

Infectious Disease

Infectious diseases can pose a threat to the University community as they do to communities worldwide. If there is an outbreak of infectious disease that threatens the University of Michigan officials will collaborate with State and National officials in determining the best course of action regarding operations at the University. Information related to any widespread infectious disease outbreak will be available on the University's website.

There are many infectious diseases that may be transmitted within the university, including but not limited to:

- MRSA (Methicillin-Resistant Staphylococcus Aureus)
- Meningitis
- Seasonal Influenza
- Norovirus
- Common Cold
- West Nile Virus
- Tuberculosis
- Sexually transmitted diseases

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Source

Centers for Disease Control and Prevention

Michigan Department of Community Health

University of Michigan Health System

Washtenaw County Public Health Department

More Information

http://www.michigan.gov/mdch/0,1607,7-132-2940_2955_22779---,00.html

<http://www.cdc.gov/>

<http://www.med.umich.edu/>

<http://publichealth.ewashtenaw.org>

Prevention / Mitigation / Preparedness - Infectious Disease

Training

Training should be provided to all faculty and staff members who have routine contact with the students and who may have contact with items contaminated by blood and body fluids such as custodial staff and athletic coaches. Training should be provided by medical or health department officials.

All personnel who may have to cleanup and decontaminate areas exposed to bodily fluids should be properly trained to do so. Contact OSEH for assistance.

Personal Protective Equipment

Adequate personal protective devices should be made readily available to staff, including gloves and face masks.

Personal Practices to Follow

Preventing the transmission of infection requires that personal and environmental cleanliness techniques be practiced at all times in every university setting.

- Wash hands after using the toilet and before eating meals and snacks.
- Use disposable paper towels. The use of cloth towels and cloth rolls is discouraged.
- Maintain storage areas for clean linens, utensils, equipment, and disposable items. These areas must be separate from areas used for storage of soiled items.
- Keep soiled disposable items in covered waste receptacles lined with disposable plastic bags. At the end of each day, the plastic bags are to be sealed and discarded. DO NOT REUSE.
- Frequent hand washing is the most important technique for preventing the transmission of disease.

Proper hand washing requires the use of soap and water and vigorous washing under a stream of temperate running water for at least 20 seconds.

1. The ideal water temperature is 75° F to 110° F.
2. A disposable soap dispenser is preferred. The use of bar soap should be discouraged.
3. All surfaces of the fingers and hands should be covered with the hand-washing agent. Rinse under running water.
4. Use paper towels to thoroughly dry hands. Faucets should be turned off using a paper towel to prevent re-contaminating clean hands.

Wash Hands:

- Before working with other individuals
- Before drinking, eating, smoking, applying lip balm, or manipulating contact lenses
- Before handling clean utensils or equipment
- Before and after handling food

- After going to the bathroom
- After contact with body secretions such as blood, urine, feces, mucus, saliva, semen, tears, vomit, drainage from wounds, etc.
- After caring for any person, especially those with nose, mouth, eye, or ear discharge
- After removing disposable gloves or face mask

All staff members should practice specific principles designed to protect themselves and others from infection.

Maintain optimum health through effective daily health practices such as adequate nutrition, rest, exercise, and appropriate medical supervision

If you have a cut or an open lesion on your hands, disposable gloves must always be worn when providing direct care for any person where there is contact with bodily excretion or secretions. The following also applies:

- Avoid rubbing or touching eyes
- Wash hands frequently
- Avoid the use of jewelry such as rings, bracelets, and earrings during working hours
- Use only your own personal care items such as combs, fingernail files, nail clippers, lipsticks, and toothbrushes
- Keep fingernails clean and trimmed short.
- Maintaining a Clean University Environment

These guidelines and procedures should be followed regardless of the presence or absence of a person known to have an infectious disease.

- Clean and disinfect the following areas and items daily:
- Sinks and faucet handles
- Doorknobs and push plates
- Toilet seats and bowls (inside and out)
- Desks and/or table tops used for eating
- Clean classrooms and hallway floors daily

Clean and disinfect the following areas and items weekly:

- Walls above sinks
- Desks and table tops (or more frequently as needed).
- Wash waste receptacles at least weekly.

When reusable soap dispensers are empty, rinse, disinfect, and air dry them before refilling.

Rugs or carpets should be cleaned and disinfected as needed.

If heavy utility (rubber) non-disposable gloves are worn when a disinfectant is being used, they must be washed, disinfected, and air-dried after each use. The heavy utility gloves should be discarded if they are cracked, peeling, torn, punctured or no longer function as a barrier.

Infectious Disease Prevention Measures for the University Athletics Setting

Hand hygiene is the single most important factor in preventing the spread of infectious disease.

Coaches and trainers should practice appropriate hand hygiene (use alcohol-based hand sanitizer or wash with soap and water) after contact with players, especially when changing bandages and providing care for wounds. Consult with local health department regarding the use of alcohol-based hand sanitizer and provide appropriate athlete supervision.

Persons other than trainers may assist an athlete with the application of clean dressings following initial approval and assessment by appropriate authorized university health staff. Such persons should wear disposable gloves, and wash their hands and forearms immediately after removing gloves using barrier precautions at all times.

In situations where access to sinks is limited (e.g., on playing fields), carry individual containers of alcohol-based hand sanitizer.

Provide enough clean towels so athletes do not need to share them.

Educate athletes on appropriate management of all wounds.

Exclude athletes with draining lesions or open wounds (whether or not they are covered) from swimming pools, whirlpools, ice tubs, saunas and hot tubs. All excluded athletes should comply with university's standard clearance process for returning to sports activities.

All wounds (e.g., cuts, scrapes, abrasions) should be covered with a bandage until healed, especially when contact with multi-use items (i.e., weight equipment, electric stimulation cuffs) may occur.

Wounds (e.g., cuts, scrapes, abrasions) should be completely and securely covered during competition (e.g., bandaged and use of protective sleeve).

Athletes with active skin and soft tissue infection (e.g., draining wounds, boils, abscesses) should not participate in activities where skin-to-skin contact is likely to occur until their infections are completely healed.

Specific guidance for athletes:

Do not share towels (even on the sidelines of games), washcloths, soap, razors, topical preparations, or other personal hygiene items with other athletes.

Shower with soap (preferably not bar soap) before using the whirlpool, steam room, or sauna.

Shower as soon as possible after EVERY practice, game or tournament.

Shower before and after sports with extensive skin-to-skin contact.

Avoid contact with draining lesions and contaminated items (e.g., bandages) from other people.

Perform hand hygiene after using multi-use equipment (e.g., weight equipment) and after contact with potentially contaminated items (e.g., another person's wounds, infected skin, or soiled bandages).

Follow good hygienic practices: hand hygiene, showering, and regularly laundering clothes.

Disease Surveillance

Some infectious diseases can spread quickly on athletic teams and can be difficult to control.

It is important for coaches and trainers to be aware of every skin infection as soon as it occurs to prevent a single case from becoming an outbreak. University employees should consult with appropriate health officials for information and assessment as appropriate.

If an infectious disease outbreak occurs among team members, associated students and staff should be encouraged to report skin changes such as redness, warmth, swelling, tenderness or drainage, especially when associated with cuts, boils or sites of skin irritation and abrasions. Coaches and staff observing open or undressed skin lesions on team members should direct the athlete to a healthcare provider to have the lesion evaluated.

If infectious diseases occur among athletes on sports teams, appropriate university officials should consider notifying all athletes to enlist their support with reinforcing hygiene measures and reporting of skin lesions to team officials.

Care must be taken to maintain confidentiality of athletes with infected wounds.

Work with the University OSEH department (734) 647-1143 for guidance as needed

Response - Infectious Disease

Students or Staff with Symptoms

Students, faculty or staff with symptoms of an infectious disease should contact a healthcare provider and do the following:

- Keep wounds clean and covered with a bandage until healed. Change bandages as recommended by the healthcare provider or when soiled. Discard promptly used bandages or tape in the regular trash.
- Wash hands and forearms before and after caring for wounds and throughout the day. Wash for at least 20 seconds using soap (preferably not bar soap) and warm water and dry your hands on a clean paper towel.
- Do not share personal items such as towels, washcloths, soap, razors, topical preparations, uniforms or clothing that may have had contact with an infected wound or bandage.
- Wash towels, washcloths, uniforms or clothes that become soiled with hot water and laundry detergent. Drying clothes in a hot dryer, rather than air-drying, also helps kill bacteria in clothes.
- Take all antibiotics as prescribed and for the full length of time prescribed.
- Report new illnesses/symptoms to a healthcare provider.

Notification / Communication

Any member of the University community concerned for their personal health because of an infectious disease, or is aware that someone at the University has an infectious disease should report, in confidence, this concern to his or her supervisor, department head or any other person in authority.

If the possibly infected person is a student, the person in authority shall report, in confidence, the concern to the Dean of Students or the Vice President for Student Affairs, who will determine if appropriate healthcare or medical personnel (OSEH, Chief Medical Officer, etc) should be informed. If the concern relates to the health of faculty or staff members, the report should be made to the Vice President for Human Resources

All suspected infectious disease outbreaks should be reported immediately to any University Vice President.

Typically, it is not necessary to inform the entire university community about a single infectious disease case. The university should take care to maintain the student's or faculty/staff member's right to privacy with this or any health issue.

When an outbreak or an increase in an infectious disease occurs within the university population, or if transmission within the university is identified, the university should contact the local health department.

All official communications with respect to any incident of a reportable, communicable disease, and especially communications with the media must be channeled through the University Health Officer and the Vice President for Communications who will ensure that an appropriate communications protocol is developed with input from other departments or individuals as may be appropriate.

Attendance

Unless directed by a physician, students, faculty and staff with an infectious disease should not be excluded from normal activities.

Students, faculty or staff with any open or draining wounds should be excluded from whirlpools, hot tubs, etc. until the wound has healed.

Personnel Responding to an Infectious Disease Case

Take universal precautions whenever there is a potential for contact with blood or other potentially infectious material. Treat all blood and body fluids as infectious. This is referred to as using universal precautions.

Universal Precautions: Universal precautions is a method of infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other blood borne pathogens. Exposure occurs through contact with mucous membranes (e.g., eyes, nose and mouth) or broken (cut or abraded) skin with contaminated blood.

Anyone suspected of having an infectious disease should be sent to an appropriate medical facility, or to their primary physician.

Disclosure and confidentiality of patient information must follow state and federal laws.

University authorities should handle contact and notifications of infectious disease cases in the manner prescribed by the local health authority.

When a case of infectious disease occurs within the university, this fact should not be considered a reason for the university to be closed, except in the event of an emergency.

Persons suspected of being infected with a reportable infectious disease for which isolation is required should be refused admittance to the university while acute symptoms are present.

Cleaning and Disinfection in the University Buildings and Athletics Settings

If confirmed infectious disease cases in the university population have not been identified, follow routine, common sense procedures for cleaning the campus buildings.

Follow local health department guidance for routine campus building cleaning.

Follow regular cleaning and maintenance procedures for equipment and materials that may be shared in the classrooms such as protective eyewear or clothing in labs.

Use of disinfectants on shared environmental surfaces and equipment as part of regular facility maintenance may also be considered.

Most disinfectant products require proper cleaning of surfaces prior to applying disinfectant. Proper cleaning reduces levels of bacteria on environmental surfaces.

If soiled linens and clothing are washed on university premises, wash with laundry detergent in hot water (minimum 160°F), add one cup of bleach if water is not 160°F and dry in a hot dryer. Wear gloves when handling dirty laundry.

Enrollment / Continued Attendance

Prior to the enrollment or continued attendance in university operations of a known infected student, faculty or staff member, the Vice President for Student Affairs or the Dean of Students (in the case of students) and the Vice President for Human Resources (in the case of staff or faculty), in consultation with appropriate medical authorities, shall develop specific procedures appropriate to the infected person's stage of development for the specific disease. The respective vice president should carry out the following procedures:

Conduct a health assessment including a review of the person's records. Collaborate with a physician to ensure that the records are complete.

Based on the specific disease or pathogen and mode of transition, identify students, faculty or staff members who may be at risk such as those who are chronically ill, pregnant, capable of childbearing, or taking immunosuppressant medication. Make recommendations for restriction of employees or students as appropriate and after consultation with a physician for all involved.

Identify appropriate personal and environmental cleanliness techniques in accordance with student, faculty and staff needs.

Maintain ongoing communication with the primary physician regarding the student's, faculty/ staff member's status.

Recovery - Infectious Disease

Continued monitoring of any potential hazard should occur.

Depending on the size of the outbreak and the number of staff affected will determine a prioritization sequence on what essential services and key activities will be restored within the unit.