

Section: UTMB On-line Documentation	02.27 - Policy
Subject: Healthcare Epidemiology Policies and Procedures	2.20.2025- Revised
Topic: 02.27 – Infection Control Precautions for Rehabilitation Services	1982 - Author

02.27 – Infection Control Precautions for Rehabilitation Services

Purpose	To provide the employee of the Rehabilitation Services Department with guidelines for control of infection while in contact with patients utilizing their services in both the inpatient and outpatient environment.
Audience	All UTMB employees, contract workers, volunteers, and students in the Rehabilitation Services Department
Standard Precautions/ Hand Hygiene	<ul style="list-style-type: none"> Personnel shall adhere to the departmental dress code and the dress code of the hospital. Uniforms soiled by blood and/or body fluids must be spot cleaned or changed immediately. Standard Precautions (See HCE policy 01.32 Exposure Control Plan) policy shall be followed for all patients and for any and all contact with blood and body fluids. Hand hygiene shall be performed before and after each patient contact and after the removal of gloves (see HCE policy 01.14 Hand Hygiene for All Healthcare Workers). All cuts and lacerations shall be covered with a waterproof dressing. Isolation supplies shall be available at all times in cabinets marked with personal protective equipment (PPE) signs. Eating and drinking shall be confined to non-patient care areas.
Patient/Visitor/HCW with Infections	<ul style="list-style-type: none"> Personnel shall comply with the Employee Health guidelines for their area. Personnel with suspected or documented infections or exposure to infectious or communicable diseases shall be reported to the Employee Health Center or Healthcare Epidemiology immediately. A decision shall be made regarding patient contact in the event of documented infection, for example: <ul style="list-style-type: none"> Patient contact allowed with protective measures such as the use of gown, gloves, or mask. Transfer out of immediate area to care for patients at less risk of acquiring the infection. No patient contact allowed. Visitors shall abide by the hospital rules for the area. Traffic shall be monitored and kept to a minimum. Visitors with colds or other obvious signs of infection shall be restricted upon entering until certain precautions specific to their infection can be implemented, (i.e., a visitor with a cold would don a mask before entering and would wash his/her hands thoroughly prior to touching the patient or his/her surroundings). Family members or persons caring for infected patients shall be instructed in the proper care of the patient so that the infection is not transmitted.
Equipment/	<ul style="list-style-type: none"> There shall be a routine schedule for cleaning mats, tabletops, exercise equipment, gait devices, wheelchairs and/or other equipment. All equipment

Section: UTMB On-line Documentation	02.27 - Policy
Subject: Healthcare Epidemiology Policies and Procedures	2.20.2025- Revised
Topic: 02.27 – Infection Control Precautions for Rehabilitation Services	1982 - Author

Materials	<p>shall be disinfected daily, or when soiled, with an EPA-registered tuberculocidal (hospital-grade) disinfectant.</p> <ul style="list-style-type: none"> • Treatment tables shall be covered prior to patient use and shall be cleaned with an EPA-registered tuberculocidal (hospital-grade) disinfectant between each use, and when soiled with a patient's blood, or other body fluids. • All personnel shall follow posted isolation precautions when treating a patient at the bedside. Items to be used during treatment shall be disinfected immediately after removal from patient's room at the end of therapy session. • All disposable single use items shall not be reused or reprocessed. Non-disposable bandage scissors shall be disinfected with 70-90% isopropyl alcohol. • Stethoscopes shall be wiped with a 70-90% isopropyl alcohol between each patient contact. • All clean and sterile supplies shall be stored on shelves or placed on pallets at least 8-10" off the floor. Clean and sterile supplies shall be dust-free. Clean and dirty supplies shall always be separated.
General Cleaning	<ul style="list-style-type: none"> • Gloves shall be worn when cleaning items contaminated with blood, or other body fluids. • All soiled dressings shall be bagged and disposed of immediately at the location where they were removed. Dressings saturated or dripping with blood or bloody body fluids shall be discarded into a red plastic biohazard bag. • Care shall be taken to prevent splashing or splattering of blood and other body fluids. • Eating and drinking shall be confined to designated areas. • All patient supplies shall be labeled with patient's name, kept separate, and used only on that patient. Sterile technique shall be used when applying creams, medications or dressing applications. After 24 hours, opened bottles of saline and water shall be discarded. After each use, the outside of the jars of cream and ointments shall be wiped clean.
Medications and Supplies	<ul style="list-style-type: none"> • Expiration dates on sterile supplies and medications shall be checked daily. • All refrigerators containing patient care items shall contain thermometers. Opened food containers for patient use shall be marked and discarded within 48 hours. The temperature shall be checked and recorded daily (see policy: Care of Refrigerators and Freezers).
Pulse Lavage	<ul style="list-style-type: none"> • All Pulsed lavage tips and guns are sterile and prepackaged and are intended for one time use. • Set up for performing jet lavage at bedside includes donning gown, goggles and sterile gloves prior to treatment