Model Infection Control Plan for Veterinary Practices, 2015

National Association of State Public Health Veterinarians (NASPHV) Veterinary Infection Control Committee (VICC)

This plan should be adapted to your practice in keeping with local, state, and federal regulations. A modifiable electronic version is available on the NASPHV Website (www.nasphv.org). Please refer to the full Compendium of Veterinary Standard Precautions for complete information and guidance (also available at www.nasphv.org).

Clinic:	
Date of Plan Adoption:	
Date of Next Review:	
Infection Control Officer:	

This plan will be followed as part of our practice's routine procedures. The plan will be reviewed at least annually and as part of new employee training.

PERSONAL PROTECTIVE ACTIONS AND EQUIPMENT

Hand hygiene: Perform hand hygiene between examinations of individual animals or animal groups (e.g. litters of puppies or kittens, groups of cattle) and after contact with feces, body fluids, vomitus, exudates, and articles contaminated by these substances. Perform hand hygiene before eating, drinking, or smoking; after using the toilet; after cleaning animal cages; after contact with environmental surfaces in animal areas; after handling laboratory specimens; after removing gloves; and whenever hands are visibly soiled. Keep fingernails short. Do not wear artificial nails or hand jewelry when handling animals. Keep hand-hygiene supplies stocked at all times. Staff responsible:

Correct handwashing procedure:

Wet hands with running water
Place soap in palms
Rub hands together to make a lather
Scrub hands thoroughly for 20 seconds
Rinse soap off hands
Dry hands with disposable towel
Turn off faucet using the disposable towel to avoid hand contact
Correct use of hand rubs:
Place alcohol-based hand rub in palms

Apply to all surfaces of hands Rub hands together until dry

Gloves: Gloves are not necessary when examining or handling healthy animals. Wear gloves when touching feces, body fluids, vomitus, exudates, and non-intact skin. Wear gloves for dentistry, resuscitations, necropsies, and obstetrical procedures; when cleaning cages, litter boxes, and environmental surfaces and equipment in animal areas; when handling dirty laundry; when handling diagnostic specimens (eg, urine, feces, aspirates, or swabs); and when handling an animal with a suspected infectious disease. Wear gloves if you have wounds or compromised skin integrity of the hands. Change gloves between examination of individual animals or animal groups (eg, a litter of puppies), between dirty and clean procedures performed on the same patient, and when torn. Gloves should be removed promptly and disposed of after use. Disposable gloves should not be washed and reused. Hands should be washed immediately after glove removal.

Facial protection: Use a face shield, or goggles worn with a surgical mask whenever splashes or sprays are likely to occur. Wear facial protection for the following procedures: lancing abscesses, flushing wounds, dentistry, nebulization, suctioning, lavage, obstetrical procedures, and necropsies.

Respiratory tract protection: Use a molded particulate respirator (N95, N99) when exposure to airborne pathogens is likely. Use respiratory protection under the supervision of a veterinarian and following OSHA regulations. Training and fit testing are required for their use.

Protective outerwear: Wear a protective outer garment such as a laboratory coat, smock, non-sterile gown, or coveralls when attending animals and when conducting cleaning chores in animal areas. Protective outerwear should be changed after handling an animal with a known or suspected infectious disease, after working in an isolation room, after performing a necropsy or other high-risk procedure, and whenever soiled. Impermeable outwear should be worn during obstetric procedures and necropsies, and whenever substantial splashes or large quantities of body fluids may be encountered. Shoes or boots should have thick soles and closed toes and be impermeable to water and easily cleaned. Disposable shoe covers or washable boots should be worn when heavy quantities of infectious materials are expected. Garments should be changed and laundered daily, and whenever they become visibly soiled or contaminated. Coveralls should be changed and boots cleaned between farm premises/facilities/locations/herds. Protective outerwear should not be worn outside of the work environment. Keep clean outer garments available at all times.

a. cc :11	
Staff responsible:	
otan responsible.	

PROTECTIVE ACTIONS DURING VETERINARY PROCEDURES

Patient Intake: Place animals that have neurologic signs, diarrhea, respiratory signs, fever, infected wounds, chronic infections, or a known exposure to an infectious agent directly into a designated exam or isolation room. Bring them in a side entrance if possible.

Animal handling and injury prevention: Take precautions to prevent bites and other
animal-related injuries. Identify aggressive animals and alert clinic staff. Use physical
restraints, muzzles, bite-resistant gloves, and sedation or anesthesia as necessary in
accordance with practice policies. Plan an escape route when handling large animals. Do
not rely on owners or untrained staff for animal restraint.
If there is concern for personal safety, notify:
When injuries occur, wash wounds with soap and water, then immediately report incident
to:(infection control officer)
If medical attention is needed contact:(health-care provider)
Bite incidents will be reported to:(public health agency) as required by
law. Telephone number:
Examination of animals: Wear protective outerwear and perform hand hygiene before and after examination of individual animals or animal groups (eg, a litter of puppies). Use gloves and other protective equipment as appropriate to examine potentially infectious animals. Keep potentially infectious animals in a designated examination room until diagnostic procedures and treatments have been performed.
Injections, venipuncture, and aspiration procedures: Wear gloves when performing soft tissue or body fluid aspirations and while performing venipuncture on animals suspected of having an infectious disease. Trained personnel should restrain animals to minimize needlestick injuries due to animal movement. Do not bend needles, pass an uncapped needle to another person, or walk around with uncapped needles. Do not remove an uncapped needle from the syringe by hand or place a needle cap in the mouth. Do not recap needles unless the one-handed scoop method is used.
One-handed scoop method for recapping needles: Place the cap on a horizontal surface Hold the syringe with attached needle in 1 hand Use the needle to scoop up the cap without use of the other hand Secure the cap by pushing it against a hard surface
Dispose of all sharps in designated containers. After injection of live vaccines, or performing soft tissue or body fluid aspirations, dispose of the used syringe with needle attached in a sharps container. Otherwise, you may remove the needle with a forceps and throw the syringe away in the trash. Do not transfer sharps from one container to another. Replace sharps containers before they are completely full. Staff responsible:

Dental procedures: Wear protective outerwear, headcover, gloves, and facial protection when performing dental procedures or when in range of splashes or sprays (such as when monitoring anesthesia).

Resuscitation: Wear gloves and facial protection. Use a manual resuscitator, anesthesia machine, or ventilator to resuscitate animals. Do not blow directly into the mouth, nose, or endotracheal tube of the animal.

Obstetrics: Wear gloves or shoulder-length sleeves, facial protection, and impermeable outerwear. Do not blow directly into the nose or mouth of a non-respiring neonate. **Necropsy:** Wear cut-resistant gloves, facial protection, and impermeable outerwear. Also wear eye protection and a respirator when using a band saw or other power equipment. Only necessary personnel are allowed in the vicinity of the procedure. If an animal is suspected of having a notifiable infectious or a foreign animal disease, consult with the State Veterinarian before proceeding with a necropsy. Contact information for State Veterinarian's office:______

Diagnostic specimen handling: Wear protective outerwear and gloves. Handle feces, urine, vomitus, aspirates, and swabs as if they were infectious. Discard gloves and perform hand hygiene before touching clean items (eg, medical records, keyboard, telephone). Eating and drinking are not allowed in the laboratory.

Wound care and abscesses: Wear protective outerwear and gloves for debridement, treatment, and bandaging of wounds. Facial protection should also be used when lancing abscesses or lavaging wounds. Discard used bandages. Handle used scissors, clipper blades and other equipment as if contaminated. Autoclave or gas sterilize left-over bandaging material before putting it away. Perform hand hygiene after removing gloves.

ENVIRONMENTAL INFECTION CONTROL

Cleaning and disinfection of equipment and environmental surfaces: Wear gloves when cleaning and disinfecting cages and other surfaces in animal areas. Perform hand hygiene afterwards. Clean surfaces and equipment to remove organic matter, and then disinfectant according to manufacturer's instructions. Clean and disinfect animal cages, toys, and food and water bowls between uses and whenever visibly soiled. Clean litter boxes at least once daily. Keep clean items separate from dirty items.

Isolation of infectious animals: Put animals with an infectious disease in isolation as soon as possible. Clearly mark the room or cage to indicate the patient's status and describe additional precautions. Limit access to the isolation room. Keep a sign-in log of all people (including owners or other non-employees) having contact with an animal in isolation. Keep only the equipment needed for the care and treatment of the patient in the isolation room, including dedicated cleaning supplies. PPE should be donned immediately prior to care of the animal in isolation and removed just prior to leaving isolation. Discard gloves after use. Leave reusable personal protective equipment (eg, gown, mask) in the isolation room. Clean and disinfect or discard protective equipment between patients and whenever contaminated by body fluids. Disassemble and thoroughly clean and disinfect any equipment that has been used in the isolation room. Place potentially contaminated materials in a bag before removal from the isolation room.

Handling laundry: Wear gloves and protective outerwear when handling soiled laundry. Check for sharps before items are laundered. Wash animal bedding and other laundry in the facility with standard laundry detergent, and completely machine dry at the highest temperature suitable for the material. Use separate storage and transport bins for clean and dirty laundry. Outerwear to be laundered at home should be transported in a plastic bag, kept separate from household items, washed separately and then thoroughly machine dried.

Spill Response and decontamination: Immediately contain spills and splashes of potentially infective substances with absorbent material (eg, paper towels, sawdust, or cat litter). Use PPE to protect against the potentially infective agent and the cleaning/disinfectant to be used. Consult and follow the label recommendations. Pick up the material, seal it in a leak-proof plastic bag, and clean and disinfect the area. Keep clients, patients, and employees away from the spill area until disinfection is completed.

Veterinary medical waste: Insert here your local and state ordinances regulating disposal of animal waste, pathology waste, animal carcasses, bedding, sharps, and biologics. Refer to the US Environmental Protection Agency website (http://www.epa.gov/epawaste/nonhaz/industrial/medical/programs.htm) and the American Veterinary Medical Association website

(https://www.avma.org/PracticeManagement/Administration/Pages/AVMA-Policies-Relevant-to-Waste-Disposal.aspx) for guidance.

Rodent and vector control: Seal entry portals, eliminate clutter and sources of standing water, keep animal food in closed metal or thick plastic covered containers, and dispose of food waste properly to keep the facility free of rodents, mosquitoes, and other arthropods. Check and treat animals entering the veterinary facility for vector parasites.

Other environmental controls: Use the employee break room or designated area for eating, drinking, smoking, application of make-up, and similar activities. These activities should not occur in animal-care areas or in the laboratory. Do not keep food or drink for human consumption in the same refrigerator as food for animals, biologics, or laboratory specimens. Dishes for human use should be washed and stored away from animal-care and animal food preparation areas.

OCCUPATIONAL HEALTH

Infection control and employee health management: The following personnel are
responsible for development and maintenance of the practice's infection control policies
record keeping, and management of workplace exposure and injury incidents.
Staff responsible:

Record keeping: Current emergency contact information will be maintained for each employee. Records will be maintained on vaccinations, rabies virus antibody titers, and exposure and injury incidents. Changes in health status (eg, pregnancy) that may affect

work duties should be reported to and recorded by the office manager so that accommodations may be made.

Pre-exposure rabies vaccination: All staff with animal contact must be vaccinated against rabies, followed by periodic titer checks and rabies vaccine boosters, in accordance with the recommendations of the Advisory Committee on Immunization Practices (CDC, 2008).

Tetanus vaccination: Tetanus immunizations must be up-to-date. Report and record puncture wounds, animal bites, and other animal-related trauma. Consult a health-care provider regarding the need for a tetanus booster.

Influenza vaccination: Veterinary personnel are encouraged to receive the current seasonal influenza vaccine. The CDC website and healthcare consultation will be used for guidance (www.cdc.gov).

Documenting and reporting exposure incidents: Report incidents that result in injury or potential exposure to an infectious agent to: ______ Information will be collected for each exposure incident using OSHA forms 301, 300, 300A. Incident reporting includes documenting date, time, location, person(s) injured or exposed, vaccination status of injured person(s), other persons present, description of the incident, whether health-care providers and public health authorities were consulted, the status of any animals involved (eg, vaccination history, clinical condition, and diagnostic information), first aid provided, and plans for follow-up.

Staff training and education: Infection control and hazard awareness training and education will be documented in the employee health record.

Pregnant and immunocompromised personnel: Pregnant and immunocompromised employees are at increased risk from zoonotic diseases. If you are concerned that your work responsibilities may put you at increased risk, inform: ______ so that preventive measures may be taken (such as increased use of PPE) and other accommodations may be made. Consultation between the supervising veterinarian and a health-care provider may be needed.

The following information is attached to the Infection Control Plan:

- Emergency services telephone numbers—fire, police, sheriff, animal control, poison control, etc
- Reportable or notifiable veterinary diseases and where to report
- State Department of Agriculture or Board of Animal Health contact information and regulations
- State and local public health contacts for consultation on zoonotic diseases
- Public Health Laboratory services and contact information
- Environmental Protection Agency (EPA)-registered disinfectants
- Occupational Safety and Health Administration (OSHA) regulations
- Animal waste disposal and biohazard regulations
- Rabies regulations

- Animal control and exotic animal regulations and contacts
 Other useful resources