

Infection prevention and control (IPC) training cards

Options for use:

Flashcards format

Print pages 2–13 of this document. You can fold each question and answer pair on the center line and glue it back-to-back. You can also cut it out and attach each side to an index card.

Use them in a team meeting, morning huddle, or other group interaction for quick training reminders. You can ask questions to one person or the whole group at a time.

For each of these questions, whether the participant answers right or wrong, ask why they chose their answer. When they explain their thought process it can help you identify any gaps in understanding that you can then address.

Game show format

This document has questions grouped by topic. Select and print 25 question and answer pairs from pages 2–13.

Set up the game show board, as seen on the right. Arrange the 25 questions into 5 categories and assign each question a point value. When the corresponding point value is selected, read or reveal the question. Participants can give their answers out loud or write them down. Points are given to the first right answer.

This is great to play in teams or as individuals.

| Category Name | Category Name | Category Name | Category Name | Category Name |
|---------------|---------------|---------------|---------------|---------------|
| 100 | 100 | 100 | 100 | 100 |
| 200 | 200 | 200 | 200 | 200 |
| 300 | 300 | 300 | 300 | 300 |
| 400 | 400 | 400 | 400 | 400 |
| 500 | 500 | 500 | 500 | 500 |

Matching game format

Print two copies of pages 2–10 or 11–13, and cut out one set questions and answers separately. The questions and answers can be used as is or attached to one side of index cards. Use the other copy of questions and answers to verify the right pairs.

Cards can be used:

- Face-up for straightforward matching (good for individual use or group training).
- Face-down as a memory matching game. To play a memory game, lay out the cards in a grid and have participants flip over two cards at a time to see if they match. If the cards don't match, reset and try again. If you're playing as a group, switch players after each card flip that doesn't match. If the match is right, the same player's turn continues until their next failed match.

Questions

Answers and justifications

How many surfaces, on average, do nurses touch during a 12 hour shift?

912



What is the difference between cleaning and disinfection?

Cleaning removes dirt, dust, and germs from surfaces.
Disinfection kills germs on surfaces

What is contact time?

The amount of time a disinfectant needs to sit on a surface, without being wiped away or dried, to effectively kill germs.

What are standard precautions?

Infection prevention and control standards used for all patient care. They're based on a risk assessment and common sense practices and use of personal protective equipment that protect healthcare providers from infection and prevent the spread of infection from patient to patient.

Which of the following infection prevention and control actions are not part of standard precautions?

- a) Wash hands or use alcohol-based hand sanitizer
- b) Use PPE appropriate for expected exposure
- c) Respiratory hygiene and cough etiquette.
- d) Clean and disinfect patient care equipment and patient rooms
- e) All of the above
- f) None of the above

Answer: f) none of the above.
All of the options listed are part of Standard Precautions and should be completed every time, for every patient.

What are transmission-based precautions?




Transmission-based precautions should to be used in addition to standard precautions for patients who may be infected with infectious germs and additional precautions are needed to prevent those germs from spreading.

What PPE is required under droplet precautions?

- 1. Mask
- 2. Face shield or goggles



General IPC training set

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| <p>What are enhanced barrier precautions?</p> | <p>Enhanced barrier precautions are an infection control intervention designed to reduce the spread of multidrug-resistant organisms (MDROs) in nursing homes, and avoids prolonged isolation.</p> |
| <p>What PPE is required for enhanced barrier precautions, and why?</p> | <p>1. Gown 2. Gloves</p> <p>Why? High-contact resident care activities have potential to transfer MDROs to healthcare personnel.</p>  |
| <p>What are the differences between enhanced barrier precautions and contact precautions?</p> | <ul style="list-style-type: none">• Contact precautions require the use of gown and gloves for every entry into a patient room and restrict patients to their rooms. Short-term precautions• Enhanced barrier precautions require the use of gown and gloves only for high-contact resident care activities and does not restrict patients to their rooms. Long-term/indefinite precautions. |
| <p>What PPE is required under contact precautions?</p> | <p>1. Gown 2. Gloves</p>  |
| <p>What PPE is required under airborne precautions?</p> | <p>1. A fit-tested NIOSH-approved N95 or higher level respirator</p>  |
| <p>In which order should you put on the following PPE: gloves, mask, face shield, gown?</p> | <p>Gown, mask, face shield, gloves.</p> |

General IPC training set

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| <p>You go in to change a patient's bed linens. When you pull back the sheets, you notice diarrhea on the sheets, and some may have gotten on your hands.</p> <p>What's the first thing you should do?</p> <ul style="list-style-type: none">a) Put clean linens on the bedb) Put on personal protective equipment (PPE)c) Use hand sanitizerd) Remove the dirty linens and place them in a bage) Wash your hands with soap and water | <p>e) Wash your hands with soap and water</p> <p>When you think you may have gotten stool on your hands, you should use soap and water to clean your hands. Also, this patient's diarrhea may be caused by germs that hand sanitizer doesn't kill.</p> |
| <p>You are about to place an I.V. into the arm of a newly-admitted patient. What is the first thing you should do?</p> <ul style="list-style-type: none">a) Disinfect the skinb) Put on personal protective equipment (PPE)c) Use hand sanitizerd) Wash your hands with soap and water | <p>Both c) and d) are correct!</p> <ul style="list-style-type: none">c) use hand sanitizerd) Wash your hands with soap and water <p>It's important to clean your hands to remove germs before you insert an I. V. Hand sanitizer is slightly better at getting rid of germs, but washing with soap and water is still a good option.</p> |
| <p>Why do you need to wear gloves when you handle needles and lancets?</p> | <p>Actions that are performed with needles and lancets, such as drawing blood or inserting IVs can expose you to blood that might have germs in it. That's why you protect your hands by putting on gloves.</p> |
| <p>Why do you need to disinfect a patient's skin before inserting a needle or other sharp object (lancet, scalpel, etc.)?</p> | <p>It is important to kill germs that might be on the skin before you insert the needle, so the needle doesn't push those germs into the body.</p> |
| <p>Why should you wash your hands or use hand sanitizer after you take off your gloves?</p> | <p>Even if you're careful when you take off your used gloves, you can still get germs on your hands that need to be removed. Hand sanitizer is a good option, but if you see or feel any blood, urine, or feces on your skin, you should wash with soap and water.</p> |
| <p>Related to using gloves, when should you use alcohol-based hand sanitizer or wash your hands?</p> | <p>Before you reach into a glove box, before you put on a new pair of gloves, and after you take off a pair of gloves.</p> |

General IPC training set

What is infection control?

Infection control prevents or stops the spread of infections in healthcare settings. Infection control in health care is more than just policies and procedures. It's an essential part of caring for and protecting patients.

What are the 3 parts of a virus?

Genes, envelope, protein

Find the 3 things that are wrong in this picture.



1. Overflowing dirty linens bag

Used linens are covered in germs and should always be put in a marked bag or bin. Make sure the linens are fully inside the container where no one will touch them and spread germs.

2. Face shield hanging on computer

Clean PPE should be stored in a way so that it's obvious it's clean (such as in a labeled container or clearly identified area). Used PPE has germs on it and should be thrown away, or, if it's reusable, cleaned and stored.

3. Mask not worn over nose

Some germs can spread through the respiratory droplets that people make when they breathe. When you use a mask for source control, it's important that the mask covers both the mouth and the nose to keep respiratory droplets from reaching others.

Find the 4 things that are wrong in this picture.



1. Shared tub of lotion

Tubs of lotion can pick up bacteria from hands. Those bacteria can grow and multiply in the wet lotion and spread to others' hands every time the lotion is used.

2. Food at the nurses station

Food in the nurses' station can get blood or body fluids on it. Also, food spilled on dry surfaces can become a place for germs to grow.

3. Wearing gloves between patient tasks

Gloves can spread germs to people and things just like dirty hands can. The same pair of gloves should not be worn for more than one patient or task, and should be taken off and thrown away after they are used.

4. Healthcare worker handling a syringe

To reduce the risk of germ spread, certain tasks should not be conducted in public spaces such as hallways and nurses' stations. Medications and vaccines should be prepared in clean, designated spaces - not at the nurses' station.

General IPC training set

Find the 3 things that are wrong in this picture.



1. Overflowing sharps container

When sharps containers are too full, there is greater risk of accidentally getting poked with a dirty needle or sharp instrument. Remove or replace frequently-used sharps containers before they become too full.

2. Items blocking a vent

A blocked vent can decrease the air handling system's ability to replace the air in a room with new, clean air. If you see an air vent blocked by something mobile, like a chair or a trash can, move the item to improve ventilation. Notify a supervisor or the person in charge of the area if the vent is blocked by less-mobile items.

3. Urine sample without biohazard bag

Body fluids and germs can easily get on the outside of the container and spread when you collect a sample from a patient. These samples should be placed in a biohazard bag to prevent the spread of germs.

Which of the following are correct when wearing an N95?

- a) Must have a snug fit
- b) Fit tested before use
- c) Must be worn correctly each time (over your mouth and nose)
- d) Must pass a user seal check each use
- e) All of the above

e) All of the above

Which of the following is not a reason why PPE is important in healthcare?

- a) To protect yourself
- b) To protect your clothes from stains or damage
- c) To protect others in the facility
- d) To prevent the spread of disease and germs

b) To protect your clothes from stains or damage

Whose job is it to clean and disinfect?

It's everyone's job! Environmental staff and care staff alike have responsibilities for cleaning and disinfecting.



What is the purpose of personal protective equipment (PPE)?

There are two purposes for PPE in healthcare:




1. To protect yourself.
2. To protect others in the facility.

PPE keeps germs off of you and your clothing, and it also keeps you from spreading germs to others.





General IPC training set

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| <p>What's the difference between a surgical mask and a respirator?</p> | <p>Surgical masks are loose fitting and provide only barrier protection against droplets, including large respiratory particles. Surgical masks do not require fit testing.</p> <p>Respirators are tight fitting and require fit testing.</p> <p>Depending on the type of respirator, it can filter out at least 95% of particles in the air, including large and small particles.</p>  |
| <p>What is a germ reservoir?</p> | <p>A place where germs live, such as dirt, water, and blood. Sometimes, germs can live in these places without causing infections.</p> |
| <p>List an example of a reservoir for germs</p> | <p>Body reservoirs Blood, gut, skin, respiratory system</p> <p>Environmental reservoirs Dry surfaces, dirt and dust, medical devices, water and wet surfaces.</p> |
| <p>What is a germ pathway?</p> | <p>One of many ways that germs can spread between people and places.</p> |
| <p>List three ways that germs can spread.</p> | <ul style="list-style-type: none">• Touch• Exposure to blood and body fluids• Water splash/spray• Respiratory droplets from cough or sneeze• Contaminated surfaces• Contaminated medical devices• Dirt and dust exposure |
| <p>Define hand hygiene.</p> | <p>Hand hygiene refers to either washing your hands with soap and water or using alcohol-based hand sanitizer.</p> |
| <p>Name a circumstance where you should wash your hands with soap and water, rather than alcohol-based hand sanitizer?</p> | <ul style="list-style-type: none">• When your hands are visibly soiled• After you care for a person with known or suspected infectious diarrhea• After a known or suspected exposure to spores (for example, C. difficile).  |




General IPC training set

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| <p>List two examples of a good times to use alcohol-based hand sanitizer.</p> | <ul style="list-style-type: none"> • Before you put on gloves <u>and</u> after you take off gloves • Before you perform an aseptic task (e.g., placing an indwelling device) or when you handle invasive medical devices • Before you move from work on a soiled body site to a clean body site on the same patient • After you touch a patient or the patient's immediate environment • After contact with blood, body fluids or contaminated surfaces |
| <p>True or false: Healthcare providers might need to clean their hands as many as 100 times per 12-hour shift, depending on the number of patients and intensity of care.</p> | <p>True!</p>  |
| <p>How can healthcare providers help protect themselves from needlestick injuries?</p> | <ul style="list-style-type: none"> • Avoid using needles if safe and effective alternatives are available • Help your employer select and evaluate devices with safety features that reduce risk of needlestick injury • Use devices with safety features • Avoid recapping needles • Plan for safe handling and disposal of needles before you use them • Promptly dispose of used needles in appropriate sharps disposal containers • Report all needlestick and sharps-related injuries promptly to ensure you receive follow-up care • Tell your employer about any needlestick hazards you observe and promptly report any needlesticks and near-misses • Participate in infection prevention training  |
| <p>Name one of the things you should do after a needlestick injury occurs.</p> | <ul style="list-style-type: none"> • Wash needlesticks and cuts with soap and water • Report the incident to your supervisor • Immediately seek medical treatment  |
| <p>Does our facility have a body fluid spill kit? If so, where can it be located?</p> | <p>Facility specific—where is yours located?</p> |

General IPC training set

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| <p>Name one step in the cleaning process for blood and other body fluid spills</p> | <ol style="list-style-type: none"> 1. Wear appropriate PPE. 2. Wipe it up immediately with absorbent (paper) towels, cloths, or absorbent granules (if available). 3. Clean thoroughly, using neutral detergent and warm water solution. 4. Disinfect by using a facility-approved intermediate-level disinfectant. 5. Let the disinfectant remain wet on the surface for the required contact time (e.g., 10 minutes), and then rinse the area with clean water to remove the disinfectant residue (if required). 6. Send all reusable supplies and equipment for reprocessing after the spill is cleaned up.  |
| <p>What is one infection prevention and control (IPC) strategy that can reduce risks when handling soiled linens?</p> | <ul style="list-style-type: none"> • Always wear reusable rubber gloves before you handle soiled linen. • Never carry soiled linen against the body. Always put it in the designated container. • Carefully roll up soiled linen to prevent contamination of the air, surfaces, & cleaning staff.  |
| <p>True or false: you can dispose of liquid nutritional supplements in a patient's sink?</p> | <p>False</p>  |
| <p>What should you do if you observe a faucet creating water splashes or sprays in a sink?</p> | <p>Report it to your supervisor and maintenance as appropriate. Splashes and sprays create infection risks.</p> |
| <p>True or false: patient personal items can be stored next to patient sinks.</p> | <p>False. Items should be stored 3 feet away from sinks or placed on the other side of a splash guard.</p> |
| <p>How often should shared medical devices be disinfected?</p> | <p>Between every patient and when devices are visibly soiled.</p>  |

General IPC training set

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| <p>How do you know what disinfectant product is best to use on medical equipment?</p> | <p>Check the product label and manufacturer's instructions, as well as your facility's preferred products.</p> |
| <p>For each of the following, should a urinalysis/urine culture be performed? (Yes/no)</p> <ol style="list-style-type: none"> 1. Smelly, cloudy, or discolored urine without other signs/symptoms 2. Fever or altered mental state without evidence of another cause 3. Checking response to treatment 4. Painful/difficult urination; urgent or frequent urination; localized pain/ discomfort | <ol style="list-style-type: none"> 1. No  2. Yes 3. No, unless symptoms fail to resolve  4. Yes |
| <p>What are three infection risks of urinary catheter maintenance and an IPC action that could reduce that risk?</p> | <ul style="list-style-type: none"> • The risk of germs spreading by touch. Clean your hands and wear PPE to reduce germ spread. • Splashes and spills of collected urine. Wear PPE to reduce germ spread; clean and disinfect splashes and spills. • Backflow of urine into the bladder. Avoid lifting the collection bag above bladder height. Correct all kinks in tubing.  |
| <p>How often should a urinary catheter be cleaned? How often should urinary drainage bags be emptied?</p> | <p>Clean the catheter daily. Empty drainage bags frequently, and as needed.</p> |

Questions

Answers and justifications

What does MDRO stand for?

Multidrug-resistant **o**rganism

What is antimicrobial resistance?

When a germ (an organism) is able to resist one or more medications that are designed to kill it. Example, when a bacteria can resist or is immune to certain antibiotics.

Why are MDROs concerning in healthcare?

Infections caused by MDROs are very hard to treat and can spread to other individuals

Why are precautions used for residents with MDROs who are not sick?

The germ may still live on or in the resident indefinitely after symptoms are gone; this is called colonization. Patients should remain in precautions throughout their healthcare stays because precautions keep the germ from spreading to others.

What is one thing that healthcare staff can do to prevent the spread of MDROs?

- Use personal protective equipment (PPE) correctly
- Clean your hands often.
- Follow the appropriate precautions outlined by supervisors.
- Correctly clean and disinfect medical devices and dry surfaces.

Which patients/residents are at the most risk of an MDRO?





Those who . . .

- are on ventilators
- use devices such as catheters or central lines
- have open wounds, such as from surgery, burns, or pressure ulcers



Name one of the MDROs we are most concerned about in healthcare settings.

- Candida auris (C. auris)
- Carbapenem-resistant Acinetobacter [baumannii (CRAB)]
- Carbapenem-resistant Enterobacterales (CRE)
- Pseudomonas aeruginosa (P. aeruginosa)

MDRO and AR training set

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| <p>Which of the following is a reservoir for <i>Acinetobacter</i> [<i>baumannii</i> (CRAB)]?</p> <ul style="list-style-type: none">a) The skinb) Dry surfaces, such as call lights, bed rails, and door handlesc) Water and wet surfaces, such as drains or shower headsd) Devices, such as blood pressure cuffs, catheters, and ventilatorse) In dirt and dustf) All of the above | <p>f) all of the above</p>  |
| <p>Which of the following is <u>not</u> a reservoir for Carbapenem-resistant Enterobacterales (CRE)?</p> <ul style="list-style-type: none">a) The skin and GI tractb) Dry surfaces, such as call lights, bed rails, and patient tablesc) Water and wet surfaces, such as sinks and drainsd) In dirt and duste) Devices and shared equipment, such as patient lifts, physical therapy equipment, and wheelchairs | <p>d) In dirt and dust</p>  |
| <p>Which of the following is a reservoir for <i>Pseudomonas aeruginosa</i> (<i>P. aeruginosa</i>) ?</p> <ul style="list-style-type: none">a) The skin and GI tractb) Dry surfaces, such as bed rails, linens, tables and call lightsc) Water and wet places, such as sinks, drains, and toiletsd) Devices, such as stethoscopes, blood pressure cuffs and patient liftse) In dirt and dustf) All of the above | <p>f) All of the above</p>  |
| <p>Which of the following is <u>not</u> a reservoir for <i>Candida auris</i> (<i>C. auris</i>)?</p> <ul style="list-style-type: none">a) The skinb) Dirt and dustc) Dry surfaces, such as call lights, bed rails, and patient tablesd) Water and wet surfaces, such as sinks and drainse) Devices and shared equipment, such as patient lifts, physical therapy equipment, and wheelchairs | <p>b) Dirt and dust</p>  |

MDRO and AR training set

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| Which EPA list has products that are effective against MRSA and VRE? | List H |
| Which EPA list should you use to deal with Clostridium difficile (C. difficile or C. diff)? | List K |
| The products of EPA List N kill which germ? | COVID-19/SARS-CoV-2/Coronavirus |
| What is antibiotic stewardship? | <p>Antibiotic stewardship is the effort to improve how antibiotics are prescribed by clinicians and used by patients. This will help effectively treat infections, protect patients from harms caused by unnecessary antibiotic use, and combat antibiotic resistance.</p> |
| What are the 7 core principles of antibiotic stewardship? | <p>Leadership commitment Accountability Drug expertise Action Tracking Reporting Education</p>  |
| <p>Who should be involved in antibiotic stewardship?</p> <p>a) Nursing staff b) Clinical providers c) Residents/patients d) Family members of residents/patients e) All of the above</p> | <p>e) all of the above</p>  |

