

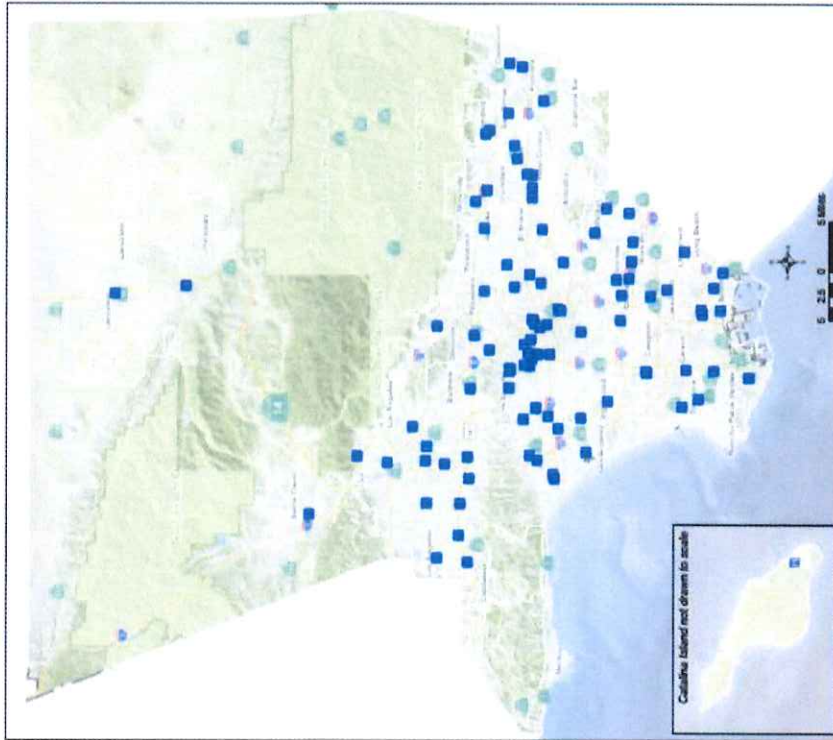
We're All in This Together! How Collaboration between APIC Chapters and Public Health Departments Can Reduce MDRs for Hospitals and LTACs

Patricia Marquez, MPH, CIC
 Jessica Silvaggio, MPH, CIC
 Angela Vassallo, MPH, MS, CIC, FAPIC
 Mary Virgallito, RN, MSN, CIC



Los Angeles Acute Care Facilities are Dynamic and Spread Out

Acute Care Hospitals in Los Angeles County



APIC Greater Los Angeles: Chapter 003

- Approximately 150 members
- One of 12 APIC chapters in California
- Chapter Strategic Goals of Engagement and Collaboration



Building Bl

Greater Los A

Outcome 3: Develop an Inter-facility Transfer Form

- Purpose: To foster and improve communication during the transfer of care regarding MDROs, symptoms, isolation precautions, antimicrobial treatment, transferring facility contact information
- The form was piloted among acute care facilities with frequent transfers to skilled nursing facilities within the Westside of Los Angeles
- Emergency Medical Services is supportive and has agreed to also use the form
- The focus is on enhancing communication and less on the form itself

Inter-fa



Patient Name (Last, First): _____
Date of Birth: _____
Receiving Facility Name: _____
Currently in Isolation If Yes, check: <input type="checkbox"/> Contact <input type="checkbox"/> On Check all PPE (personnel): <input type="checkbox"/> <input type="checkbox"/>
Does the patient have other lab results for which include any infectious diseases? <input type="checkbox"/> C. difficile <input type="checkbox"/> CRE (Carbapenem-resistant Enterobacter or E. coli) <input type="checkbox"/> MDR gram negatives <input type="checkbox"/> ESBL (extended-spectrum beta-lactamase) <input type="checkbox"/> VRE (vancomycin-resistant) <input type="checkbox"/> MRSA (methicillin-resistant) Other: _____ Such as: lice, scabies, etc.
Organisms
Please include lab results with dates, and any additional information.
CONTACT INFORMATION Sending Facility Name: _____ Contact Name: _____
Contact Signature: _____

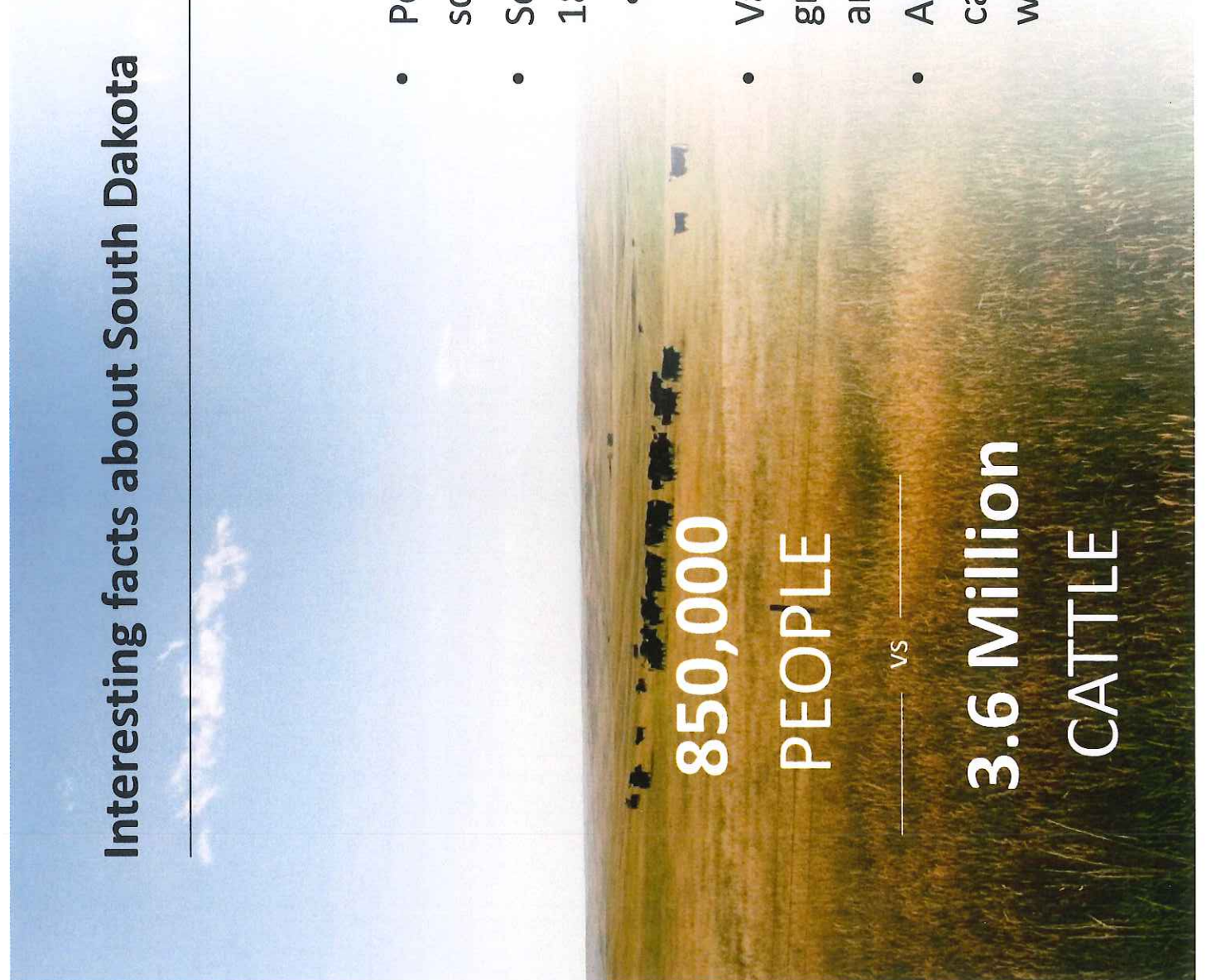
Approved by the LA County Health



Prezi

Interesting facts about South Dakota

- Population average = 10 per square mile
- Settled by pioneers in the late 1800s
 - Previously inhabited by Native American tribes
- Vast, rolling prairie and grasslands; fertile farmland; and glacial lakes
- Agriculturally based economy: cattle, hay, corn, soybeans, wheat and sunflowers

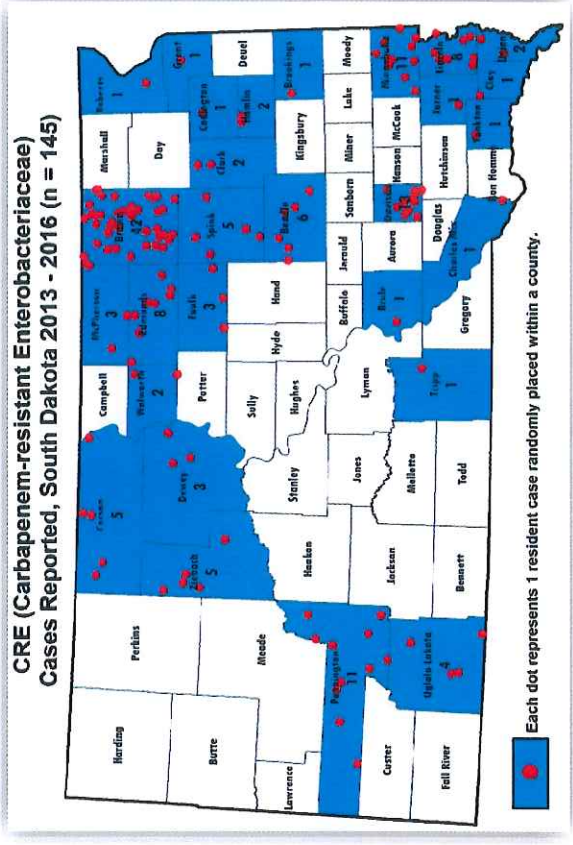
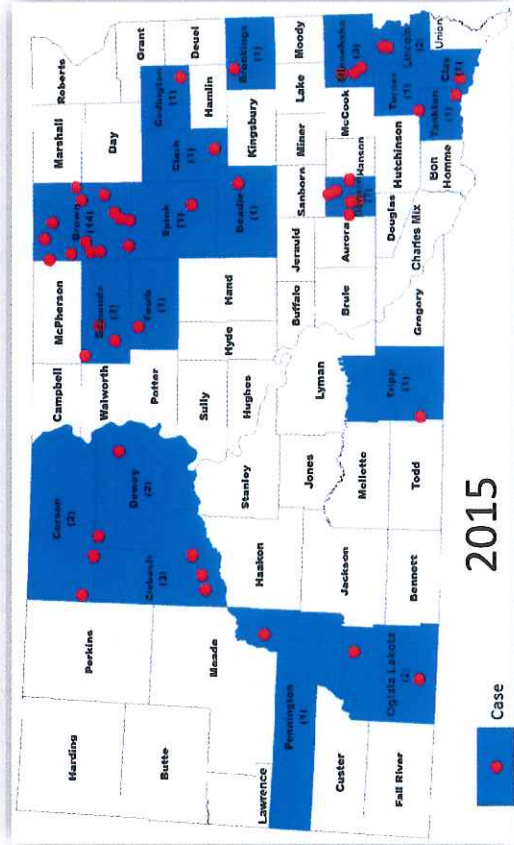


850,000
PEOPLE

VS

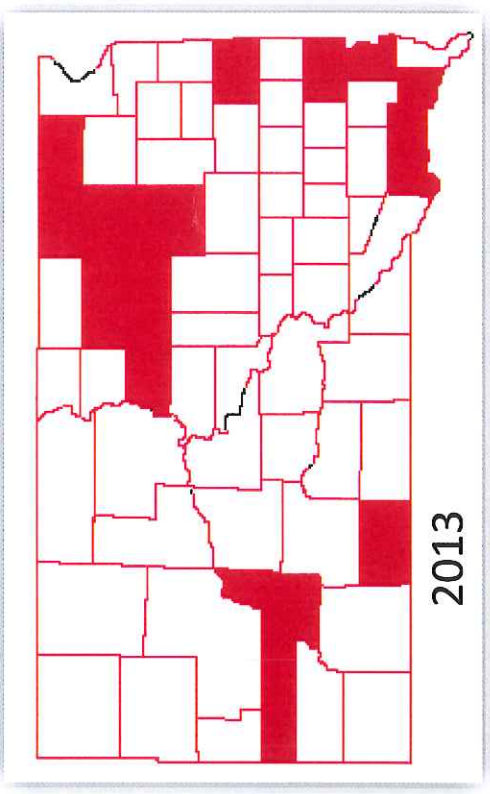
3.6 Million
CATTLE

CRE Distribution



CRE (Carbapenem-resistant Enterobacteriaceae) Cases Reported, South Dakota 2013 - 2016 (n = 145)

Each dot represents 1 resident case randomly placed within a county.



South Dakota Inter-facility Infection Control Transfer Form
Please use this form when transferring a patient with Carbapenem-resistant Enterobacteriaceae (CRE)

This form must be filled out for transfer to accepting facility with information communicated prior to or with transfer.
Please attach copies of latest culture reports with susceptibilities if available.

Sending Healthcare Facility:

Patient/Resident Last Name	First Name	Date of Birth	Medical Record No.
Name/Address of Sending Facility		Sending Unit	Sending Facility Phone
Sending Facility Contacts Case Manager/Admin/SW	Name	Phone	E-mail
Infection Prevention			

Is the patient currently in isolation? No Yes

Type of isolation (check all that apply) Contact Droplet Airborne Other: _____

Does patient currently have an infection, colonization OR a history of positive culture of a multidrug-resistant organism (MDRO) or other organism of epidemiological significance? **Include Colonization or history Check if YES**

Carbapenem-resistant Enterobacteriaceae (CRE)

Clostridium difficile (Cdiff)

Methicillin-resistant Staphylococcus aureus (MRSA)

Vancomycin-resistant Enterococci (VRE)

Acinetobacter (Multi-drug resistant)

E coli, Klebsiella, Proteus etc. w/Extended Spectrum B-Lactamase (ESBL)

Pseudomonas aeruginosa (CRE ESBL)

Does the patient/resident currently have any of the following?

Cough or requires suctioning

Diarrhea

Vomiting

Incontinence of urine or stool

Open wounds or wounds requiring dressing change

Drainage (source) _____

Central line/PICC (Approx. date inserted) / /

Hemodialysis catheter

Urinary catheter (Approx. date inserted) / /

Suprapubic catheter

Percutaneous gastrostomy tube

Tracheostomy

SD Department of Health

June 14-16 · Portland, OR

APIC 2017

#APIC2017

