

PREVENT INFECTION

Effective implementation of hygienic measures is essential to prevent and contain the transmission of nosocomial infections to animals and humans both within veterinary settings and in the community.

FECAVA Key Recommendations for Hygiene and Infection Control in Veterinary Practice

<p>CLEAN AND DISINFECT HANDS</p> <p>Proper hand hygiene is key in the control of nosocomial infections in practice.</p> <p>WASH HANDS Using water and pH friendly, non-medicated soap</p> <ul style="list-style-type: none"> At the start and end of the working day. After visiting the toilet. Before and after eating or smoking. When visibly soiled. After handling animal fluids and excretions. Before aseptic or invasive procedures in combination with disinfection. <p>DISINFECT HANDS (use alcohol-based hand sanitizers (prEN 1500 Compliant))</p> <ul style="list-style-type: none"> That are dry and clean. Before and after handling each patient. Before and after gloving. Before touching equipment, door handles and keyboards. <p>No jewelry (rings, bracelets), wristwatches, nail polish or fake nails should be worn. Nails should be kept short and clean.</p> 	<p>WEAR PROTECTIVE CLOTHING</p> <p>Use dedicated hospital clothing and do not handle animals in private clothes. To ensure that hands and forearms can be kept clean short-sleeved lab coats or scrubs should be worn at all times when handling patients. Protective clothing should not be worn outside the working environment or dedicated areas.</p> <p>ADDITIONAL PROTECTIVE CLOTHING Masks, hair caps, sterile gowns and gloves should be used for surgical and invasive procedures.</p> <p>Plastic aprons, gloves and masks are required when handling:</p> <ul style="list-style-type: none"> Patients with known or suspected contagious disease. Potentially contaminated fluids and secretions. <p>Change the additional protective clothing:</p> <ul style="list-style-type: none"> Between patients. When moving between wards, isolation and intensive care units. 	<p>CLEAN AND DISINFECT PREMISES</p> <p>Use approved cleaning products and disinfectants for veterinary premises and follow label instructions. Use gloves. For equipment, follow the recommendations from the manufacturers.</p> <p>SURFACES AND EQUIPMENT</p> <ul style="list-style-type: none"> Clean and disinfect before and after each patient and when visibly soiled or contaminated. Clean and disinfect door handles, keyboards, light switches, phones, anaesthetic monitors on a daily / regular basis. <p>COMMON AREAS (ENTRANCES, RECEPTION, WAITING ROOMS AND CORRIDORS)</p> <ul style="list-style-type: none"> Clean and disinfect daily and when visibly soiled or contaminated. <p>WARDS, ISOLATION AND INTENSIVE CARE UNITS</p> <ul style="list-style-type: none"> Clean and disinfect before and after each patient and when visibly soiled or contaminated. Consider fumigation/disinfection on a regular basis 	<p>TRAIN ALL STAFF / TRIAGE STAFF</p> <p>TRAIN ALL STAFF Train and encourage all staff to understand and comply with good hygiene practices. Correct hygiene is not difficult if everyone is aware of its importance.</p> <ul style="list-style-type: none"> Develop written hygiene protocols (display prominently) and appoint a member of staff with responsibility for promoting and enforcing hygiene practices. Establish thorough in-house training of staff and encourage attendance at continuing education courses on hygiene. Establish an in-house cleaning and disinfection routine with rotation of areas to keep whole hospital clean <p>TRIAGE STAFF</p> <ul style="list-style-type: none"> Provide separate kennels for infectious and elective patients. Be particularly attentive to dermatology cases Distant site infections are a major risk factor for surgical site infections. Treat animals affected with skin diseases or that have distant wounds before performing elective surgeries 
<p>USE GLOVES</p> <ul style="list-style-type: none"> When handling diseased or carrier animals with known or suspected contagious diseases, including parasitic infestations. When handling animals with known or suspected antimicrobial resistant infections. When handling all wounds. When contact with blood, body fluids, secretions, excretions and mucous membranes is possible. During surgery or when asepsis is required (double gloving during draping. Use sterile gloves). Change gloves between each individual patient and when visibly contaminated. Change gloves when moving from dirty to clean procedures on the same patient. Change gloves before touching equipment, door handles and keyboards. <p>Clean hands before and after glove wear. Wearing gloves is not a substitute for hand hygiene!</p> 	<p>SURGICAL PREPARATION</p> <ul style="list-style-type: none"> Dedicated surgical area scrubs, caps and masks must be worn by all personnel in theatre The operating room must only be used for surgical procedures. Clip (don't shave) surgical sites just before surgery in a separate area. Vacuum loose hair. Clean and disinfect clippers between each patient. Skin preparation after clipping using antibacterial soap with water followed by alcohol & chlorhexidine. Use gloves. 1. Wash the surgical site until household clean with nonmedicated soap before the actual disinfection is begun 2. Disinfect the skin using antimicrobial soap with water, allow for appropriate contact time of minimally 3 minutes. 3. Rinse or wipe with alcohol or alcohol with active ingredients. Only use sterilized instruments. Autoclave if possible. Cold sterilization only under exceptional circumstances. Prevent animal from licking, scratching or otherwise traumatizing the surgical site. Handle wounds and bandage changes with clean or aseptic technique. 	<p>LAUNDRY CLOTHING AND BEDDING</p> <ul style="list-style-type: none"> Scrubs and lab coats - daily and when visibly soiled or contaminated. Bedding and animal blankets - between each patient and when visibly soiled or contaminated. Laundry should be done on the premises or by a professional company. Remove any gross visible soiling contamination prior to washing (use gloves). Wash at 60°C and dry at high temperature to eliminate infectious organisms. Maintain clear separation between dirty and clean areas in laundry room to avoid cross-contamination. Store clean laundry in dedicated areas. 	<p>EDUCATE PET OWNERS</p> <p>Use printed documentation (leaflets, posters) & face to face communication.</p> <ul style="list-style-type: none"> To ensure good hygiene practices during clinical visits and following contact with their animal in their homes. To support veterinary efforts in improving hygiene and responsible use of antimicrobials with good adherence to prescribed therapies. To convey better understanding of the public health implications of zoonotic and antimicrobial resistant infections in pets. 

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Figure 179. FECAVA key recommendations for Hygiene and Infection Control in Veterinary Practice.

cutting needle is the best for suturing gingiva and mucosa but for friable mucosa, a taper point may be effective. The needle should be inserted into tissues perpendicularly to make the smallest possible entry wound and to avoid tearing of the mucosa.

Double layer suturing in major surgical procedures is preferred to one layer if possible. A distance of 2-3 mm between the wound edge and the suture entry point and a 2-3mm distance between interrupted sutures is recommended. A simple interrupted suture is recommended in most oral procedures, although some authors suggest the use of continuous sutures after total extractions in stomatitis patients reduce the time of closure and decrease surgical time. Tension free sutures are of the utmost importance. The knot should not be placed directly over the incision. No area of denuded bone should be left uncovered and the suture line should not lie over the defect.

Key Points:

- All equipment as well as dental operator should be sanitized, disinfected and/or sterilized on regular basis
- Dental/oral procedures require use of specific instruments and equipment
- The most common dental procedures (diagnostic, prophylaxis and extractions) cannot be properly performed without access to radiographic equipment.

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