INFECTION CONTROL®

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March/April 1983 Volume 4/Number 2

THE LAST THING YOUR HOSPITAL NEEDS

The threat of nosocomial infection

Between 4% and 8% of all hospitalized patients develop an infection at some time during their stay,[1] and such infections usually add to the length and cost of hospitalization.

Protecting patients and staff from nosocomial infection is becoming more difficult due to changing patterns of bacterial infection and the emergence of resistant bacteria, most notably methicillin-resistant *Staphylococcus aureus*.[2,3]

The key to management

Pathogenic bacteria are easily transmitted by the hands of physicians, nurses, technicians, and other hospital personnel.[4]

Both the Center for Disease Control and the American Hospital Association consider handwashing the single most important procedure in preventing nosocomial infection and recommend handwashing after *every* patient contact.[4] An increase in nosocomial infection that is transmitted by serial direct contact indicates suboptimal handwashing practices and antiseptic technique.[5]

A program for prevention

Because proper handwashing techniques are so important in the prevention of nosocomial infection, Winthrop has developed a comprehensive program of educational materials for every member of the hospital staff. The in-service program includes two films on handwashing, a slide/tape presentation, handwashing instruction wall charts, and dispenser maintenance instructions.

If you would like more information, please write to Professional Services Department, Winthrop Laboratories, 90 Park Avenue, New York, NY 10016, or contact your Winthrop representative.

References: 1. Infection control for the obstetric patient and the newborn infant. *NAACOG Tech Bull* 1981; March. **2.** Kraybill EN: Needs of the term infant, in Avery GB (ed): *Neonatology*, ed 2. Philadelphia, Lippincott, 1981, p 226. **3.** Haley RW, Hightower AW, Khabbaz RF, et al: The emergence of methicillin-resistant *Staphylococcus aureus* infections in United States hospitals: Possible role of the house staff-patient transfer circuit. *Ann Intern Med* 1982; 97:297-308. **4.** Albert RK, Condie F: Hand-washing patterns in medical intensive-care units. *N Engl J Med* 1981; 24:1465-1466. **5.** Wenzel RP: The emergence of methicillin-resistant *Staphylococcus aureus*. *Ann Intern Med* 1982; 97:440-442.

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An experienced partner in fighting nosocomial infection

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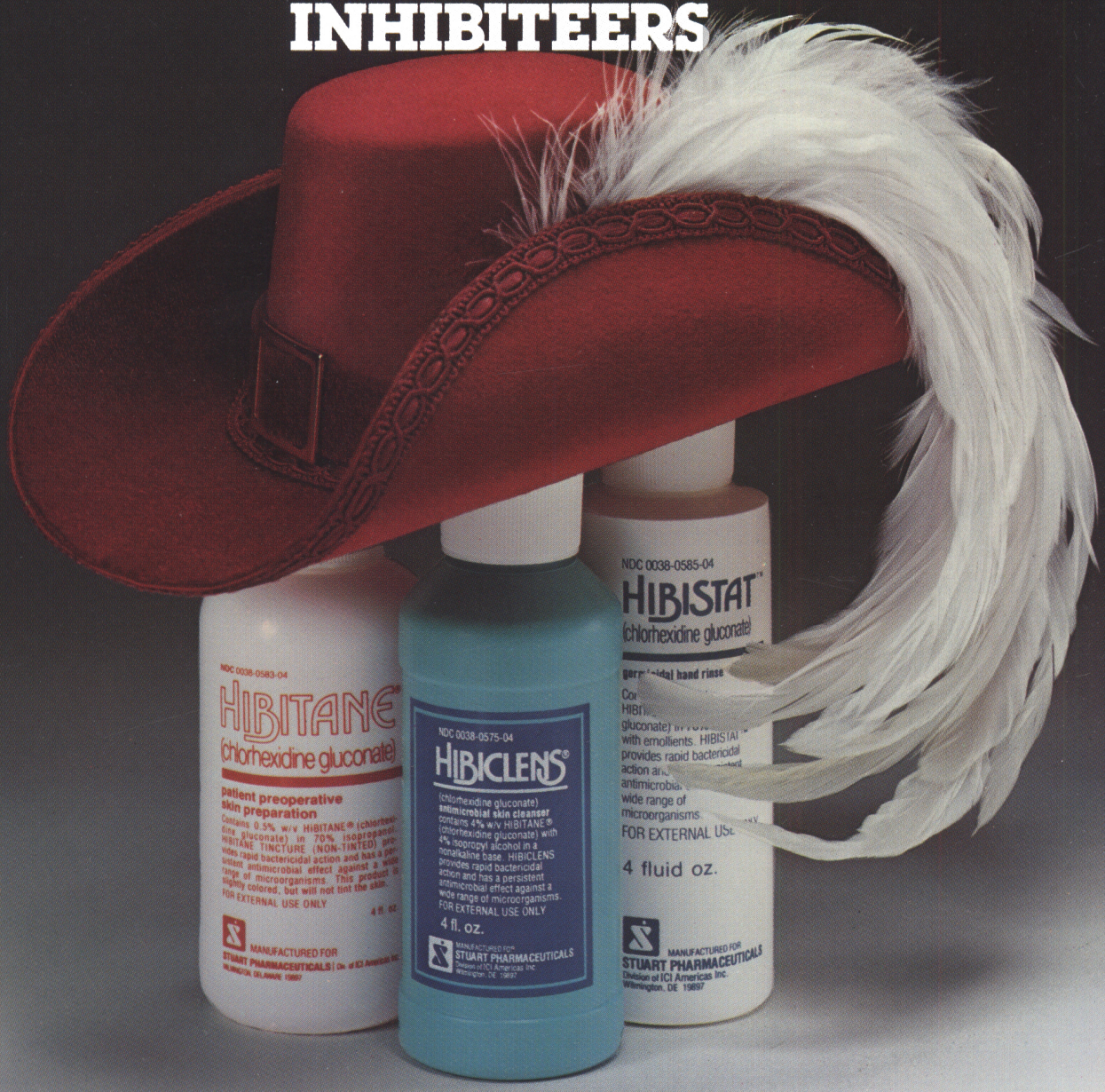
THE THREE INHIBITEERS



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March/April 1983
Volume 4/Number 2

INFECTION CONTROL®

ISSN-0195-9417

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Editorial

Original Articles

Departments

Publisher: Infection Control is published bimonthly by Charles B. Slack, Inc., 6900 Grove Road, Thorofare, New Jersey 08086. Telephone: Thorofare (609) 848-1000.

Subscriptions: Subscription requests should be addressed to the publisher (except Japan). In Japan, contact Woodbell Scope Incorporated, 11-11, Shoto 2-chome, Shibuya-ku Tokyo 150, Japan. Annual subscription price is: Individual: One year—$26.00; Two years—$42.00; Three years—$58.00. Student rates: $13.00 per year. All subscriptions, without exception, will start with the first issue published after the order is received. Back copies are available, but must be purchased separately. Cost per individual copy is $5.00. Foreign subscribers add $10.00 to regular rate; foreign orders, $6.00.

Change of address: Notice should be sent to the publisher six weeks in advance of effective date. Include old and new addresses with zip codes. The publisher cannot accept responsibility for undelivered copies. Second-class postage is paid at Thorofare, New Jersey 08086. Publisher requests Form 3547 for address correction changes.

As of Volume 1, Number 1, INFECTION CONTROL is listed in *Index Medicus, Current Contents—Clinical Practice, Hospital Literature Index,* and *Cumulative Index to Nursing and Allied Health Literature.*

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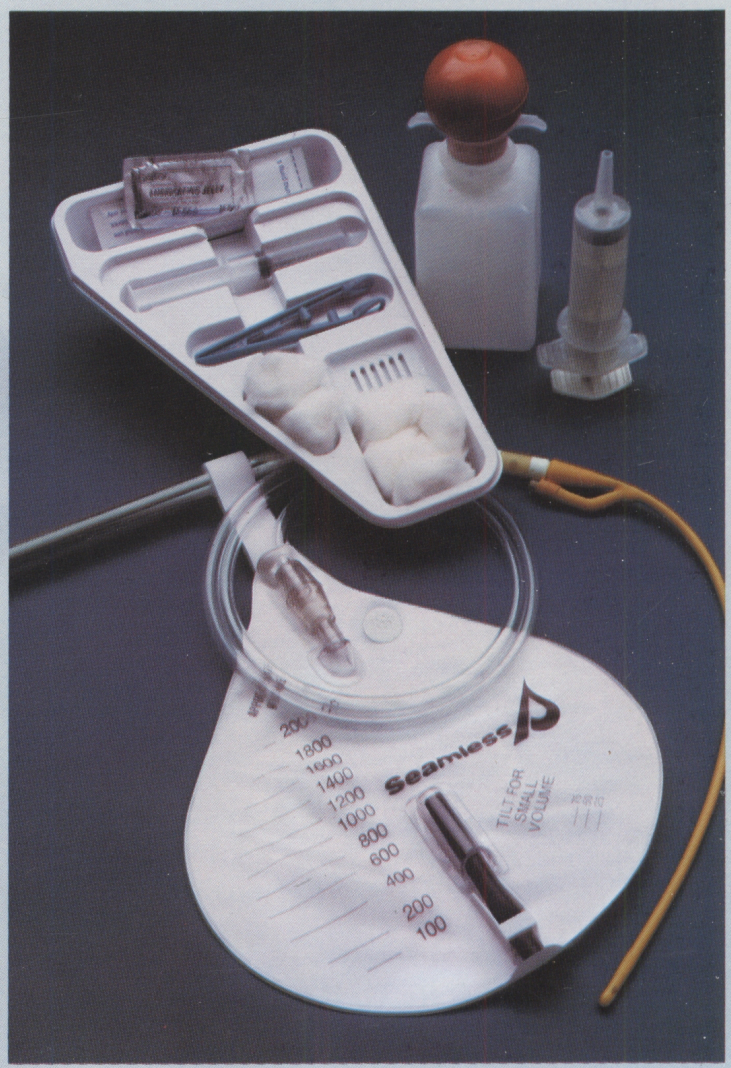
*Kunin CM, McCormack RC. Prevention of catheter-induced urinary tract infections by sterile closed drainage. N Engl J Med 1966; 274: 1155-61, as quoted in CDC Guidelines, October, 1981.



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Centers for Disease Control, Atlanta, GA (Guidelines. . . revised August 1982)

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Journal of Dental Research, Vol. 60, March 1981 (U.S. Army Institute of Dental Research, Wash., DC)

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Infection Control, 1(2): 90–93, 1980

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1982 Hospital Guidelines
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RESPIRATORY CARE
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October 1982 Volume 27, Number 10

Abstracts

An Efficacy Evaluation of a Synergized Glutaraldehyde-Phenate Solution in Disinfecting Respiratory Therapy Equipment Contaminated during Patient Use—TR Townsend, SB Wee, B Koblin (Baltimore MD). Infect Control 1982;3: 240–244.

Reusable, corrugated, expiratory limb ventilator tubings that had been in use for 24 hours were randomly allocated to one of three groups: no treatment (N = 36); detergent wash (N = 83); or a detergent wash followed by a 10-minute immersion in a 1:16 dilution of synergized glutaraldehyde-phenate solution which was reused for 30 days. (Between 10 and 22 tubes were tested in each 5-day interval during this 30-day period.) Tubes were quantitatively and qualitatively cultured. There were significant differences in both the per cent of contaminated tubes (no treatment = 92%, detergent wash = 72%, glutaraldehyde-phenate = 0 to 20%) and numbers of micro-organisms per tube (no treatment = 3.2×10^6, detergent wash = 1.3×10^4, glutaraldehyde-phenate = 0 to 182) between groups. There was no apparent decrease in glutaraldehyde-phenate's efficacy throughout the 30-day reuse period, and in the final five days of the reuse period it was completely effective.

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