

Infection Prevention & Control (IPC) program: Rockets (Do's) & Pitfalls (Don'ts)

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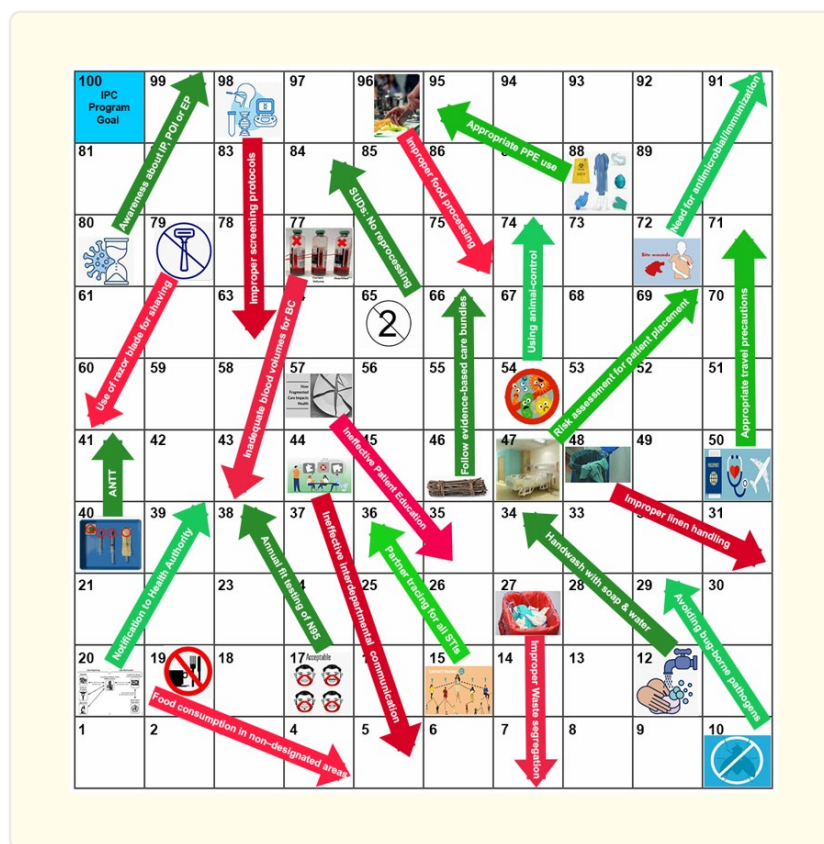
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Lessons to be learned from Rockets (Do's) & Pitfalls (Don'ts) of IPC program Board Game

Rockets (Do's)	Pitfalls (Don't)
Wash your hands with soap and water when hands are visibly dirty or visibly soiled with blood or other body fluids or after using the toilet [1].	Food consumption in non – designated areas in health-care facilities.
Reinforce desired behaviors with regular feedback on appropriate Personal Protective Equipment (PPE) use [2].	Improper screening protocols of in-patients (MRSA, CRE, etc.)
Aseptic non-touch technique (ANTT): Increase patient safety by reducing the risk of introducing infection into a susceptible body site during procedures such as intravenous therapy, wound care and urinary catheterization [3].	Collection of inadequate volumes of blood for blood culture (BC) [9-11].
Follow risk assessment guide for patient placement [4].	Ineffective communication prior to interdepartmental shift of in-patients.
Awareness regarding incubation period (IP), period of infectivity (POI) or exclusion period (EP) of all microorganisms.	Ineffective patient/ bystander education.
Appropriate pre & post-exposure antimicrobial &/or immunization prophylaxis after thorough risk assessment.	Improper waste segregation [12].
Take appropriate travel precautions [5].	Improper processing of food [12].
Using animal-control to prevent infections [5].	Improper handling practices of linen [12].
Avoiding bug-borne pathogens [5].	Using razor blade for shaving. If hair removal is essential, it should be removed using clippers with a disposable head and timed as close to the operating procedure as possible [12, 13].
Single use devices (SUDs): Discard after one use. Should not be reprocessed [6].	
Annual fit testing of N95 respirators [7].	
Follow evidence-based care bundles [8].	

For all STIs (Sexually transmitted infections), partner tracing is mandatory.	
Timely Notification to Health Authority regarding suspected/confirmed infectious diseases, as per regional/country-wise policy.	

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Conflict of interest

The authors declare no conflict of interest.

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