Advancing Infection Control Capacity & Education (ACE): Coaching to Certification

Session 6: Identification of Infectious Disease Process Part 5

Precautions and Bioterrorism agents

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Oregon Health Authority

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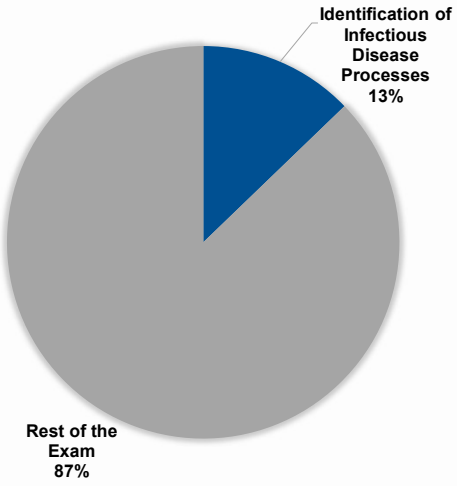
Objectives



- Interpret the relevance of diagnostic and laboratory reports
- Identify appropriate practices for specimen collection, transportation, handling, and storage
- Correlate clinical signs and symptoms with infectious disease process
- Differentiate between colonization infection and contamination
- Differentiate between prophylactic empiric and therapeutic uses of antimicrobials

*22 questions out of 150 questions on the CIC exam
Why is this topic relevant to competent IPC practice?

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Q1: Laminar airflow (LAF) rooms are recommended for patients with:

a. Ebola
b. AIDS
c. Tuberculosis
d. Bone marrow transplant

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Q2: Patients undergoing bronchoscopy should be screened for symptoms of:

a. asthma
b. HIV/AIDS
c. diabetes
d. tuberculosis

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Q3: Airborne precautions apply to airborne particles that are less than or equal to:

a. 10 micrometers
b. 8 micrometers
c. 5 micrometers
d. 3 micrometers

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Q4: The most common type of transmission of infectious organisms in the healthcare facility is:

a. common source/vehicle
b. droplet
c. airborne
d. contact

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Q5: An example of common source/vehicle transmission of pathogenic organisms is:

a. use of contaminated multi-dose vial of medication
b. colonized nurse spreading bacteria
c. increased infections from urinary catheterization
d. increased postoperative infections on two units

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Q6: Standard precautions apply to which of the following?

I. Blood
II. Sweat
III. Sputum
IV. Intact Skin

a. I and II only
b. I and III only
c. I, II, and III only
d. I, III, and IV only

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Q7: Negative pressure rooms should have how many air exchanges per hour?

a. 20-34
b. 17-20
c. 12-16
d. 6-12

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Q8: Plans to respond to acts of terrorism involving release of biologic agents should include which of the following?

I. Developing a phone/email tree to notify all necessary staff and public health officials
II. Stockpiling adequate PPE and respirators
III. Developing procedures for handling of deaths
IV. Establishing procedures for monitoring for air and water contamination

a. I and II only
b. I, III, and IV only
c. I, II, and IV only
d. I, II, III, and IV only

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Q9: When developing a disaster plan to deal with a widespread bioterrorism attack of inhalational anthrax, one of the most important components is knowing the location of:

a. Members of the healthcare team
b. Public health department
c. Points of dispensing
d. State disaster preparedness agency

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Q10: Which of the following bioterrorism agents has the highest fatality rate?

a. Q fever
b. Ricin
c. Smallpox
d. Severe acute respiratory syndrome

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Q11: You have been notified that a possible smallpox patient has been identified in your community. The patient is being admitted directly to your facility. What type of precautions should your personnel take when caring for this patient?

a. Airborne isolation with negative pressure ventilation
b. Resistant organism precautions
c. Airborne isolation with positive pressure ventilation
d. Droplet precautions

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Q12: Of all the common types of agents used for bioterrorism, one type is transmitted to others primarily by contaminated food/water. Which agent is this:

a. Tularemia
b. Cholera
c. Q fever
d. Anthrax

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Q13: The CDC has categorized bioterrorism agents according to priority. A disease that meets the criteria listed under Category B is:

a. Anthrax
b. Typhus
c. Hantavirus
d. Measles

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Q14 : In 1984, 751 people suffered food poisoning in The Dalles, Oregon, United States, due to the deliberate contamination of salad bars at ten local restaurants with *Salmonella*. The incident was the first and is still the single largest bioterrorist attack in U.S. history. Which category does this meet criteria?

a. Category A
b. Category B
c. Category C
d. Category X

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Q15 : What are the four key principles of emergency management?

a. Rescue, Alarm, Confine, Evacuate
b. Mitigation, Preparedness, Response, and Recovery.
c. Autonomy, Beneficence, Justice, and Non-maleficence
d. Prevention, Detection and Communication, Occupant Protection, Containment

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Q16: In investigating an epidemic, cases should be categorized according to:

a. agent, host, and environment
b. agent, host, and date of onset
c. time, person, and date of onset
d. time, place, and person

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Resources

- CDC: Pink Book
  https://www.cdc.gov/vaccines/pubs/pinkbook/chapters.html

- APIC Text

  Chapter 27:
  Hand Hygiene

  Chapter 28:
  Standard Precautions

  Chapter 29:
  Isolation Precautions (Transmission-based Precautions)

  Chapter 122:
  Infectious Disease Disasters: Bioterrorism, Emerging Infections, and Pandemics

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Next Steps/Homework

- **Got Questions?** Join us for Office Hours every Thursday at 1:00pm PT

- **Missed a session or want to review the material again?**
  Access Padlet Resource Library

Padlet Link:
OR ACE Program Padlet

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Contact Us

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