

STOP CONTACT PRECAUTIONS

(in addition to Standard Precautions)

VISITORS: Report to nurse before entering.

PRIVATE

Private Room



Shoe Covers



Gloves

Wear gloves when entering patient room.

Change gloves after having contact with infective material that may contain high concentrations of microorganisms (**fecal** material and **wound drainage**). **Remove** gloves before leaving patient room.



Gown

Wear gown when entering patient room. **Remove gown before leaving** the patient's environment and ensure that clothing does not contact potentially contaminated environmental surfaces to avoid transfer of microorganisms to other patients or environments.



WASH

Clean hands with an **alcohol foam or soap and water** immediately after glove removal.



Patient Transport

Limit transport of patient to essential purposes only. Prevent cross contamination. **During transport by bed**, use clean cover sheet, wipe bed rails with disinfectant and wear PPE during transport. contamination of environmental surfaces and equipment. **During transport by wheelchair**, use clean cover sheet, remove PPE before leaving the room.



Patient-Care

Dedicate the use of noncritical patient-care equipment to a single patient. If common equipment is used, clean and disinfect between patients.

Use **BLACK** Isolation Sign for Suspected or Confirmed **Bed Bug** rooms.

1. Immediately close the door to the room. Do not remove anything from the area (including the patient).
2. Staff member who identifies the presence of suspected bed bugs (or if patient reports bed bugs) contacts the unit manager.
3. Staff member who identifies the presence of suspected bed bugs or the unit manager contacts Environmental Services (EVS) Supervisor only for verification and initial guidance on isolating the room. Contact EVS and request the manager or shift supervisor: Staff also notify Infection Preventionist, leaving a voicemail if after hours.
4. In collaboration with the nursing manager or designee, a member of the EVS management team immediately inspects the area (i.e., chair, bed). If visible bugs are found, EVS designee collects a specimen for pest contractor's evaluation.
5. EVS designee contacts contracted pest control contract company.
If there has been no site confirmation the EVS supervisor will treat the room with an approved pesticide that the contracted company designated to use for treatment of unconfirmed bed bugs reported.

If bed bugs are identified in an occupied room:

Patient Management

- Place the patient on Contact Precautions. Obtain isolation gown, gloves and shoe covers.
- Place a **Black and White Contact Isolation Sign** on the door.
- Use Personal Protective Equipment (PPE) gown, gloves, and shoe covers when in room. Remove PPE immediately before exiting room.
- Use disposable equipment when possible.
- Have the patient shower and change into a new patient gown.
- If the patient is unable to shower, bathe the patient with soap and water.
- Change bed sheets after bathing.
- Examine skin for any pests present. Look in areas where they may hide (e.g., under arms, skin folds). Document bites in patient chart.

Personal Belongings

- Direct care providers immediately double-bag all personal effects, sealing the bag securely with tape. Double bag personal valuables in the same manner.
- If the patient has his/her own wheelchair, it must be contained in a bag. Ensure the bag is secured at top with tape. EVS has extra-large bags.
- Encourage family to take any unnecessary items home immediately.
- Leave any items not taken home in contaminated room.. Label bag with patient name, medical record number, date, and room number. Double Bag, sealing the bag securely with tape.
- After handling patient belongings, valuables, and linens, staff check their own personal clothing to verify bed bugs did not crawl onto pants and shoes.

Family and visitors: The charge nurse encourages family and visitors to go home, shower and don clean clothes. **Bed Bug FAQs** education may also be provided to family and visitors.

Occupied or Non-occupied Room

- **DO NOT CHUTE the linen.** No linens leave the room until double-bagged in Gray bags secured with tape by direct care providers and collected by EVS. .
- The bed and non-disposable equipment/furniture/ furnishings remain in the room.
- Discard any open boxes (e.g., exam gloves, tissue) into trash receptacles within the room.
- When the room is no longer occupied, the charge nurse calls Bed Control to block the room.
- If bed bugs have been seen by EVS, the contracted pest control company provides a professional in-depth inspection of the immediate area, including adjacent rooms, the area above and below the room where bed bugs are present. Inspections of adjacent areas are most thorough when the patient and family are not present.
- Treated areas remain closed for a minimum of 24 hours, depending upon the level of infestation and type of treatment required.
- After closing for 24 hours, EVS provides a terminal cleaning of the room.
- Infection Control and Prevention works with EVS and unit director or designee regarding re-opening of the room.