**TITLE:  *HIS ICP***

1. **Purpose/Expected Outcome:**
	1. To provide guidelines to prevent Hospital Information Systems from becoming sources of infection transmission.
	2. To provide best practices in health care by reducing exposure to pathogens by employees and patients.
	3. To have the level of risk of Hospital Acquired Infections (HAI) at a goal of zero
2. **Definitions:**
	1. The Hospital Information System (HIS) in this policy will refer to the physical aspect of the keyboard and/or monitor.
	2. Computer hardware has been implicated as a potential reservoir for infectious agents.
3. **Policy:**
	1. Given the potential risk of computers serving as fomites for pathogens ensure that working with computer equipment is looked at as the policy for hand hygiene. Specifically, when working with keyboards or mice in high-risk areas disinfect or disinfect and glove hands.
	2. Most major computer companies have Web sites that provide basic cleaning instruction for their computer hardware, but no instructions for disinfection of equipment, as might be needed in a patient care hospital setting. These Web sites can provide information, however, such as the following restrictions about cleaning LCD screens: ‘‘unlike a computer monitor, the LCD is not made of glass therefore requires special cleaning procedures. When cleaning the LCD screen, it is important to remember not to spray any liquids onto the LCD directly nor use a paper towel as it may cause the LCD to become scratched. To clean the LCD screen, we recommend that you use a soft cotton cloth. If a dry cloth does not completely clean the screen, you can apply rubbing alcohol to the cloth and wipe the screen. It is important to remember that, because of the risk of fire; large environmental surfaces should not be cleaned or disinfected with alcohol.
	3. Cleaning will include the removal of visible dirt or biologic debris, often by the use of a detergent. As a result of the cleaning process, microbial load is generally reduced. Disinfection specifically refers to an elimination of most, if not all, pathogenic microbes. Disinfection can be accomplished by using a disinfectant chemical after the surface has been cleaned or by using a hospital-grade disinfectant cleaner, which will both clean and disinfect.
4. **Procedure/Interventions:**
	1. Clean the monitors with Cavi Wipes (available from Material Management). When cleaning the monitor, keyboard and mouse allow the cleaning solution to dry for at least 2 minutes for maximum anti-microbial effect. If the cloth comes out of the canister very wet, wring it out first. If the monitor looks streaked when dry and 2 minutes have elapsed, wipe with a slightly damp paper towel.
5. **Procedural Documentation:**
	1. As with the employee hand washing policy all employees must use proper hand washing technique when caring for patients and extend this to use of HIS. Examples of appropriate times for utilizing cleaning techniques are:

 1. before starting patient care

 2. before and after patient procedures

 3. between patient contacts if HIS is taken into patient room

* 1. Each employee needs to take responsibility for the equipment they use during their shift. It is the recommendation that office staff disinfect HIS on a weekly basis
	2. For areas of high risk such as ICU and the ER it is the recommendation that HIS is disinfected on a daily or more frequent basis.
1. **Additional Information:**
	1. The investigators then confirmed that the bacteria were transmissible from the keyboards and covers to fingers. Transmission increased with keyboard contact (1 to 5 touches; VRE: 22% to 50%, MRSA: 42% to 92%, PSAE: 9% to 18%), and the transmission rate of VRE and MRSA was higher for ungloved hands than for gloved hands (67% vs 7% and 80% vs 67%, respectively). Similar transmission rates were observed for keyboard covers.
	2. "Not only do VRE and MRSA organisms survive on these surfaces, but they can be transmitted from the surfaces to the hands of healthcare workers," investigators pointed out, noting that the mild soap and water recommended by manufacturers for cleaning are inadequate for disinfection in a hospital setting.
2. **References:**
	1. Computer equipment used in patient care within a multihospital system: Recommendations for cleaning and disinfection Alice N.Neely, PhD,FAAM, FIDSA,a Joan M. Weber, RN,BSN,CIC,b Patricia Daviau, RN,c Alastair MacGregor, MB, ChBD, MRCGP,d Carlos Miranda, MBA,e Marie Nell, MBA, RN, CPHQ,f Patricia Bush, RN, MS,f and Donald Lighter, MDf
	2. The investigators report no pertinent financial conflicts of interest. SHEA 15th Annual Scientific Meeting: Abstract 113. Presented April 11, 2005. Reviewed by Gary D. Vogin, MD
3. **Other Related Policies/Procedures:**
	1. N/A
4. **Cross Index As:**
	1. N/A
5. **Attachments:**
	1. N/A