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	<b>Applicability:</b> <i>UNC Medical Center</i>

## Clinical Neurophysiology Laboratory

### I. Description

Describes infection prevention and control practices followed in the Neurophysiology Labs.

### II. Rationale

Infection prevention is an important component of patient care in the Clinical Neurophysiology Laboratory. Procedures performed in this area include electroencephalogram (EEG), evoked potential, and electromyogram (EMG). Health Care Personnel (HCP) working in this clinic should be alert to patients with possible infections and take appropriate measures to prevent the spread of disease to other patients, visitors, and staff. Likewise, appropriate infection control measures which relate to Clinical Neurophysiology Laboratory equipment used in these areas and the general environment should be observed.

### III. Policy

#### A. Personnel

1. Hand Hygiene
  - a. Hand hygiene must be performed in accordance with the Infection Prevention Policy: [Hand Hygiene and Use of Antiseptics for Hand Preparation](#).
2. Dress Code
  - a. HCP should adhere to all guidelines in the Infection Prevention Policy: [Infection Control Guidelines for Adult and Pediatric Inpatient Care](#).
  - b. Clean scrub clothes must be worn daily and changed when contaminated. Scrubs not contaminated with blood or other potentially infectious materials may be laundered at home.
3. Occupational Health
  - a. HCP should adhere to guidelines established by the Occupational Health Services (OHS). See the policy: [Infection Control and Screening Program – OHS](#).
  - b. Infection prevention and control education, including OSHA-required education for bloodborne pathogens and TB, is completed annually via LMS.
  - c. HCP should be familiar with and follow policies outlined in the [Exposure Control Plan for](#)

[Bloodborne Pathogens](#), the [Tuberculosis Control Plan](#), and [Isolation Precautions](#).

## B. General Guidelines

1. The work areas in the treatment rooms should be cleaned by the Clinical Neurophysiology Laboratory staff between patients with an EPA-registered disinfectant (e.g., MetriGuard, Sani-Cloths).
2. Isolation/Precautions
  - a. HCP should use Standard Precautions when caring for all patients.
  - b. HCP are responsible for following the Infection Prevention Policy: [Isolation Precautions](#).
  - c. When patients with suspected or known communicable diseases (e.g., patients on isolation precautions) are transported to other departments, the receiving department must be notified of the patient's impending arrival so that appropriate isolation/precaution guidelines can be followed.
  - d. Ambulatory patients who have symptoms of a respiratory infection of uncertain etiology should be provided a surgical mask. Patients unable to wear a mask should be instructed to use tissues and cover their mouths and noses when coughing or sneezing. Place patients with respiratory symptoms in a private room (preferred) or cubicle or exam room as soon as possible for further evaluation.
    - a. Implement use of surgical or procedure masks by health care personnel during the evaluation of patients with respiratory symptoms.
    - b. Continue to use Droplet Precautions to manage patients with respiratory symptoms until it is determined that the cause of symptoms is not an infectious agent that requires precautions beyond Standard Precautions.
  - e. Guidelines for the management of patients with known or suspected tuberculosis are located in the Infection Prevention Policy: [Tuberculosis Control Plan](#).
3. Visitors with communicable infectious diseases (e.g., chicken pox, influenza) should not accompany patients to the department.
4. Elective procedures should be deferred if possible when patients have a communicable infectious disease.
5. All sterile procedures will be performed using aseptic technique.
6. Utility Rooms and Clean Supply Storage – Refer to the [Infection Control Guidelines for Adult and Pediatric Inpatient Care Policy](#).

## C. Equipment and Cleaning Agents

1. General Guidelines
  - a. Equipment labeled for single use only will not be reused. Refer to the Infection Prevention Policy: [Reuse of Single Use Devices](#).
  - b. Reusable equipment, reusable instruments, and surfaces should be cleaned and disinfected according to the Infection Prevention Policies: [Cleaning, Disinfection and Sterilization of](#)

[Patient-Care Items](#) and the [Infection Control Guidelines for Adult and Pediatric Inpatient Care](#).

- c. Personnel performing the cleaning and disinfection of semi-critical instruments must be trained per the Infection Prevention Policy: [Cleaning, Disinfection and Sterilization of Patient-Care Items Policy](#).

## 2. Neurophysiology Equipment

- a. Single fiber needles for EMG (non-lumened) will be cleaned with alcohol and placed in the sterilization chamber. The electrodes will be placed in the chamber containing boiling water and remain in the chamber for at least 5 minutes. The water in the sterilization chamber is changed before each use and the rubber septums, which allow introduction of the needles into the chamber, are cleaned with alcohol at least weekly.
- b. A skin antiseptic (e.g., alcohol) should be used on the skin prior to insertion of needles.

## D. Creutzfeldt-Jakob Disease

1. If EEG shows a distinct triphasic and polyphasic EEG reading suggestive of Creutzfeldt-Jakob Disease (CJD), Hospital Epidemiology, Perioperative Services, Central Processing, Microbiology Laboratory, and Pathology will be notified prior to a neurosurgical procedure on this patient. Prion sterilization procedures found in the Infection Prevention Policy: Creutzfeldt-Jakob Disease (CJD) will be used on all contaminated neurosurgical instruments from patients at high risk for CJD, including patients undergoing brain biopsy when a specific lesion has not been documented.

## E. Housekeeping

Housekeeping services are provided by the Department of Environmental Services.

## F. Medical Waste Disposal

For guidelines, refer to Infection Prevention Policy: [Guidelines for Disposal of Regulated Medical Waste](#).

## G. Implementation

It is the responsibility of the Supervisor, Laboratory Director, and Medical Director of the Clinical Neurophysiology Laboratory or his/her designee to implement this policy.

## IV. References

Rutala WA, APIC Guideline Committee. APIC guideline for selection and use of disinfectants. Am J Infect Control 1996;24:313-342.

## V. Related Policies

[Guidelines for Disposal of Regulated Medical Waste](#)

[Cleaning, Disinfection and Sterilization of Patient-Care Items](#)

[Hand Hygiene and Use of Antiseptics for Hand Preparation](#).

[Infection Control Guidelines for Adult and Pediatric Inpatient Care](#).

[Infection Control and Screening Program – OHS](#)

[Exposure Control Plan for Bloodborne Pathogens](#)

[Tuberculosis Control Plan](#)

[Isolation Precautions](#)

[Reuse of Single Use Devices](#)

**Attachments:**

No Attachments

**Approval Signatures**

Step Description	Approver	Date
Policy Stat Administrator	Patricia Ness: Nurse Educator	04/2019
	Thomas Ivester: CMO/VP Medical Affairs	04/2019
	Emily Vavalle: Director, Epidemiology	04/2019
	Sherie Goldbach: Infection Prevention Registrar	04/2019

**Applicability**

UNC Medical Center

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