

# **OUTPATIENTCLINICSA POTENTIAL HAZARD**

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## ABSTRACT

### OUTPATIENT CLINICS: A POTENTIAL HAZARD

**Background:** Healthcare acquired infections are no longer confined to the hospital environment. Recently, many reported outbreaks have been linked to outpatient settings and attributed to non-adherence to recommended infection-prevention procedures.

**Methods:** Assessment of the potential risk of outpatient clinics towards the community was done through; 1. Assessment of doctors' and nurses' knowledge and compliance with Standard Precautions (SP) by using a self-administered questionnaire. 2. Assessment of environmental cleaning (EC) and reusable medical equipment disinfection using aseptic swabbing method. The extent of any growth was recorded according to the suggested standards; **A.** Presence of indicator organisms, with the proposed standard being  $<1$  cfu/cm<sup>2</sup>. These include *S. aureus* (including *MRSA*), *VRE* and various multidrug resistant Gram-negative bacilli. **B.** Aerobic colony count (ACC), the suggested standard is  $<5$  cfus/cm<sup>2</sup>. The impact of health education intervention on cleaning and disinfection was evaluated by comparing the difference in cleaning level before and after interventional education.

**Results:** Good knowledge and compliance scores were found in more than 50% of participants. Screening found poor EC and equipment disinfection levels. In addition, 67% and 83.3% of stethoscopes and ultrasound transducers, respectively, were contaminated with indicator organisms. Prevalence of *MRSA* was 38.8% among *S. aureus* isolates before intervention with significant reduction after intervention ( $P<0.05$ ).

**Conclusion:** Proper compliance of healthcare personnel (HCP) was associated with good knowledge. Development and monitoring the implementation of infection prevention policies and training of HCP is recommended.

