

Status **Active** PolicyStat ID **16856355**



Origination 05/2004  
Last Approved 10/2024  
Effective 10/2024  
Last Revised 10/2024  
Next Review 10/2027

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Applicability UNC Medical Center

## Rehabilitation Therapies

### I. Description

Describes the policies and practices followed to decrease the risk of infection for patients receiving rehabilitation therapies.

### II. Rationale

Rehabilitation therapy staff often provide services to patients with surgical and nonsurgical wounds and to debilitated patients. Strict adherence to infection control and prevention practices is needed to reduce the risk of infection and prevent cross-transmission of pathogenic organisms.

### III. Policy

#### A. Staff

- Staff should adhere to all guidelines established in the Infection Prevention policies:
  - a. [Infection Prevention Guidelines for Safe Patient Care](#)
  - b. [Exposure Control Plan for Bloodborne Pathogens](#)
  - c. [Hand Hygiene and Use of Antiseptics for Skin Preparation](#)
  - d. [Infection Prevention Guidelines for Safe Patient Care](#)
  - e. [Isolation Precautions](#)

## B. Patients

1. When caring for inpatients on transmission-based isolation precautions, staff should adhere to the Infection Prevention policy: [Isolation Precautions](#). Ambulatory staff should refer the Infection Prevention policy: [Infection Prevention Guidelines for Safe Patient Care](#).
2. When caring for patients with Cystic Fibrosis, refer to the Infection Prevention policy: [Patients with Cystic Fibrosis](#).
3. Patients entering any therapy area should perform hand hygiene before entering area.

## C. Equipment

1. Equipment
  - Equipment reused between patients will be disinfected per manufacturer's instructions for use (MIFU) with an EPA-registered disinfectant on a routine basis, when visibly soiled, and after patients on Contact and Enteric Precautions.
2. Fluidotherapy
  - a. Patients will wash their hands and the affected arm up to the elbow before and after treatment. The fluidotherapy equipment will not be used on patients with open wounds present on the treatment area.
  - b. The fluidotherapy equipment and sleeves will be cleaned and maintained per the MIFU.
  - c. The Cellex® medium should be changed according to the MIFU.
3. Gym/Activities Rooms
  - a. High-touch surfaces of mats, parallel bars, cuff weights, hand weights, wheelchairs, canes, stair rails, etc., are wiped down with an EPA-registered disinfectant after each patient. If not specified in the MIFU, patient equipment is cleaned on a routine schedule (e.g., weekly). Permeable materials located on the equipment such as fabrics and foams should be replaced when no longer intact or when unable to be cleaned (i.e., torn hand grips on exercise equipment).
  - b. Floors and other surfaces are cleaned according to the Infection Prevention policy: [Environmental Services](#).
  - c. The splinting tanks and pans are cleaned and maintained according to MIFU.

- d. Hydrocollator tanks are cleaned and maintained per MIFU.
    - Wrap hydrocollator hot packs per MIFU or with a clean pillowcase or towel if not specified.
  - e. The ColPak is cleaned and maintained per MIFU.
4. Toys and Games – Please refer to Infection Prevention policy: [Diversional Supplies](#).
  5. Paraffin bath should not be used on the hands of a patient with non-intact skin. Equipment is cleaned and maintained per MIFU.
  6. Burn Center - Please refer to the Infection Prevention policy: [Burn Center](#).
  7. Chlorine in the pool is sufficient for disinfection of items used during patient therapy in the pool. If the item becomes visibly soiled, these items must be disinfected with an EPA registered disinfectant (i.e., Super Sani-Cloth®) before use on another patient.

## D. Preparation of Food

The Rehabilitation Therapies Department will follow the Infection Prevention policy: [Guidelines for Infection Prevention in Nutrition and Food Services](#) for the purchasing, cooking, serving, and storing of foods. During an outbreak of Norovirus (e.g., two or more patients on a unit with diarrhea and/or vomiting), patients on that unit should not participate in preparing food and eating together. A patient on any type of isolation should not participate in group meals. In addition, the following guidelines will be followed:

1. Leftover food from cooking groups will be eaten within 24 hours after it is prepared or it will be discarded, even if it has been refrigerated.
2. Home-prepared/home-cooked foods that are perishable (if not refrigerated and consumed within 4-hours of being removed from temperature control) should be stored in a refrigeration unit that is 41°F or less and labeled with the patient's name and date it is placed in the refrigerator. Prepared refrigerated food is good for 7 days from the date it is placed in the refrigerator. Any unlabeled (i.e., patient name and date it was brought in) prepared/home-cooked food should be discarded immediately. This pertains to all patient nourishment are refrigerators.
3. The refrigerator will be cleaned routinely and when visibly soiled.
4. Unopened commercially prepared food with an expiration date (e.g., milk carton) may be stored in the nourishment room refrigerator until the date of the expiration. It must be discarded on the date of expiration. Refer to the Infection Prevention policy: [Infection Prevention Guidelines for Safe Patient Care](#)
5. Only dishwasher detergent with chlorine bleach will be used in the dishwasher. Ideally, all eating utensils, plates, cups, and kitchenware used by patients should be washed in the dishwasher or be disposable. If kitchenware is not dishwasher safe or items are needed immediately, they may be hand washed in the sink. The kitchenware must be

washed in a dishwashing detergent containing chlorine bleach and rinsed well. Dishes should be air dried in a dish drain rather than being towel dried. After each use, dishcloths/sponges must be washed in the dishwasher or soaked for 5 minutes in a 1:10 bleach and water solution or discarded. Refer to the Infection Prevention policy: [Pediatric Play Facilities and Child Life](#).

6. A routine should be established for cleaning the interior of drawers, oven cabinets, and microwave. The drawers should be cleaned on a routine basis and when visibly soiled. The microwave should be cleaned on a routine basis (e.g. weekly) and when visibly soiled. The oven should be cleaned when visibly soiled and on a routine basis.
7. The countertops should be cleaned after each use and when visibly soiled using an EPA-registered disinfectant.
8. Staff must not use fresh eggs for cooking because of the risk of bacterial contamination from the eggs. In accordance with the Infection Prevention policy: [Guidelines for Infection Control in Nutrition and Food Services](#), only pasteurized eggs should be used in cooking. Please contact the Nutrition & Food Services Department to determine where to purchase the pasteurized regular eggs. For patients whose diets allow, egg substitutes may be used.
9. Frozen food should be labeled with the date, placed in the freezer and if not used within 30 days be discarded. Thawed food should not be refrozen.
10. Canned foods and other shelf-stable products should be stored in a cool, dry place. When expiration/use by date is reached, item will be discarded.
11. Staff and patients involved in food preparation will perform hand hygiene and wear gloves before handling food and throughout meal preparation. If someone gets a cut during preparation, the food that is exposed will be discarded, and the person with the cut will receive medical attention immediately.
12. Expiration/Sell by (use by) dates will be checked routinely and stock rotated to use goods in the order in which they are received. All food supplies should be from an approved source, either grocery store or dietary department. Cleaning products will be stored separately from food products. Food will be dated when it is received.
13. Staff and patient food are stored in separate refrigerators.
14. Bags of sugar, flour, spices, and other packaged supplies should be placed in airtight containers and stored in a refrigerator or freezer. They will be discarded per the manufacturer's expiration/use by date.

## E. Grooming

- Electric Clippers
  - Disposable clipper heads are intended for single patient use and will be discarded after each patient. The handle should be disinfected with an EPA-

registered disinfectant between each patient.

## F. Environmental Services

Refer to the Infection Prevention policy: [Environmental Services](#) for appropriate cleaning procedures and schedules.

## G. Natural Products / Objects

1. Therapies that involve the use of organic items found in nature (e.g., feathers, pumpkins, seashells) may be approved for recreational activities on an as-needed basis by Infection Prevention.
2. Horticultural activities will be acceptable under the following conditions:
  - a. Patients have intact skin.
  - b. Patients wear disposable gloves when working with plants, soil, or sand.
  - c. No patients on Protective Precautions or those who have Pica are involved in the gardening activities.
  - d. There is no standing water (e.g., water in flowerpot holders).
  - e. Hands are washed with soap and water after activity.

## IV. Implementation

The implementation and enforcement of this policy is the responsibility of the Director of the Rehabilitation Therapies Department

## V. References

N.C. Department of Health and Human Services. (2021, October 1). *North Carolina Food Code Manual*. Public Health - Environmental Health. <https://ehs.dph.ncdhhs.gov/faf/docs/foodprot/NC-FoodCodeManual-2021-FINAL.pdf>

## VI. Related Policies

[Infection Prevention Policy: Burn Center](#)

[Infection Prevention Policy: Diversional Supplies](#)

[Infection Prevention Policy: Environmental Services](#)

[Infection Prevention Policy: Exposure Control Plan for Bloodborne Pathogens](#)

[Infection Prevention Policy: Guidelines for Infection Prevention in Nutrition and Food Services](#)

[Infection Prevention Policy: Hand Hygiene and Use of Antiseptics for Skin Preparation](#)

[Infection Prevention Policy: Infection Prevention Guidelines for Safe Patient Care](#)

[Infection Prevention Policy: Isolation Precautions](#)

[Infection Prevention Policy: Patients with Cystic Fibrosis](#)

[Infection Prevention Policy: Pediatric Play Facilities and Child Life](#)

[Infection Prevention Policy: Tuberculosis Control Plan](#)

[Occupational Health Services Policy: Infection Prevention and Screening Program: Occupational Health Service](#)

## All Revision Dates

10/2024, 02/2024, 05/2023, 05/2022, 01/2021, 12/2017, 04/2017, 10/2014, 08/2011, 09/2008, 05/2006, 05/2004

## Approval Signatures

| Step Description          | Approver                              | Date    |
|---------------------------|---------------------------------------|---------|
| Policy Stat Administrator | Kimberly Novak-Jones: Nurse Educator  | 10/2024 |
|                           | Thomas Ivester: Chief Quality Officer | 10/2024 |
|                           | Emily Vavalle: Dir Epidemiology       | 10/2024 |
|                           | Sherie Goldbach: Project Coordinator  | 10/2024 |

## Applicability

UNC Medical Center

## Standards

No standards are associated with this document