S. Paratyphi*])

*Salmonella* Typhi infection (*Salmonella enterica* serotype Typhi)

Salmonellosis

Severe acute respiratory syndrome-associated coronavirus disease

Shiga toxin-producing *Escherichia coli*

Shigellosis

Silicosis

Smallpox

Spotted fever rickettsiosis

Streptococcal toxic shock syndrome

Syphilis

Syphilis, primary

Syphilis, secondary

Syphilis, early non-primary non-secondary

Syphilis, unknown duration or late

Tetanus

Toxic shock syndrome (other than streptococcal)

Trichinellosis

Tuberculosis

Tularemia

Vancomycin-intermediate *Staphylococcus aureus* and Vancomycin-resistant *Staphylococcus aureus*

Varicella

Varicella deaths

Vibriosis

## Viral hemorrhagic fever

- Crimean-Congo hemorrhagic fever virus
- Ebola virus
- Lassa virus
- Lujo virus
- Marburg virus
- New World arenavirus – Guanarito virus
- New World arenavirus – Junin virus
- New World arenavirus – Machupo virus
- New World arenavirus – Sabia virus

## Waterborne Disease Outbreak

## Yellow Fever

## Zika virus disease and Zika virus infection

- Zika virus disease, congenital
- Zika virus disease, non-congenital
- Zika virus infection, congenital
- Zika virus infection, non-congenital

## CURRENT AND HISTORICAL CONDITIONS

Indexed list of current and historical nationally notifiable conditions.

### Related Links

NNDSS Modernization Initiative (NMI) (<http://www.cdc.gov/nmi>)

NMI Technical Assistance and Training Resource Center (<https://www.cdc.gov/nmi/ta-trc/index.html>)

NMI eShare (<http://www.cdc.gov/nmi/eshare.html>)

CSTE Position Statements (<http://www.cste.org>)

PHIN Tools and Resources (<http://www.cdc.gov/phinf/>)

Morbidity and Mortality Weekly Report (MMWR) (<http://www.cdc.gov/mmwr/>)

WONDER (<http://wonder.cdc.gov/>)

Content source: Centers for Disease Control and Prevention (<http://www.cdc.gov/>)

Office of Public Health Scientific Services (OPHSS) (<http://www.cdc.gov/ophss/>)

Center for Surveillance, Epidemiology, and Laboratory Services (CELS) (<http://www.cdc.gov/ophss/csels/>)

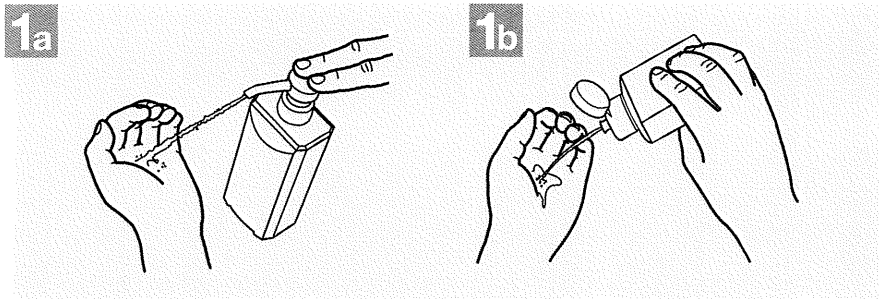
Division of Health Informatics and Surveillance (DHIS) (<http://www.cdc.gov/ophss/csels/dhis/>)

National Notifiable Diseases Surveillance System (NNDSS) (<http://www.cdc.gov/nndss/>)

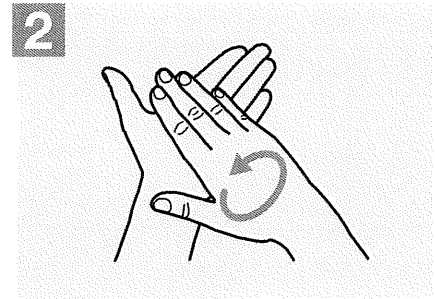
# How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

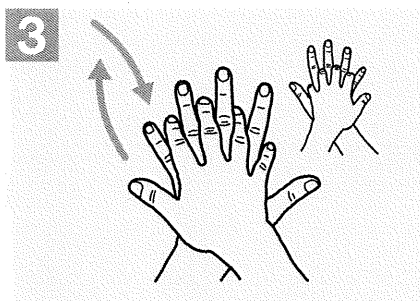
 Duration of the entire procedure: 20-30 seconds



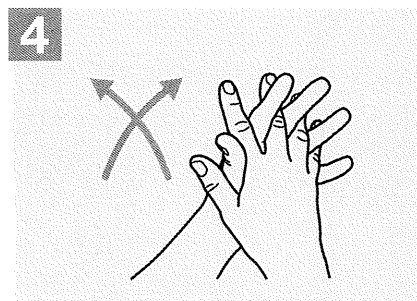
1a Apply a palmful of the product in a cupped hand, covering all surfaces;



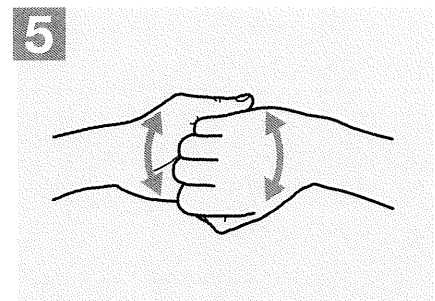
2 Rub hands palm to palm;



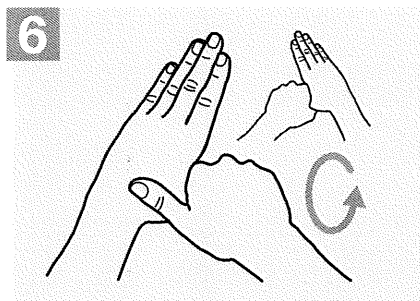
3 Right palm over left dorsum with interlaced fingers and vice versa;



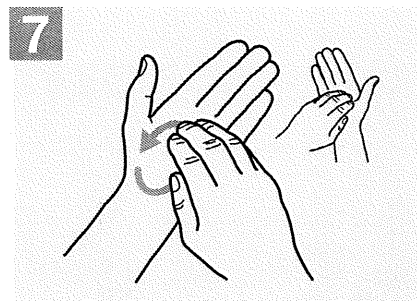
4 Palm to palm with fingers interlaced;



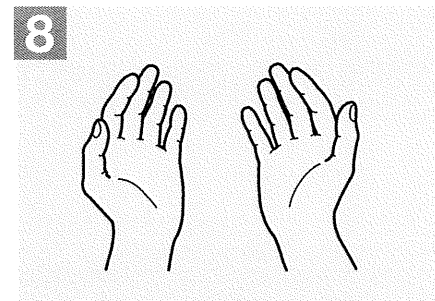
5 Backs of fingers to opposing palms with fingers interlocked;



6 Rotational rubbing of left thumb clasped in right palm and vice versa;



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



8 Once dry, your hands are safe.



World Health  
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Patient Safety

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SAVE LIVES  
Clean Your Hands

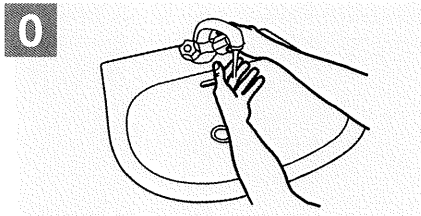
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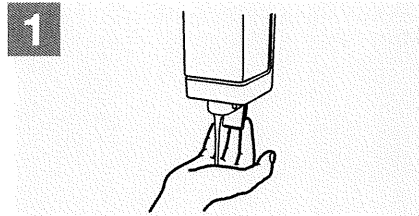
# How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

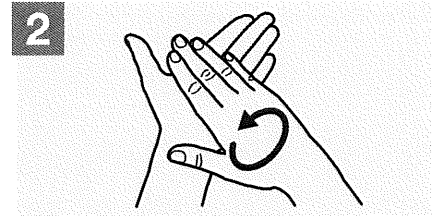
 Duration of the entire procedure: 40-60 seconds



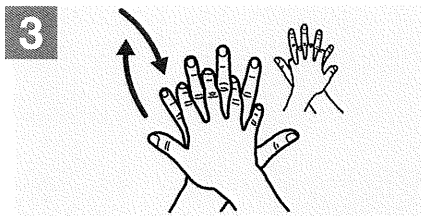
Wet hands with water;



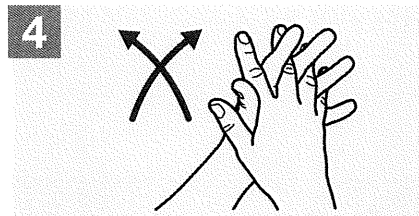
Apply enough soap to cover all hand surfaces;



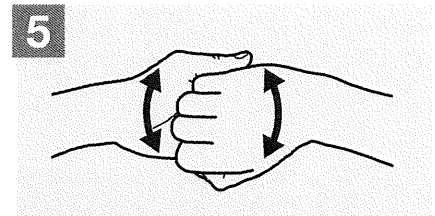
Rub hands palm to palm;



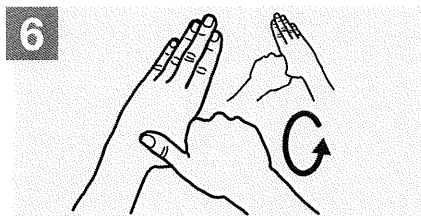
Right palm over left dorsum with interlaced fingers and vice versa;



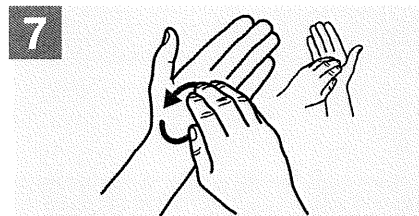
Palm to palm with fingers interlaced;



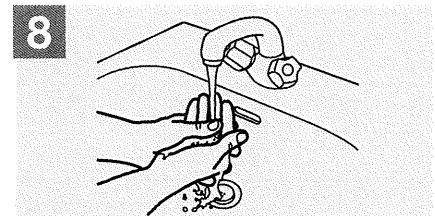
Backs of fingers to opposing palms with fingers interlocked;



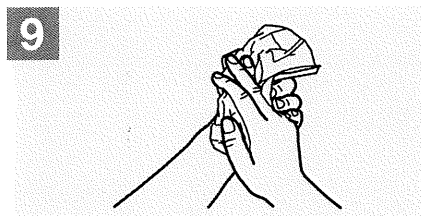
Rotational rubbing of left thumb clasped in right palm and vice versa;



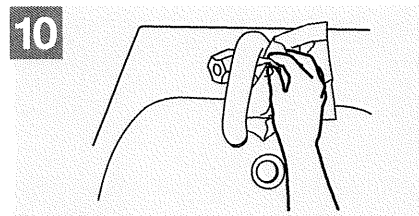
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



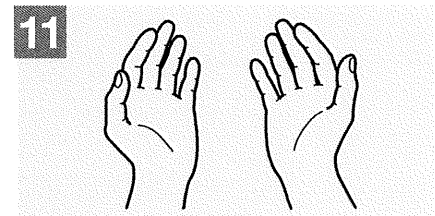
Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



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Patient Safety

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