# **Model Infection Control Plan for Veterinary Practices, 2008**

## 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 Web site (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**: Wash hands before and after each patient encounter and after contact with feces, blood, body fluids, secretions, excretions, exudates, or articles contaminated by these substances. Wash hands before eating, drinking, or smoking; after using the toilet; after cleaning animal cages or animal-care areas; and whenever hands are visibly soiled. Alcohol-based rubs may be used if hands are not visibly soiled, but hand washing with soap and running water is preferred. Keep fingernails short. Do not wear artificial nails or hand jewelry when handling animals. Keep hand-washing supplies stocked at all times.

Staff responsible: \_\_\_\_\_

### **Correct hand-washing procedure:**

- Wet hands with running water
- Place soap in palms
- Rub hands together to make a lather
- Scrub hands vigorously for 20 seconds
- Rinse soap off hands
- Dry hands with disposable towel
- Turn off faucet using the disposable towel as a barrier

Use of gloves and sleeves: Gloves are not necessary when examining or handling normal, healthy animals.

Wear gloves or sleeves when touching feces, blood, body fluids, secretions, excretions, exudates, and non-intact skin. Wear gloves for dentistry, resuscitations, necropsies, and

obstetrical procedures; when cleaning cages, litter boxes, and contaminated environmental surfaces and equipment; when handling dirty laundry; when handling diagnostic specimens (eg, urine, feces, aspirates, or swabs); and when handling an animal with a suspected infectious disease. Change gloves between examination of individual animals or animal groups (eg, a litter of puppies) and between dirty and clean procedures performed on the same patient. 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**: Wear facial protection whenever exposure to splashes or sprays is likely to occur. Facial protection includes a surgical mask worn with goggles or a face shield. Wear facial protection for the following procedures: lancing abscesses, flushing wounds, dentistry, nebulization, suctioning, lavage, obstetrical procedures, and necropsies.

**Protective outerwear**: Wear a protective outer garment such as a lab coat, smock, non-sterile gown, or coveralls when attending animals and when conducting cleaning chores. These should be changed whenever soiled, after handling an animal with a known or suspected infectious disease, after working in an isolation room, and after performing a necropsy or other high-risk procedure. Shoes or boots should have thick soles and closed toes and be impermeable to water and easily cleaned. Disposable shoe covers should be worn when heavy quantities of infectious materials are present or expected. Impermeable outwear should be worn during obstetric procedures and necropsies and whenever substantial splashes or large quantities of body fluids may be encountered. Keep clean outer garments available at all times. Staff responsible:

**Bite and other animal-related injury prevention**: Take precautions to prevent bites and other injuries. Identify aggressive animals and alert clinic staff. Use physical restraints, muzzles, bite-resistant gloves, and sedation or anesthesia 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 incident to:	· · ·
•□□□□If medical attention is needed contact:provider)	(health-care
•□□□□Bite incidents will be reported to:agency) as required by law. Telephone number:	(public health

#### PROTECTIVE ACTIONS DURING VETERINARY PROCEDURES

**Intake**: Avoid bringing aggressive or potentially infectious animals in through the reception area. If they must come through the main entrance, if possible, carry the animal or place it on a gurney so that it can be taken directly into a designated examination room.

**Examination of animals**: Wear appropriate protective outerwear, and wash hands before and after examination of individual animals or animal groups (eg, a litter of puppies). Potentially infectious animals will be examined in a designated examination room and remain there until diagnostic procedures and treatments have been performed.

**Injections, venipuncture, and aspiration procedures**: Wear gloves while performing venipuncture on animals suspected of having an infectious disease and when performing soft tissue aspirations.

**Needlestick injury prevention**: Do not recap needles except in rare instances when required as part of a medical procedure or protocol. Do not remove an uncapped needle from the syringe by hand or place a needle cap in the mouth. Dispose of all sharps in designated containers. After injection of live organism vaccines or aspiration of body fluids, dispose of used syringes with attached needles in a sharps container. Otherwise, remove the needle by use of forceps or the needle removal device on the sharps container, 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, 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.

**Obstetrics**: Wear gloves or shoulder-length sleeves, facial protection, and impermeable outerwear.

Necropsy: Wear cut-resistant gloves, facial protection, and impermeable outerwear. Only necessary personnel are allowed in the vicinity of the procedure. Wear a respirator when using a band saw or other power equipment. 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:

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**Diagnostic-specimen handling**: Wear protective outerwear and gloves. Discard gloves and wash hands before touching clean items (e.g., medical records, telephone). Eating and drinking are not allowed in the laboratory.

#### ENVIRONMENTAL INFECTION CONTROL

Isolation of infectious animals: Animals with a contagious or zoonotic disease will be housed in isolation as soon as possible. Clearly mark the room or cage to indicate the patient's status, and describe additional precautions. Keep only the equipment needed for the care and treatment of the patient in the isolation room, including dedicated cleaning supplies. Disassemble and thoroughly clean and disinfect any equipment that must be taken out of the room. Discard gloves after use. Leave other personal protective equipment (e.g., gown, mask) in the isolation room for reuse. Clean and disinfect or discard protective equipment between patients and whenever contaminated by body fluids. Place potentially contaminated materials in a bag before removal from the isolation room. Use a disinfectant footbath before entering and leaving the room. 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. Monitor air pressure daily while the room is in use.

Staff responsible:	

Cleaning and disinfection of equipment and environmental surfaces: First, clean surfaces and equipment to remove organic matter, and then use a disinfectant according to manufacturer's instructions. Minimize dust and aerosols when cleaning by first misting the area with water or disinfectant. Clean and disinfect animal cages, toys, and food and water bowls between uses and whenever visibly soiled. Clean litter boxes once a day. Wear gloves when cleaning, and wash hands afterwards. There is a written checklist for each area of the facility (e.g., waiting room, examination rooms, treatment area, and kennels) that specifies the frequency of cleaning, disinfection procedures, products to be used, and staff responsible.

**Handling laundry**: Wear gloves when handling soiled laundry. Wash animal bedding and other laundry with standard laundry detergent and machine dry. Use separate storage and transport bins for clean and dirty laundry.

**Decontamination and spill response**: Immediately spray a spill or splash of blood, feces, or other potentially infectious substance with disinfectant and contain it with absorbent material (e.g., paper towels, sawdust, cat litter). Put on gloves, mask, and protective clothing (including shoe covers if the spill is large and may be stepped in) before beginning the cleanup. 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 Web site for guidance: www.epa.gov/epaoswer/other/medical.

**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 wild rodents, mosquitoes, and other arthropods.

Other environmental controls: There are designated areas for eating, drinking, smoking, application of make-up, and similar activities. These activities should never occur in animal-care areas or in the laboratory area. 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 cleaned and stored away from animal-care and animal food—preparation areas.

### EMPLOYEE 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. Report and record changes in health status (eg, pregnancy) that may affect work duties.

**Preexposure 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 vaccination must be up to date. Report and record puncture wounds and other incidents. Consult a health-care provider regarding the need for a tetanus booster.

**Influenza vaccination**: Unless contraindicated, veterinary personnel are encouraged to receive the current influenza virus vaccine. Refer to the Centers for Disease Control and Prevention Web site for guidance (www.cdc.gov).

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

<b>Documenting and reporting exposure incidents</b> : Report incidents that result in injury or potential exposure to an infectious agent to:
The following information will be collected for each exposure incident: date, time, location, person(s) injured or exposed, other persons present, description of the incident, whether a health-care provider was consulted, the status of any animals involved (eg, vaccination history, clinical condition, and diagnostic information), and plans for follow-up.
<b>Pregnant and immunocompromised personnel</b> : Pregnant and immunocompromised employees are at increased risk from zoonotic diseases. Inform:
if you are concerned about your work responsibilities, so that 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