

Infection control essay

[Health & Medicine](#), [Nursing](#)



Reflection is a useful tool which health care refashions use to improve their skills and advance their future practice by revisiting scenarios that occurred and exploring why something happened, whether it could be improved in any way or to recognize good practice Capper & Roster, 2013); In accordance to The Code (NC, 2008) which dictates that all patient information should be kept confidential, and the Data protection Act (1998) which also governs that patient information should be kept secure and released to only those necessary or to who the patient shares it with; All patient details will be kept private and the tenant is referred to only as the patient. During a surgical procedure in theatre the MRS. protocol was being followed. However during the procedure a Doctor left the theatre and then tried to re enter the preparation room, the “ clean” circulating nurse did not allow this and informed the doctor to change scrubs and wash their shoes straight away. A full description of the scenario is attached as Appendix 1. The nurse was trying to minimize risk of cross infection as clothing and footwear could be contaminated by surfaces (Kumar, Saunders & Watson, 2000). The student nurse needs to have a good understanding of MRS.

, protocols and research and evidence based approaches to deliver safe and appropriate care whilst minimizing risk of cross infection. Nonmetallic-resistant Staphylococcus erasures (MRS.) is a bacterium that is resistant to a number of antibiotics that treat infection including nonmetallic. There are different strains of Staphylococcus erasures making it harder or easier to treat. MRS. can live in the nostrils or on skin and is easily transferred from person to person or surface by contact, it can also be dispersed by skin particles through the air (McNeil, Moody &Bradley, 2002), contaminating

beds and surfaces (Kumar, Saunders & Watson, 2000) and can remain active for longer than 6 months (Wagoner, Columbians & Ponders, 2000).

This is why hand hygiene and environmental cleanliness is so important (Crowfoot, 1996). The bacterium can enter the bloodstream through small cuts or a wound; Depending on individuals' immune system people can fight off lower strains of MRS. with minimal infection symptoms such as pain, temperature, dizziness etc. However people with lowered immune systems I. E.

People in hospital with existing lath complaints or infections can be harder to treat (Dougherty , 2004). MRS. is a virulent pathogen and when it doesn't respond to treatment can cause sepsis, urinary tract infections, indoctrinations, pneumonia, septic arthritis, storytelling and can even result in death (Weight, 2007).

During theatre procedure the same source isolation nursing that is used on the wards is used in theatres nursing that is used on the wards (NASH, 2012). SST George's Hospital (NASH SST Georges Trust, 2012) theatre policy outlines during theatre and recovery staff numbers should e kept to a minimum, all unnecessary equipment should be removed from theatre, staff should wear protective clothing and a plastic gown, after the procedure all equipment and surfaces should be cleaned and patients should be nursed using source isolation practices. (Dougherty & Leister, 2004) Source isolation aims to keep the source of infection from spreading anywhere by means of hand washing, washing, protective clothing and incineration of all disposable waste in a controlled manor. The National Institute for clinical excellence also

highlighted the importance of source isolation regarding MRSA, discussing its negative impacts on health ranging from discomfort to serious disability or death.

(NICE, 2011) in 2009/10 the NHS dealt with almost 1900 bloodstream infections, each infection cost the NHS around £1000. The aim in following guidelines is to protect patients, protect staff and to protect the environment for the next patient who will enter the theatre having an operation (Dougherty & Leister, 2004).