I. Description
This policy describes the infection prevention practices specific to the Burn Center to reduce the risk of infection for patients and staff.

II. Policy
A. Personnel

1. Dress Code
   - Burn ICU staff will wear hospital-laundered scrubs and adhere to guidelines in the Infection Prevention policy: Infection Prevention Guidelines for Attire in Semi-Restricted and Restricted Zones.

2. Hand Hygiene
   - Hand hygiene will be performed by all persons entering and exiting the Burn Center in accordance with the Infection Prevention policy: Hand Hygiene and Use of Antiseptics for Skin Preparation.

B. Standard Precautions
   - A fluid resistant gown and gloves are used when there is risk of splash, splatter, or contact with blood or other potentially infectious materials or non-intact skin. Refer to the Infection Prevention policy: Exposure Control Plan for Bloodborne Pathogens.
      a. Select a gown that is appropriate for the activity and amount of fluid likely to
be encountered. Waterproof gowns are available for use (e.g., blue gown).

b. Change gloves between tasks and procedures on the same patient after contact with material that may contain a high concentration of microorganisms.

c. Gloves must be removed and appropriate hand hygiene performed between contact with different patients and/or their equipment.

d. Remove gloves promptly after use and perform hand hygiene before touching non-contaminated items and environmental surfaces and before going to another patient to avoid transfer of microorganisms to other patients or environmental surfaces.

e. Carefully remove a soiled gown so clothes are not contaminated. Gowns will be removed promptly when no longer needed and will be properly disposed. Disposable gowns will not be used more than once.

f. Healthcare workers will wear a protective gown and gloves when holding a baby with draining wounds and/or dressings that are not completely dry/intact. Afterwards the gown will be removed and hand hygiene performed.

g. When holding a baby, a protective barrier will be used on the shoulder to prevent oral secretions from contaminating the scrubs. Afterwards the barrier will be changed/discarded and hand hygiene performed.

C. Isolation Precautions

• Refer to the Infection Prevention policy: Isolation Precautions for guidance related to patients on isolation precautions.

D. Patient Supplies

• Refer to the Infection Prevention policy: Infection Prevention Guidelines for Safe Patient Care regarding use of and storage of patient care supplies.

E. Ancillary Services

1. Physical Therapy and Occupational Therapy

   a. Applicable guidelines as outlined in the Infection Prevention policy: Rehabilitation Therapies will be followed in addition to those of this policy.

   b. Patients on Contact Precautions may be brought to the PT/OT gym for daily exercise and therapy. These patients will be treated one at a time and ideally scheduled to be seen at the end of the day. All equipment will be cleaned with an EPA-registered disinfectant (e.g., MetriGuard, Sani-Cloth) prior to allowing the room to be used by another patient.
c. Hydrocollator tanks are cleaned and maintained per manufacturer’s instructions for use (MIFU).
   - Wrap hydrocollator hot packs per MIFU or with a clean pillowcase or towel if not specified.

d. Paraffin bath should not be used on the hands of patients with non-intact skin. Equipment is cleaned and maintained per MIFU.

2. Recreational Therapy
   a. Applicable guidelines in the Infection Prevention policy: Pediatric Play Facilities and Child Life will be followed in addition to those of this policy.
   b. Any used recreation equipment should be placed in the designated bin in the Soiled Utility Room for cleaning by Recreational Therapy.

NOTE: Patients on Contact Precautions may be taken to the Burn Center playroom or conference room. These patients will be seen one at a time. All equipment and furniture used by the patient will be cleaned with an EPA-registered disinfectant prior to the room being used by other patients, families or staff. Toys must be cleaned as outlined in the Infection Prevention policy: Diversional Supplies (e.g., toys and books).

F. Visitors
   1. All visitors must follow the Nursing policy: Hospital Visitation.
   2. Persons with communicable diseases should not visit patients. Visitors are monitored by the Burn Center nursing staff and excluded if there is evidence of a communicable disease (e.g., URI, fever, oral herpes lesions).
   3. Visitors will perform hand hygiene with an antimicrobial agent before entering and leaving patient care areas.
   4. If the patient requires isolation, the nursing staff instructs visitors to wear the appropriate personal protective equipment.
   5. Visitors will gain entrance to the Burn ICU only through the front door by the entrance to the Administrative Offices. The back door to the Burn ICU (next to the elevators) will be used only by hospital staff.

G. Equipment Cleaning
   Refer to the Infection Prevention policy: Infection Prevention Guidelines for Safe Patient Care for additional guidance.

   1. Disposable blood pressure cuffs are used in the Burn ICU and are replaced with a new cuff when visibly soiled.
2. Any other equipment used at the patient bedside or in contact with bed linen, is cleaned daily.

3. The patient's mattress is cleaned using an EPA-registered disinfectant by nursing staff if contaminated with exudate or wound drainage.

4. All equipment with gross contamination is cleaned prior to placing in the dirty utility for return to Central Distribution.

H. Soiled Linen

- Staff should adhere to guidelines in the Infection Prevention policies: Laundry and Linen Service and Infection Prevention Guidelines for Safe Patient Care.

I. Hydrotherapy

Hydrotherapy is provided within the unit to reduce the risk of cross infection and contamination to patients who are not burn patients. Principles of clean technique and patient isolation are extended to the hydrotherapy rooms. When the patient enters the hydrotherapy room materials and objects the patient comes in contact with are considered contaminated.

1. Soiled dressings are disposed of in a trash receptacle. These dressings may be removed in the hydrotherapy room or patient room. Trash is removed from the patient's room after the dressing change and immediately from the hydrotherapy room if the trash bag is wet or soiled. Otherwise, trash is collected at the end of the shift.

2. The patient is transported to the hydrotherapy between two clean sheets or a sheet and the plastic covering the stretcher.

3. The hydrotherapy room must be cleaned after completion of all daily wound care.

4. Curtains at anterooms and the hydrotherapy room doors should remain closed during all wound care procedures.

5. Whenever possible, patients colonized or infected with multidrug-resistant organisms are the last to receive hydrotherapy each day. Patients on Contact Precautions needing hydrotherapy should be transported following the policy outlined in the Infection Prevention policy: Isolation Precautions.

6. Only equipment and supplies needed for the patient receiving therapy are opened during the treatment period. All used or opened items are discarded and/or removed for disinfection before the room is cleaned and the next patient enters.

7. The stretcher used to transport the patient to and from the hydrotherapy room is cleaned with an EPA-registered disinfectant prior to and after transport. Clean sheets are applied after cleaning and dirty linen is placed directly in the linen hamper after patient use.
8. Staff must wear waterproof gown and clean gloves when working with patients who have open wounds. Hair must be pulled away from the face and confined within a disposable bouffant during wound care. Standard Precautions must be practiced for all patients. If gowns become wet/soiled during bath, change before continuing.

9. Hydrotherapy Room Cleaning
   a. Environmental Services staff mop and clean hydrotherapy rooms every afternoon after wound care is completed and clean all horizontal surfaces (except hydrotherapy equipment, which is cleaned by Burn Center staff) with an EPA-registered disinfectant daily and as needed. This includes shelves, blanket warmers, supply carts, stereo, and monitors. Supply carts/shelves in the hydrotherapy room require a daily damp cleaning of exterior surfaces.
   b. Hydrotherapy equipment is cleaned by Burn Center staff with appropriate disinfectant solution prior to the first patient's wound care, between each patient, and after the final patient of the day.
   c. Clean plastic disposable equipment liners are used for each patient.
   d. All opened, unused supplies for each patient are considered contaminated and must be discarded at the completion of hydrotherapy procedures.
   e. The rooms and equipment should remain clean and dry when not in use.
   f. Hoses on the stretcher and spigots on the chair are filled with chlorhexidine gluconate (e.g., Hibiclens) after the final hydrotherapy of the day and must be purged from the hose prior to tanking the next day.
   g. Contaminated gowns and gloves are to be removed and disposed of in the hydrotherapy rooms. Clean gowns and gloves will then be put on for transfer of the patient to his/her room for dressings.
   h. The hydrotherapy rooms each have two types of hydrotherapy equipment. Special precautions with respect to cross-infection must be observed. Two patients may be treated at the same time if clinically appropriate and neither requires isolation precautions.
   i. After a patient on Isolation Precautions has had hydrotherapy, the area(s) of the curtains handled (i.e., used to pull the curtain) should be disinfected or changed. For plastic curtains, a 1:10 dilution of bleach and water may be used. Cubical curtains around the hydrotherapy equipment should be changed by Environmental Services staff weekly and when visibly soiled.
   j. Hydrotherapy drain hoses and caps will be soaked in 1:10 solution of bleach and water or an EPA-registered disinfectant and rinsed with water between patients and at the end of the day.
   k. The hydrotherapy drain in the floor will be cleaned monthly by pouring a
J. Transportation of Patient Outside Center

When Burn Center patients require transportation from the Burn Center to other departments (e.g., x-rays, diagnostic tests) arrangements are made to reduce waiting in the holding area of the department. Preferably, patients are scheduled at a time when patient census in the department is low. Personnel in the receiving department are notified of the impending arrival of the patient and type of precautions required. After the patient is returned to the room, the stretcher or wheelchair is cleaned with an EPA-registered disinfectant.

K. Waste Disposal

Waste disposal is performed according to the Infection Prevention policy: Guidelines for Disposal of Regulated Medical Waste.

L. Environmental Services

Housekeeping responsibilities can be found in the Infection Prevention policy: Environmental Services and in the protocols of the Environmental Services Department.

III. Implementation

The implementation of this policy and the responsibility for enforcing it will be up to the Director of the Burn Center or their delegate(s) and the Nursing Supervisor or their delegate(s).

IV. Related Policies

- Infection Prevention Policy: Diversional Supplies
- Infection Prevention Policy: Environmental Services
- Infection Prevention Policy: Exposure Control Plan for Bloodborne Pathogens
- Infection Prevention Policy: Guidelines for Disposal of Regulated Medical Waste
- Infection Prevention Policy: Hand Hygiene and Use of Antiseptics for Skin Preparation
- Infection Prevention Policy: Infection Prevention Guidelines for Attire in Semi-Restricted and Restricted Zones
- Infection Prevention Policy: Infection Prevention Guidelines for Safe Patient Care
- Infection Prevention Policy: Isolation Precautions
- Infection Prevention Policy: Laundry and Linen Service
- Infection Prevention Policy: Pediatric Play Facilities and Child Life
- Infection Prevention Policy: Rehabilitation Therapies
Nursing Policy: Hospital Visitation

Approval Signatures

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<tr>
<th>Step Description</th>
<th>Approver</th>
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<tr>
<td>Policy Stat Administrator</td>
<td>Kimberly Novak-Jones: Nurse Educator</td>
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