

POSTER PRESENTATION

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P162: Behavior and infection control/ influencing healthcare workers

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Introduction

Health care-associated infections (HAIs) have become more common 5-8% (30% is preventable) as medical care has grown more complex and patients have become more knowledgeable and demanding.

Objectives

The objective of this study was to evaluate and suggest for improvement in Health Care Acquired infection at 150 bedded Indian Spinal Injuries Centre (ISIC).

Methods

Method included a retrospective study of HAI data for 2 years (2011-2012).

Results

Result showed that Catheter Associated Blood Stream Infection (CA-BSI) in 2011 was 0.2% & in 2012 1.3%. CA UTI 2011 was 3% & in 2012 was 3.5%. E.Coli 52% is main cause of Urine infections & most sensitive to Colistin, Imipenam, Kleibsella 32%, Pseudomonas 15% more sensitive to Imipenam and Tazobactum.

Respiratory infection E. Coli 33%, Staph 33%, Acinetobacter 34% CDC 4.8-6/1000 Ventilator days. More sensitive to Colistin.

VAP rates in ISIC in 2011 was 5% & in 2012 was 2.6%.

Conclusion

Interventions

To be effective the infections control program has included the following:

- Organized surveillance and control activities.
- Two infection control Nurses have been appointed.

A Trained Hospital Epidemiologist & Microbiologist have been appointed.

A system for reporting surgical wound infection rates and other infection back to the practicing surgeons and physicians developed.

UTI – Guideline

Booklet distributed, bed side teaching is done for Catheter care, CIC Counseling, Antibiotic Catheter, VAP- Raised head end 30%, Culture 1st day & 3rd Day leads to early detection and treatment.

SSI-Stopped shaving, clipping done, Chlorhexidine & Betadine used for skin preparation.

Disclosure of interest

None declared.

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