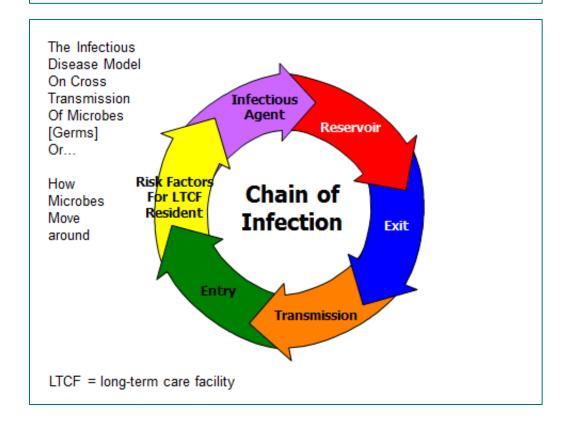
D. Education Module 2 - Chain of Transmission of Infection

INFECTION PREVENTION

TIP Study Module 2: The Chain of Transmission of Infection Ruth Anne Rye, RN, BS, CIC; Russell Olmsted, MPH, CIC

Mody L, et al. JAMA Intern Med 2015; 175(5):714-723



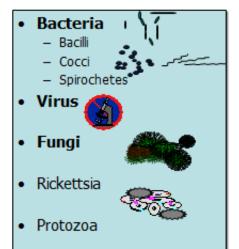
The Chain of Infection

- Each link represents a component or element in the cycle, and <u>must</u> be present in sequential order for infection transmission to occur.
- Understanding the characteristics of each link and the relation to the other links is important to determine interventions and strategies to break the chain and prevent infection.
- Breaking the chain of infection is the responsibility of every healthcare professional.



1. The Infectious Agent or Microbe

- Exogenous flora: from outside the body
 - Example: bacteria =
 methicillin-resistant
 Staph. aureus
 [MRSA] is carried to
 the resident via
 hands of healthcare
 workers (HCW)
- Endogenous flora: from inside or on the body





2. The Reservoir

- Place where microbe (germ) grows and reproduces
 - Humans: Resident's own microbial flora transient (temporary) or resident (more permanent)
 - · Other sources: healthcare workers, family, visitors
 - · Animals: pet therapy program
 - Environment: (food, beverages, soil, healthcare equipment)
 - Contaminated
 - Handling
 - Storage

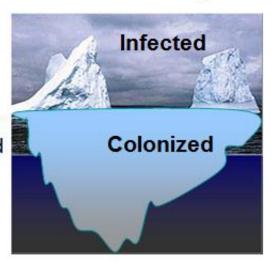






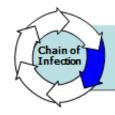
The "TIP" of the Iceberg

- This iceberg represents colonization versus infection.
- Residents may carry organisms that could be transferred to another person, even if they do not show signs or symptoms of infection



Colonized or Infected What is the Difference?

- <u>Colonization</u>: bacteria is present without evidence of infection (e.g. fever, increased white blood cell count)
- <u>Infection</u>: active process where the bacteria is causing damage to cells or tissue;
 - example purulent drainage from an open wound on the resident's skin.
 - UTI: resident has new fever and complains of burning pain when urinating plus frequency and urgency
- If an infection develops, it is usually from bacteria that colonize residents, e.g. their endogenous microbial flora, but can also be an exogenous source, e.g. transmitted by hands of HCW
- ~ Bacteria can be transmitted even if the resident does not have an active infection ~



3. The Mode of Exit

- Microbe leaves the Reservoir
 - Respiratory tract
 - Cough, sneeze, talking
 - Gastrointestinal tract
 - · vomitus, feces
 - · Skin, mucous membranes
 - · Genitourinary tract
 - Urine, semen, vaginal secretions
 - · Blood: from a cut through the skin or contaminated needle
 - Artificial openings, e.g. tracheostomy or feeding tube inserted through the skin



4. Mode of Transmission

- Contact
 - Direct
 - · Indirect
- Droplet
- Airborne







- · Other sources of infection
 - · Example: food-borne from contaminated food



5. The Mode of Entry

- Infectious agent enters the new host (resident)
 - · Respiratory tract
 - · Breathing contaminated air droplets
 - · Gastrointestinal tract
 - · Eating, drinking, hand-to-mouth (fecal-oral route)
 - · Skin, mucous membranes
 - Non-intact skin
 - · Hand-to-eye and nose
 - · Genitourinary tract
 - Urinary catheter is present; bacteria move up catheter into the bladder
 - Blood
 - · Contaminated lancet used for blood glucose







6. Resident Risk Factors

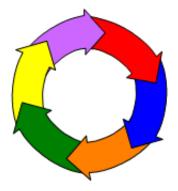
They increase risk for infection

- Functionally dependent: resident needs lots of help with activities of daily living
- Immune system: e.g. does not work as well as one gets older.
- · Barrier Compromised:
 - · Fragile skin: tear, burn injury, chronic wound
 - · Device use: indwelling urinary catheter (Foley); feeding tube
- · Additional factors:
 - · Admission to acute care hospital
 - · Antibiotic use





Breaking the Chain

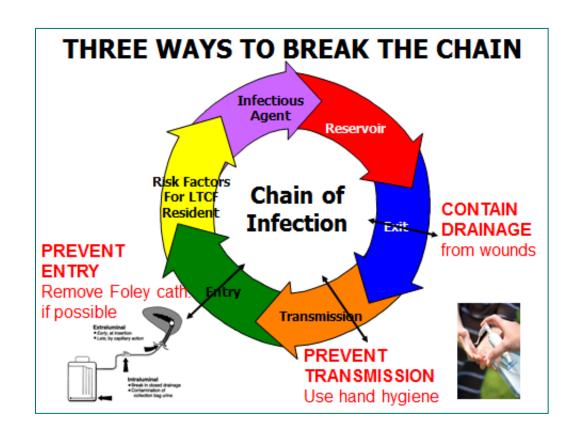


Preventing Cross Transmission & Infection

Example: A Completed Chain of Cross Transmission & Infection

- <u>Infectious agent</u> methicillin-resistant Staphylococcus aureus (MRSA)
- · Reservoir skin
- · Exit open, draining wound on Resident A
- <u>Transmission</u> HCW picks up MRSA on hands & does not use hand hygiene before contact with Resident B
- Entry HCW contaminates indwelling urinary catheter tubing during manipulation of catheter... MRSA ascends to meatus and then into the bladder
- · Resident risk factor: indwelling urinary catheter
- Infection: UTI develops in Resident B

Chain is complete - how can we break this chain?



Targeted Infection Prevention (TIP) Program Module 2: The Chain of Transmission of Infection

PR	E/POST-TEST DATE:
Ple	ease check <u>one</u> answer for each of the following questions.
1.	The best way to break the chain of infection and prevent transmission of infections is:
2.	Microbes (germs) can exist on a person, in food, or on contaminated equipment. True False
3.	Most resident infections are acquired through airborne transmission. True \Box False \Box
4.	Colonization is bacteria (germs) that are present but do not cause signs of symptoms of an active infection. True \Box False \Box
5.	A risk factor that puts residents at higher risk for an infection is a(n): a. Dependence on nurse aides for activities of daily living b. Immune system not working properly c. Skin that is easily cut or bruised d. Recent admittance to an acute care hospital e. All of the above
6.	Each link in the infectious disease model or chain of infection must be present for transmission to occur. True False

7. Infection prevention and breaking the chain of infection is the		
responsibility of:		
a. Administration		
☐b. Physicians		
\Box c. Nurses		
☐d. Every employee		
8. An infectious agent (microbe or germ) can leave a resident (Mode of Exit) in a body fluid; for example in urine, stool, or wound drainage. True False		
9. One way an infectious agent can enter a resident (Mode of Entry) is through or around an indwelling urinary (Foley) catheter. True False		

Module 2: PRE/POST-TEST ANSWER KEY 1. The best way to break the chain of infection and prevent transmission of infections is: **☑**a. Using proper hand hygiene **」b.** Wearing gloves \rfloor c. Getting a flu shot \rfloor d. Disinfecting dinner tables 2. Microbes (germs) can exist on a person, in food, or on contaminated equipment. True 🗷 False 3. Most resident infections are acquired through airborne transmission. False 🗶 True 🗀 4. Colonization is bacteria (germs) that are present but do not cause signs or symptoms of an active infection. True 🗷 False 5. A risk factor that puts residents at higher risk for an infection is a(n): \square a. Dependence on nurse aides for activities of daily living **□**b. Immune system not working properly \bigsqcup c. Skin that is easily cut or bruised oxedged. Recent admittance to an acute care hospital **E**e. All of the above 6. Each link in the infectious disease model or chain of infection must be present for transmission to occur. True 🗷 False 7. Infection prevention and breaking the chain of infection is the responsibility of: a. Administration 」b. Physicians

」c. Nurses

⊠d. Every employee

8.	An infectious	agent (microbe or germ) can leave a resident (Mode of Exit)	
	in a body fluid	d; for example in urine, stool, or wound drainage.	
	True 🗷	False	
9.	One way an infectious agent can enter a resident (Mode of Entry) is		
	through or around an indwelling urinary (Foley) catheter.		
	True 🗷	False	