

Department of Radiology
Magnetic Resonance Imaging (MRI)

OBJECTIVE: To reduce the risk of healthcare-associated infections for both patients and personnel.

I. **HAND WASHING** (Refer to IC Policy 2.0: Hand Hygiene)

Routine Patient Care: Hand washing for 15-20 seconds with soap and water before and after contact with any patient is recommended.

Hospital approved waterless alcohol sanitizer hand wash is available and is used when hands are not visibly soiled

Antiseptic soaps are used if patient has a resistant microbe or if hands are heavily contaminated with blood or body fluids.

II. **SKIN PREPARATION**

Skin is prepped with (70%) alcohol x 2 swabs before IV injection. Allow area to dry before accessing port.

III. **PERSONAL PROTECTIVE EQUIPMENT**

PPE is available and should be worn if exposure to blood and body fluids is anticipated. Clean gloves are worn when performing a vascular access procedure. Gloves are worn when it is anticipated that personnel may have contact with blood, other potentially infectious materials, mucous membrane and non-intact skin. Gloves are worn when handling contaminated items.

Standard Precautions are used for all patients.

IV. **DISINFECTION OF THE ENVIRONMENT**

A. Equipment is cleaned with hospital approved disinfectant by MRI personnel.

1. BioMed IC-2A ventilator (MRI / transport ventilator)

- a. All items are disposable and are discarded.
- b. Surfaces are wiped with an approved housekeeping disinfectant.
- c. Manufacturers recommendations are followed for setup and performance check out.

B. Sheets are used to cover the mattress and are changed between each

patient use. The mattress is cleaned with the housekeeping disinfectant if there is any obvious soilage. Otherwise mattress is cleaned at the end of the day. All mattresses must be intact. If cracks or tears are noted, mattresses must be repaired immediately or discarded.

- C. The floors and all horizontal surfaces are cleaned daily by environmental services, more often if soiled.
- D. Any spill or body fluids are cleaned by Environmental Services personnel unless in high traffic areas; which are cleaned by Radiology personnel.
- E. Any spill or body fluids that leak under the pad into the cradle of the MRI couch will be cleaned by the equipment's Field Service Engineer who will wear appropriate PPE.

V. **ISOLATION**

- A. Standard precautions are followed by all personnel. Personal protective equipment, i.e., barrier gowns, gloves, masks and goggles are available and should be worn when there is a possibility of splashing of any patient's body fluids. (refer to Bloodborne Pathogen Exposure Control Plan in Infection Control BIT)
- B. The isolation manual is referred to when patients have a specific infectious disease. When a patient is suspected of having an infectious process, the exam is prioritized and patient returned to nursing unit as quickly as possible. If a patient requires respiratory isolation, the patient wears a mask while in the holding room. During the procedure the Radiology staff will wear a mask and the patient can remove the mask. The mask is changed when it becomes moist. The room is left vacant for appropriate time (Refer to the TB Control Plan in the Infection Control BIT.)
- C. The Infection Control BIT contains Bloodborne Pathogens, Isolation and TB Exposure Control Plans and is accessible on line at http://www.medcom.lsuhs-c.edu/cfdocs/policies/IC_Revisions.cfm

VI. **DISPOSAL OF WASTE**

All contaminated waste is placed in a contaminated trash box to be incinerated. (See IC Policy 6.0: Waste Policy Contaminated/Regular).

References:

LSUHSC IC 2.0 Hand Hygiene

LSUHSC Infection Control Bloodborne Pathogen, Isolation, Tuberculosis Control Plan
(B.I.T.)

Written: 1990

Revised: 91, 93, 97, 99, 00, 01, 2/03, 4/05, 4/07, 4/09