|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| EIP Submission Policy / Results Called to Infection Prevention | | | | | | |
| **Policy Statements** | | Children’s Hospitals and Clinics of Minnesota comply with applicable state and local laws and regulations regarding the reporting and submission of clinical isolates of infectious disease pathogens.  The Microbiology and Virology labs notify Infection Prevention of organisms that may need immediate intervention by Infection Prevention. | | | | |
| **Purpose** | | This policy documents and provides guidance for the processes and procedures to submit Emerging Infectious Pathogen (EIP) to MDH and lists lab results that are called to Infection Prevention as soon as the results are available. | | | | |
| **Responsibility** | | Microbiologists/virologists who read and report culture results. | | | | |
| Procedure | | **Infection Prevention:** | | | | |
|  | | 1. Contact Infection Prevention at extension 6-5555 or alpha page at 651-629-4444 with the following highly suspected or confirmed laboratory results:    1. CSF cultures 2. Gram negative cocci/diplococci seen in Gram smear 3. *Neisseria meningitidis*    1. Blood cultures 4. Gram negative cocci/diplococci seen in Gram smear 5. *Neisseria meningitidis*    1. Any culture positive for potential agents of Bioterrorism--*Bacillus anthracis, Brucella, Burkholderia mallei/pseudomallei, Francisella tularensis, Yersinia pestis or Coxsiella (*Note: Notification of Infectious Disease physician is also necessary. Use AMION application to get the on-call doctor).    2. Any culture positive for *Vibrio Cholera*    3. Positive *Clostridium botulinum* toxin    4. Any culture positive for *Corynebacterium diphtheriae*    5. All organisms identified as possible Carbapenemase producers and confirmed Carbapenemase producers    6. All viral cultures positive for: Novel Influenza subtypes, Measles, Mumps, Rubella, Poliovirus, Smallpox or Orthopox (Virology: Notify IP of possible mumps when a hemadsorbing virus, not PIV or influenza, is isolated from urine or parotid source. Send to MDH for definitive identification.   Notify IP of possible poliovirus when an enterovirus is isolated that grows rapidly on SF, Hep-2 and RMK cells lines. Send to MDH for definitive identification). | | | | |
|  | | **MDH Clinical Isolate Submission:** | | | | |
|  | | The Micro lab must submit an isolate from reportable diseases if available to the Minnesota Department of Health. See MDH web site (link below) for current list of organisms or poster in Micro. [MDH List of Reportable Diseases](http://www.health.state.mn.us/divs/idepc/dtopics/reportable/disease.html) | | | | |
|  | | ---Subculture the isolate to agar slant/ nutrient agar, SB, (if SPNE or β-hemolytic strep) or CHOC (if HFLU or NMEN). Incubate in CO2 overnight for good growth. ---Send viral isolate in cell culture tube at 2+ or > CPE. ---Fill out the MDH reportable form and send the isolate to MDH with courier M-F. | | | | |
| Reporting | | Call results to Infection Control at 6-5555. Document date and time called in Sunquest MRE *Culture Entry* tab in Observations by using customized keyboards or by entering a code and free text in the result box. Example:   1. 3+ KLEBSIELLA PNEUMONIAE Carbapenemase producer (KPC) \*\*MDRO, Infectious Disease consult required.   2. MULTIPLE DRUG RESISTANT ORGANSIM (MDRO): This organism  requires SPECIAL CONTACT PRECAUTIONS. Please call Infection Control.   1. \*\*Called to INFECTION CONTROL , Wendy Berg RN @ 1300 on 7/7/03 | | | | |
| **Training Plan/ Competency Assessment** | | |  |  | | --- | --- | | **Training Plan** | **Initial Competency Assessment** | | 1. Employee must read the policy. | 1. Review of called results by Microbiology Supervisor, Lead MLS or designee. | | | | | |
| **Supporting Documents** | | 1. Infection Control Memo February 2012, Julie LeBlanc 2. MDH web site 3/29/2014 | | | | |
| Historical Record | | Version | Written/Revised by: | Effective Date: | Summary of revisions |
|  | | 1 | Pat Ackerman | 5/11/1993 | Initial Version |
|  | | 1.1 | Pat Ackerman | 7/20/2004 | Reformatting |
|  | | 1.2 | Pat Ackerman | 9/2/2005 | Reformatting |
|  | | 1.3 | Pat Ackerman | 8/7/2007 | Updated Mysis 6.2 reporting |
|  | | 1.4 | Becky Carlson | 02/27/2009 | Added carbapenemase producing organisms. |
|  | | 1.5 | Becky Carlson | 11/02/2010 | Reformatting & Added MDH submission information and hyperlink. |
|  | | 1.6 | Becky Carlson | 06/23/2011 | Removed *E.coli 0157* |
|  | | 1.7 | Becky Carlson/Helen Stefan | 05/16/2012 | Added Agents of Bioterrorism, Vibrio, C.botulinum, C. diphtheriae, Measles, Mumps, Rubella, Polio, Smallpox, Orthopox |
|  | | 1.8 | Becky Carlson/Helen Stefan | 06/15/2012 | Added Suspect Case notification provision. Added Coxsiella. Removed notification for Haemophilus, and Strep pneumo. Pertussis and positive AFB smears or MTB cx. |
|  | | 1.9 | Becky Carlson/Helen Stefan | 3/10/2015 | Removed IP notification of ESBL.  Added “possible” to the KPC producer letter g. |
|  | | 2 | Becky Carlson/Helen Stefan | 4/4/2015 | Re-numbered from MC 302, added reporting novel influenza subtypes |
|  | | 3 | Susan DeMeyere | 10/11/2017 | Changed logo. Removed KPC from Carbapenemase Producers. |