

EAST CAROLINA UNIVERSITY
INFECTION CONTROL POLICY

Department of OB/GYN

Date Originated: January 27, 1993

Dates Reviewed: 1.27.93, 9.22.95
5.26.99, 5.22.02, 6.15.05, 010.8.08
03.15.2022

Date Approved: June 15, 2005

Date Revised: March 8, 2022

Page 1 of 16

Approved By:

Clinical Medical Director

Administrator Manager

Chairman, Infection Control Committee

Infection Control Nurse

I. Purpose: The Infection Control Policy is established to help safeguard patients and personnel from the transmission of infection between patient and personnel during patient care. All ECU personnel, students, and other healthcare workers are to comply with all Infection Control Policies.

II. Personnel:

A. All new and current employees will comply with employment screening as outlined in the Prospective Health Policy. All employee health records are maintained by Prospective Health.

B. Employees who have potential for blood or other potentially infectious material exposure will be offered hepatitis B vaccine at no charge to the employee. Medical students and employees who have potential for exposure to *Mycobacterium tuberculosis* (MTB) will be given PPD skin testing with follow-up per Prospective Health protocol.

Other health care students with clinical rotations through ECU Clinics, other non employee and healthcare workers, and any others who may have patient contact will have documentation of Infection Control training, required vaccines administered, and PPD skin testing results.

C. Any staff, (including physician) or student, who has an exposure to a communicable disease through a needle stick or other means will report that exposure to the appropriate supervisor or instructor and follow-up will be done per Bloodborne Pathogen Exposure Control Plan, Tuberculosis Exposure Control Plan or Prospective Health Policy depending on exposure.

Resident physicians (Interns, Residents or Fellows) who have an exposure to a communicable disease in ECU Clinics are to notify Prospective Health for testing of patient and follow-up with PCMH Occupational Health. Non ECU students will follow their institutional policy.

If any use of biologicals or radiation are done, staff and other workers will follow ECU policy with regard to training, monitoring, etc. Accidental exposures to chemicals and radiation are reported on an incident report form. The exposed person is evaluated according to ECU policy. Refer to the Radiation Safety Manual, the Biological Safety Manual, and the Chemical Hygiene Plan.

D. Employees receive education on infection control, standard precautions and OSHA standards upon employment and yearly thereafter.

E. This policy is evaluated every three (3) years and revised as needed due to change in practice or standards.

III. Physical Layout:

- A. Brody Module B - Obstetrics and Gynecology - This module for high risk obstetrical gynecologic patients is designed with a waiting and reception area, two (2) hallways for patient care. Each hallway has a bathroom, seven (7) exam rooms, two or three (2 or 3) offices, a nurse station and a patient check-in area. A resident workroom connects the two (2) hallways. There is also an instrument washer and work area for Module B, J and C.
- B. Brody Module J - Special Procedures/Ultrasound - This module for special procedures and ultrasound support services is designed with a waiting and reception area, seven (7) offices, a storage room, four (4) special procedure rooms, a front desk station for patient check-in, and bathroom.
- C. Brody Module C - Obstetrics and Gynecology - This module for obstetrical and gynecologic patients is designed with a waiting and reception area, two (2) hallways for patient care. One hallway has six (6) exam rooms, the other hallway has four (4) exam rooms. Each hallway has a bathroom and two or three (2 or 3) offices, a nurse station and a patient check-in area. There is a resident workroom and a conference room that are separate from each other. There is also an instrument washer and work area for Module B, J and C.
- D. Leo Jenkins Cancer Center - GYN Oncology - This module for the gynecologic oncology patient is designed with a waiting and reception area, one hallway for patient care, and one (1) conference room. The clinical space has one (1) bathroom, six (6) exam rooms, and one room for storage and instrument cleaning. This area also has one (1) office and one (1) staff lounge/conference room.
- E. ECU Womens Physicians – 2160 Herbert Court – Obstetrical and Gynecology and Reproductive Endocrinology and Infertility – This facility has one (1) large waiting/reception area, two (2) sub waiting rooms, eighteen (18) exam rooms, three (3) procedure rooms, three (3) counseling area, and twenty-five (25) staff/faculty offices. There is four (4) rooms for storage and one (1) housekeeping closet. A general lab, an Andrology lab, as well as an autoclave room with an instrument washer, are located in this facility. This facility also has one large conference room and a breakroom for staff. There is also a nurse station and a medication prep room.
- F. Isolation room locations: Brody Module B Room # 1B38

IV. Procedures

- A. Handwashing is done with antimicrobial soap and water immediately before and after each patient contact. Handwashing facilities are available in every exam room, procedure

room, and restroom area. If handwashing facilities are not immediately available, antiseptic towelettes or hand cleaners are provided.

- B. Aseptic technique is strictly observed when performing certain procedures such as, intravenous line insertion, dressings, injections, phlebotomy, and fingersticks, Strict aseptic technique is used for culturing of gametes and embryos. There is a clean air cabinet (hood) in the laboratory. All Petri dishes and tubes are sterile, single-use plastic, and disposable.
- C. Standard precautions are observed on all patients. Gloves are worn if hands may be exposed to blood and other potentially infectious materials. Protective mask and eyewear or face shield are worn if splashing is likely. Gowns or scrub attire are worn if more extensive splashing of uniform is possible.

Needles and sharps are handled according to the Needlestick Safety and Prevention Act. Needles are not to be bent or broken. Needles are not to be resheathed unless absolutely necessary. If needles must be resheathed it must be done using a mechanical device or a one-handed technique. Safety sharps will be used according to OSHA policy.

Health care workers who have exudative lesions or weeping dermatitis shall be prohibited, from handling patient care equipment, and devices used in performing invasive procedures and from all direct patient contact until evaluation by Prospective Health and clearance obtained. Open wounds or sores should be covered with a protective dressing. Refer to Work Restriction for Personnel policy.

Patients who are seen in the ECU Clinics are evaluated for signs and symptoms of Mycobacterium Tuberculosis (MTB) or any infectious or potentially infectious respiratory illness. Only Module B is equipped with a negative pressure, airborne infection room (AII), therefore patients seen in Module J, GYN Oncology, or ECU Womens Physicians, with infectious or potentially infectious respiratory illness, will be instructed to put on a mask and be placed in an exam room immediately. Physicians and clinical staff who have been successfully fit tested will assess the patient. If the patient being seen at the Brody Module B, C or J is suspected to have active TB or suspected to have any other communicable, illness which will require extensive care, they will be transported, wearing a mask to Module B, which is equipped with an AII room, or to other appropriate facilities (i.e. VMC), as deemed necessary. The receiving facility will be notified by phone of patient requiring airborne precautions.

In Module B, respiratory isolation procedures will be initiated for patients who exhibit symptoms consistent with a potential transmissible respiratory pathogen. These procedures include masking the patient and placing in the negative pressure airborne infection isolation (AII) room. All staff having patient contact will have appropriate respiratory protective equipment available. Appropriate respirator (N-95) protection is available for those having been fit tested and helmet respirators (PAPRA) for those unable to be fit tested (ie sizing, facial hair, etc). Each staff member is supplied with a proper size mask with additional masks stocked for replacement. Helmet respirators are kept in Brody Mod C and the Medical storeroom.

A patient mask will be available in all clinic areas and reception area for those patients identified to have known or suspected diagnosis of MTB or other respiratory illness. Patients will be asked to wear the mask until triaged or examined. If a patient is diagnosed with MTB prior to being evaluated in the clinic, the patient will wear a mask during the clinic visit and may be scheduled at a less busy time during the clinic (i.e, the end of the day).

- D. Procedures performed in the Module J special procedure area include: Nonstress testing (NST), amniocentesis, chronic villus sampling (CVS), abdominal ultrasound, hysteroscopy, vaginal probe ultrasound, doppler, and peri-umbilical blood sampling (PUBS). Refer to Appendix 1.

Procedures performed in the OB/GYN area include: Pap smears, loop electrosurgical excision procedure (LEEP), colposcopy, pessary and diaphragm fittings, Norplant removal, IUD insertion, biopsies, dressing changes. Refer to Appendix 1.

Procedures performed in the GYN Oncology area include: Cystoscopy, proctoscopy, pap smears, Loop electrosurgical excision procedure (LEEP), cryotherapy, colposcopy, obtaining blood specimens from implanted ports, cervical biopsy, endometrial biopsy, colostomy care, and dressing changes to incision. Refer to Appendix 2.

Procedures performed in the ECU Women's Physicians facility include: Pap smears, colposcopy, pessary and diaphragm fittings, biopsies, ultrasounds, as well as artificial insemination, Huhner's test, and hysteroscopy. IUD insertion, LEEP, some forms urodynamics, and amniocentesis. Refer to Appendix 3.

- E. Between patients, contaminated areas of examination tables and countertops are cleaned with an EPA approved disinfectant. Table paper is changed, soiled linen removed and contaminated or used supplies disposed of or removed from the room between patients. The Hoffman Chamber, for examination of follicular aspirates, is cleaned with an approved disinfectant after each use.

Clean gowns and drapes are provided for every patient. Instruments and equipment are removed and placed in appropriate containers for soaking or wiped with an approved disinfection solution. Contaminated disposable equipment is discarded in appropriate biohazard containers.

- F. All specimen containers will be placed in leak-proof plastic bags marked with a biohazard label and transported in a covered, leak-proof secondary container marked with a biohazard label.
- G. Personnel protective equipment that includes gloves, gowns, masks and eyewear or face shields and appropriate respiratory protection for MTB will be available for employees, non employees, and students. These will be located in the treatment room, examination room and utility areas.

V. Equipment and Supplies

- A. Clinical supplies and clean equipment are stored in examination rooms, in closed cabinets, drawers, and in specified locked storage rooms. Instruments and equipment are cleaned and assembled in a designated cleanup area for each location.

The General and Andrology lab at ECU Women's has a CLIA number.

- B. Dirty disposable supplies are placed in red biohazard containers. Dirty equipment is disassembled in the exam or procedure room at the sink, soaked and transported from rooms to cleanup area in a covered container with a biohazard label.
- C. All equipment is evaluated for cleanliness or sterility prior to use. Large equipment is cleaned with an EPA approved disinfectant when soiled or at least weekly. Reusable instruments are cleaned, disinfected, and/or sterilized between patient use. Speculums and instruments are soaked and/or washed with an approved instrument cleaner. Heavy-duty gloves, protective aprons, eyewear, and/or face shields are worn when cleaning and disinfecting instruments.

Speculums are washed in a dishwasher and finally, with other instruments, are loosely autoclaved. Some instruments may be glass-bead sterilized (250 degrees C for 45 seconds).

Other instruments and equipment are soaked in a glutaraldehyde solution at manufacturer's recommendations and rinsed or flushed with sterile water before reuse.

Speculums, instruments, or specialty trays for sterile procedures are individually prepared in designated wrappers for sterilizing. Packages have sterility indicator enclosed and are labeled and dated before being sent to be autoclaved.

Chemical indicators are used in each package and logged. A spore indicator is used and results recorded. An autoclave is onsite at Women's Physician and maintained according to manufacturer's recommendations.

Autoclaves:

1. All instruments, speculums or trays for sterile procedures will be cleaned prior to sterilization.
2. After cleaning, these instruments are wrapped prior to sterilization.
3. Each individually wrapped instrument, tray, etc will have a clinical indicator in place.
4. Each package is labeled, dated and initialed.
5. Biological spore testing is done at least weekly and documented.
6. The spore tests are incubated according to manufacturer's recommendations and documented in a log.
7. The incubator and log are monitored by the designated staff for date and condition.

Specialty OB/GYN equipment is wiped down with an EPA approved disinfecting solution at the end of use. Irrigation bags and tubing for urodynamic testing are replaced before each patient's use.

Reusable scopes/catheters used for hysteroscopy, cystoscopy and proctoscopy are soaked in a glutaraldehyde solution at manufacturer's recommendations. The reusable diaphragm/pessary fittings are soaked in an EPA approved disinfecting solution, rinsed and allowed to air dry according to manufacturer's recommendations. The D&C suction machine receptacle is cleaned with an EPA approved disinfectant after each use. External filters and tubing are changed after 60 minutes of use. Internal filters are changed every six months. The operator will wear a gown, mask and gloves. LEEP filters are changed after 15 patients. LEEP pens are wiped with an EPA approved disinfectant between each patient and changed after 15 patients. The reusable cryo tips are cleaned then soaked in a glutaraldehyde solution at manufacturer's recommendations after each use.

Fetal monitoring transducers are wiped with a germicidal wipe between patients. Fetal monitoring straps are single use straps and discarded after use. Ultrasound vaginal probe transducers are covered with a disposable condom during the procedure. The condom is removed following the procedure and the transducer is cleaned with a germicidal wipe and then soaked in a glutaraldehyde solution according to manufacturer's recommendations.

Needle guides, beaded glass rods, and other reusable equipment will be individually wrapped and sterilized (by heat--170EC for 1 hour or by steam sterilization). Sterility indicators are included in packages. Spore test strips are utilized and sent for culture and analysis by a commercial group.

D. Each treatment/procedure room has an appropriately labeled contaminated trash can (red bag) and a non-contaminated trash can (clear or brown bag). Any contaminated non-sharp trash will be disposed in the red bag trash. These red bags are gathered by ECU Biohazard Waste technician and sent for incineration. Any non-contaminated trash will be placed in clear or brown bags.

E. Sharps disposal units are located in each patient exam room and each treatment room. Sharps containers will be checked daily by designated staff and when 3/4 full, sealed and marked for incineration. These are placed with biohazard trash containers within the module.

Clean linen is stored covered or in closed cabinets or closets. Dirty linen is placed in leak-proof plastic bags in covered, labeled containers in each room. Tied-off linen bags or closed containers are placed in designated storage area for pick-up by contacted linen service. Gloves are worn when handling soiled linen.

Appendix 1

List of common procedures and minimum protective needed
Brody Outpatient—Module B, C and J

Common Procedures	Minimum Equipment Needed
1. In and Out Catheterization	Sterile gloves
2. Fingerstick H & H	Gloves
3. Fingerstick Blood Sugar	Gloves
4. Pap smear/VIRa Pap	Gloves
5. Dressing changes	Sterile gloves, gown, mask & eyewear or face shield
without irrigation/with irrigation	Gloves
6. Foley Catheter	Gloves
7. Aerobic & Anaerobic Cervical Cultures	Gloves
8. GC Cultures	Gloves
9. Chlamydia Culture	Gloves
10. Herpes Culture	Gloves
11. Suture and Staple Removal	Gloves
12. IV Therapy	Gloves
13. Pelvic & Speculum Exams	Gloves
*with suspicion of bulging membranes	Gloves, gown, face shield
14. Sterile pelvic exams	Sterile gloves
*speculum with suspicion of bulging membranes	Gloves, gown, face shield
15. Subcutaneous Injections	Gloves
16. Intramuscular Injections	Gloves
17. Incision and Drainage Bartholin Cysts and Insertion of word Catheter	Gloves
18. Polyp Removal	Gloves
19. Trichloroacetic Acid Applications (TCA)	Gloves
20. Pessary Insertion	Gloves

21.	Venipuncture	Gloves
22.	Stool Guaiac	Gloves
23.	Urine Dip	Gloves
24.	Ferning Slides	Gloves
25.	Wet Preps	Gloves
26.	Punch Biopsy	Gloves
27.	Nonstress Test	None
28.	Sputum Collection	Gloves
29.	Fine Needle Aspiration	Gloves
30.	Slides for Nipple Secretion	Gloves
31.	Transabdominal Ultrasound	Gloves
32.	Transvaginal Ultrasound	Gloves
33.	Amniocentesis	Gloves
34.	PUBS	Gloves
35.	CVS	Gloves
36.	Transport of Lab Specimens	Gloves
37.	Enemas	Gloves, gown, mask & eyewear or face shield
38.	IV push medications	Gloves
39.	Assisting with Procedures	Gloves
40.	Norplant Removal	Sterile gloves
41.	Endometrial Biopsy	Gloves
42.	Diaphragm Fitting	Gloves
43.	Cervical Biopsy	Gloves, gown
44.	Hysteroscopy	Sterile gloves
45.	Intra Uterine Device Insertion & Removal	Gloves
46.	Paracervical Block	Gloves

47.	Endocervical Curettage	Gloves
48.	Culdocentesis	Sterile gloves
49.	Uroflow	Gloves
50.	Bladder pressure studies	Gloves
51.	Suturing of cervical or perineal lacerations	Sterile gloves
52.	Cleaning Equipment and Instruments	Gloves, gowns, mask & eyewear or face shield

Appendix 2

Division of GYN Oncology-Leo Jenkins Cancer Center

List of common procedures and minimum protective equipment needed.

Common Procedures	Minimum Equipment Needed
1. In & Out Catheterization	Sterile gloves
2. Fingerstick H & H	Gloves
3. Fingerstick Blood Sugar	Gloves
4. Pap Smear	Gloves
5. Dressing Changes	Gloves, gown, mask & eyewear or face shield
without irrigation/ with irrigation	Gloves
6. Foley Catheter	Gloves
7. Suture and Staple Removal	Gloves
8. IV Therapy	Gloves
9. Pelvic Exams	Gloves
10. Subcutaneous Injections	Gloves
11. Intramuscular Injections	Gloves
12. Venipuncture	Gloves
13. Accessing Implanted port	Gloves
14. Accessing Mediport	Sterile gloves
15. Cervical Biopsy	Gloves
16. LEEP Procedure	Gloves, mask & eyewear or face shield
17. Cystoscopy	Sterile gloves, mask & eyewear or face shield
18. Proctoscopy	Gloves, mask & eyewear or face shield
19. Stool Guaiac	Gloves
20. Endometrial Biopsy	Gloves
21. Colposcopy	Gloves
22. IV Medications	Gloves
23. Cervical Cultures	
-GC	
-Herpes	
-Aerobic & Anaerobic	

	-Chlamydia	Gloves
24.	Transport Lab Specimens	Gloves
25.	Assisting with procedures	Gloves
26.	Cleaning Equipment and Instruments	Gloves, gown, mask, & eyewear of face shield
27.	Laser vaporization	Sterile gloves, gowns, filtering mask, eyewear

Appendix 3

Women's Physician –2160 Herbert Court

List of common procedures and minimum protective equipment needed.

Common Procedures	Minimum Equipment Needed
1. In & Out Catheterization	Sterile gloves
2. Fingerstick H & H	Gloves
3. Fingerstick Blood Sugar	Gloves
4. Pap smear/VIRa Pap	Gloves
5. Dressing Changes without irrigation/ with irrigation	Sterile gloves, gown, mask & eyewear or face shield Sterile gloves
6. Foley Catheter	Gloves
7. Aerobic & Anaerobic Cervical Cultures	Gloves
8. GC Cultures	Gloves
9. Chlamydia Culture	Gloves
10. Herpes Culture	Gloves
11. Suture and Staple Removal	Gloves
12. IV Therapy	Gloves
13. Pelvic & Speculum Exams *with suspicion of bulging membranes	Gloves Gloves, gown, face shield
14. Sterile pelvic exams *speculum with suspicion of bulging membranes	Sterile gloves Gloves, gowns, face shield
15. Subcutaneous Injections	Gloves
16. Intramuscular Injections	Gloves
17. Incision and drainage of Bartholin cysts and insertion of Word Catheter	Gloves
18. Polyp Removal	Gloves
19. Trichloroacetic Acid Applications	Gloves
20. Pessary Insertion	Gloves

21.	Venipuncture	Gloves
22.	Stool Guaiac	Gloves
23.	Urine Dip	Gloves
24.	Ferning Slides	Gloves
25.	Wet Preps	Gloves
26.	Punch Biopsy	Gloves
27.	Nonstress Test	None
28.	Sputum Collection	Gloves
29.	Fine Needle Aspiration	Gloves
30.	Slides for Nipple Secretion	Gloves
31.	Transabdominal Ultrasound	Gloves
32.	Transvaginal Ultrasound	Gloves
33.	Amniocentesis	Gloves
34.	Transport of Lab Specimens	Gloves
35.	Enemas	Gloves, gown, mask & eyewear or face shield
36.	IV Push Medications	Gloves
37.	Assisting with Procedures	Gloves
38.	Norplant Removal	Sterile Gloves
39.	Endometrial Biopsy	Gloves
40.	Diaphragm Fitting	Gloves
41.	Cervical Biopsy	Gloves, gown
42.	Intra Uterine Device Insertion & Removal	Gloves
43.	Paracervical Block	Gloves
44.	Endocervical Curettage	Gloves
45.	Culdocentesis	Sterile Gloves
46.	Suturing of cervical or perineal lacerations	Sterile gloves
47.	Artificial Insemination	Gloves

48.	Huhners Test	Gloves
49.	Intracervical Insemination	Gloves
50.	Intrauterine Insemination	Sterile Gloves
51.	Semen Analysis	Gloves
52.	Cleaning Equipment and Instruments	Gloves, gowns, mask & eyewear or face shield
53.	Cystoscopy	Gloves
54.	Cystometrogran	Gloves
55.	Testicular Aspiration	Gown, gloves and eyewear

Appendix 4

Andrology Laboratory - 2160 Herbert Court

List of common procedures and minimum protective equipment needed.

Common Procedures	Minimum Equipment Needed
1. IUI/TDI preparations	Gloves, gown, mask, eyewear or face shield
2. Semen Analysis	Gloves, gown, mask, eyewear, or face shield
3. Microscope work	Gloves
4. Cryopreservation/thawing semen	Gloves, gown, eyewear or face shield