

epic3 - National Guidelines for the prevention of healthcare-associated infections in NHS hospitals and other acute settings

Consultation Feedback Form

Name: Faculty of Intensive Care Medicine

Please tick which guidelines you reviewed:

Standard principles	<input checked="" type="checkbox"/>
Short term urinary catheters	<input checked="" type="checkbox"/>
Central venous catheters	<input checked="" type="checkbox"/>

General feedback

Question	Yes	No	Not sure
Is the structure of the guidelines logical?	✓		
Comment			
Are the guidelines user friendly?	✓		
Comment			
Are the recommendations clearly stated?	✓		
Comment			
Is there sufficient evidence included to support the guidelines?		x	
Comment: many of the trials upon which the guidelines are based are observational or outbreak based. There are relatively few well conducted studies upon which to base recommendations but the recommendations are logical and in line with staff, patient and relative expectations			
Are there any major omissions/gaps in the guideline?		x	
Comment			
Are the guidelines clinically applicable to acute hospital settings?	✓		
Comment			
Are the guidelines clinically practical to acute hospital settings?	✓		
Comment			

Are the guidelines acceptable to patients?	✓		
Comment			

Please give feedback on specific guidelines below.

Guideline	Page no, line no	Comment
		Thank you for asking me review this document. Congratulations on a comprehensive and sensible approach to preventing Healthcare-Associated Infections
	P31, Line 1	Should a recommendation be made to emphasise that Alcohol based hand rub should not be used when there is known contact with <i>C diff</i> ?
	SP14	Does Occupational Health have to be involved for every case of skin irritation? Should there be rewording to say that systems should be in place to accommodate staff who react to usual hand hygiene products?
Urinary Catheter	P60, Line 20	I don't mean to sound smug and petty but I prefer to think that I deliver Care rather than Therapy and that I therefore work in an ICU not ITU.
Urinary Catheter		I could find no recommendation about the use of antibiotic prophylaxis during catheterisation (my understanding is that it is unnecessary). Should it be included? A 'shot of gentamicin' at insertion is still common practice – should it be?
IVAD	P79, Line 3 (table)	The only line of illogicality (is there such a word??) is that PVCs are 'rarely associated with bloodstream infection'. If that's the case, why do we have to fill in PVC care plans and review and score them every day? If removing them doesn't alter the rate of BSI why has there been such a lot of work getting an audit trail around venflon insertion? Furthermore it is contrary to the comments on P99 Line 3
IVAD	P79, Line 3 (table)	There are case reports of anaphylaxis with chlorhexidine impregnated non-tunnelled central venous catheters: Two episodes of life-threatening anaphylaxis in the same patient to a chlorhexidine-sulphadiazine-coated central venous catheter. Stephens R, Mythen M, Kallis P, Davies DW, Egner W, Rickards A. Br J Anaesth. 2001 Aug;87(2):306-8. Anaphylaxis to chlorhexidine-coated central venous catheters: a case series and review of the literature. Guleri A, Kumar A, Morgan RJ, Hartley M, Roberts DH.

		Surg Infect (Larchmt). 2012 Jun;13(3):171-4. doi: 10.1089/sur.2011.011.