

# Infection Prevention Newsletter

## *APIC Indiana Chapter Receives Chapter Excellence Awards & Susan Kraska Receives Leadership Award*

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Once again the Indiana Chapter has shined in its commitment to excellence in the prevention of infections. The APIC National Nominating and Awards Committee has selected APIC Indiana as the recipient of the 2011 APIC Chapter Excellence Award in the category of **Education, Communication and Information Resources**. Our chapter will receive recognition for best demonstrating excellence in developing, promotion and providing meaningful, accessible, and affordable educational products or services, and other information resources for infection prevention and control professionals, healthcare workers, and the general public at the APIC National Conference

in Baltimore. This award would not be possible without the hard work and dedicated efforts of many.

Susan Kraska, from South Bend Memorial Hospital, was selected for the 2011 APIC Chapter Leadership Award. She will be recognized for her efforts in developing members and advancing APIC during the 2011 Annual conference in Baltimore. Susan has been our chapter treasurer for three years and has also served as our liaison for government affairs for the past 7 years. Congratulations and thank you Susan for your dedication and commitment to our profession!



*Don't miss out on the  
2011 APIC National  
Conference in Baltimore*

Indiana Chapter dinner will be on Tuesday evening of the conference. Watch for details coming soon if you are attending. It is a great opportunity to network and get to know your fellow chapter members.

## *APIC Spring 2011 Workshop*

On April 15th there were 93 attendees, 31 vendors (which is a record number) for the state education conference held in Indianapolis at the Hilton North Conference Center. There was a great variety of topics and speakers.

Dr. Gerba from University of

Arizona spoke on "Hygiene in the 21st Century". I am sure there are many who went home and re-evaluated their cleaning habits. . . especially those remote controls! "A Day in the Life of a Long Term Care Infection Preventionist" was presented by Joan Baker, RN and was very enlightening

to many especially those who have always traditionally worked in acute care.

The afternoon included a talk from Randy Snyder from ISDH on "Infection Control: How Vegas Changed ASCs". The presentation will be beneficial for preparing for your next

surgery setting. The last presentation from Megan Critser, BSN "Healthcare and Bedbugs" left us all much wiser about controlling these critters, but also itching. Handouts from the presentations are available on the APIC Indiana webpage. (Cont'd pg 4)



Mandatory reporting  
is starting to sizzle.  
Are you ready?

## Indiana Healthcare Associated Infection Reporting Rule

Work has been underway by the ISDH to implement a Healthcare Associated Infection Reporting Rule that would tentatively go into effect January 1, 2012.

APIC Indiana has been actively representing the chapter at the hearings discussing the contents and requirements for reporting that may be included in this rule.

At the time of this publication it appears the required report-

ing will be based on the NHSN reporting requirements that are also being done through CMS. Currently CMS is requiring reporting of CLABSI in intensive care units and next year specific surgical site infections will be required to be submitted through NHSN as well. If you are not currently submitting surgical data to NHSN you may want to start working on it now so you won't feel the pressure and stress of trying to get clean denominator data for

exporting when it does become mandatory. This is a sizzling hot topic so watch for more information to come!

Special thanks to Diana Korpal, Susan Kraska, Carol Kellams and Laurie Fish for being at the table for Indiana APIC at the HAI reporting hearing meetings.

## CDC Clinical Reminder

The CDC recently released a clinical reminder urging healthcare providers to remember to always wear a mask when performing procedures that require injection of material or insertion of a catheter into epidural or subdural spaces. Outbreaks of bacterial meningitis continue to occur following these types of procedures

when the provider didn't wear a face mask. The most recent reported case was October 2010.

For more information on this serious subject matter regarding another form of safe injection practices go to the following link:

<http://www.cdc.gov/injectionsafety/SpinalInjectionMeningitis.html?source=govdelivery>

### Did you know?

"Recent outbreaks have occurred among patients who received spinal / epidural anesthesia or underwent myelography"

## CDC Health Alert: *Shiga Toxin-producing E.coli* 0104:H4 (STEC) Infections



Hopefully by now you have read or heard about the large scale outbreak going on in Europe particularly in Germany from the Shiga toxin-producing strain of *E.coli* 0104:H4.

Like the *E.coli* 0157:H7 that most are familiar with, this

organism causes severe stomach cramps, bloody diarrhea and vomiting. This organism can lead to HUS (hemolytic uremic syndrome) and even death. The CDC reported as of May 31 there have been 3 cases in the USA, but all were reported in individuals who had recently traveled to Germany.

The following information is an excerpt from the CDC's HAN notice regarding treatment and testing:

It is not recommended to give antibiotics to patients with suspected STEC infections until complete diagnostic

(Cont'd see CDC Advisory)

## CDC Advisory (continued)

testing can be performed and STEC infection is ruled out. Some studies have shown that administering antibiotics in patients with STEC infections might increase their risk of developing HUS. However, clinical decision making must be tailored to each individual patient. There may be indications for antibiotics in patients with severe intestinal inflammation if perforation is of concern. Of note, isolates of STEC O104:H4 from patients in Germany have demonstrated resistance to multiple antibiotics.

Guidelines to ensure as complete as possible detection and characterization of STEC infections include the following:

- All stools submitted for testing from patients with acute community-acquired diarrhea should be cultured for STEC O157:H7. These stools should be simultaneously assayed for non-O157 STEC with a test that detects the Shiga toxins or the genes encoding these toxins.
- Clinical laboratories should report and send *E. coli* O157:H7 isolates and Shiga toxin-positive samples to state or local public health laboratories as soon as possible for additional characterization.
- Specimens or enrichment broths in which Shiga toxin or STEC are detected, but from which O157:H7 STEC isolates are not recovered, should be forwarded as soon as possible to a state or local public health laboratory so that non-O157:H7 STEC can be isolated.
- It is often difficult to isolate STEC in stool by the time a patient presents with HUS. Immunomagnetic separation (IMS) has been shown to increase recovery of STEC from HUS patients. For any patient with HUS without a culture-confirmed STEC infection, stool can be sent to a public health laboratory that performs IMS or to the CDC (through a state public health laboratory). In addition, serum can be sent to CDC (through a state public health laboratory) for serologic testing of common STEC serogroups.

All patients with Shiga toxin-positive diarrheal illness or HUS should be reported to health departments, regardless of a travel history to Germany.

# Welcome

## New Indiana APIC Members !

### 17 New Members so far in 2011

- |                         |                         |                    |
|-------------------------|-------------------------|--------------------|
| Mrs. Mary Kathleen Hunt | Kelly Kelley            | Suzanne M. Barkley |
| Bruce Rippe             | Mrs. Michelle Lea Hawes | Tony Dal Santo     |
| Kendra Baker            | Luke Sullivan           | Nancy Richison     |
| Jason Thomas            | Jason Hensley           |                    |
| Andrea Sharon Farmer    | Laura Townsend          |                    |
| Susan M. Book           | Diantha Hostetler       |                    |
| Cynthia Lynn Capron     | Renata Robertson        |                    |



## APIC Spring 2011 Workshop

Cont'd from pg. 1.

Scholarships were awarded at the workshop for the following 3 categories: First Time Attendee to APIC National, Clarice Warrick Scholarship for APIC National, and the Diana Korpall Long Term Care Scholarship for the APIC Indiana State Conference

Congratulations to the following individuals were recipients of this year's APIC National Scholarships: Cynthia Bruce, Gail Canganelli,

Deb Watkins, and Tonya Green. Cindy Capron received the Diana Korpall LTC Scholarship for the Indiana state conference.

Speaking of scholarships the scholarship fundraiser was a big success. Hope all who attended enjoyed the "GRAJ" (Great Recycled Awesome Junque) sale/fund raiser. A special thanks to Janene Pulaski and Lorea Harris for all their work on the scholarship committee.

The fall conference scholarship fund raiser will be the themed basket silent auction. Regional APIC groups should start planning now for items to place in your region's basket.

We are also in need of some new scholarship committee members. This is a great way to become involved in the chapter. If interested let your Regional Director know or Diana Korpall at [DKorpall@triumph-healthcare.com](mailto:DKorpall@triumph-healthcare.com)



## Indiana APIC Calendar of Events

August 19th—The Strategic Planning/Board meeting (all board meetings are open to any member). Place: Indianapolis Hilton North

October 14th—Fall Indiana State Chapter Fall Conference. Place: Indianapolis Hilton North

October 16th –22nd— **25th**

**Anniversary of International Infection Prevention Week** see APIC website for more details and promotional materials.

*Have a safe happy summer!*

