

### Extended Spectrum Beta Lactamase

#### **INFORMATION BROCHURE**

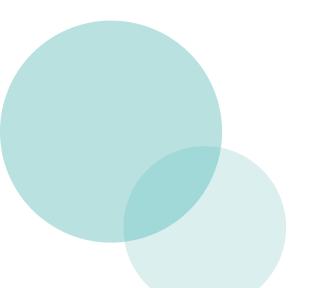


If you are having visits from a home nurse or other health care workers, they may need to take some extra precautions to protect other patients in their care.

Good hand hygiene practices (especially after going to the toilet) will be important when you are discharged. Otherwise no extra precautions need to be taken.

Next time you go to hospital, it is important to tell your nurse or doctor that you have previously had ESBL.

Contact the Infection Control Coordinator, for any further questions Phone: (02) 4348 8511.







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# Helping to prevent the spread of infection





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## What is Extended Spectrum Beta Lactamase?

**Beta lactamases** are enzymes produced by many species of bacteria which destroy one or more antibiotics. These species of bacteria are usually found in the bowel and urinary tract, however the bacteria can infect or colonise other sites of the body. ESBL's are considered multi-resistant organisms (MRO) due to the large number of antibiotics the bacteria are resistant to.

#### What is the difference between being infected and being colonised with bacteria?

Being **colonised** means that the bacteria is present and multiplying but it does not cause disease or infection. All of us are colonised by a certain amount of bacteria on our skin and in our body. Colonisation of ESBL does not usually require treatment.

Being **infected** means that the bacteria is present and multiplying, but is causing a disease or infection. For example: when you get a boil the bacteria that has been present on your skin has enabled an infection to occur.

#### How do you get ESBL?

ESBL can be spread on to others on the hands of health care workers, visitors and patients or via contaminated equipment such as bed rails, bathroom fixtures or medical equipment.

### Why do we manage ESBL differently to other bacteria?

This bacteria has become resistant to a number of different antibiotics, so if a patient is infected with ESBL we have a limited selection of antibiotics to use. Therefore it is important to be vigilant and reduce the opportunity for it to spread from patient to patient.

### How do we stop the spread of ESBL?

Hand Hygiene is the most important step in preventing the spread of an ESBL infection. To clean hands, an alcohol hand rub or soap and water can be used. It is important for staff, patients and visitors to clean their hands every time they enter or leave a patient room or area.

### Please feel free to remind your doctor, nurse or other health care workers about hand hygiene.

**Cleaning** medical equipment between patient use and keeping the hospital clean is very important.

**Single rooms and Contact Precautions** provide an extra physical barrier between patients, which is why you have been given your own room. Staff will be wearing gloves and long sleeved gowns when providing personal care to you. Your visitors may also be instructed to wear gloves and long sleeved gowns whilst visiting you.

#### Are my family and friends at risk?

No. People in good health are not at risk of developing ESBL. Normal contact including kissing is fine.

However, family and friends may be at an increased risk if they are immunocompromised, e.g. on chemotherapy or if they have dermatitis or eczema. (If you are unsure, please discuss with the nurse in charge or contact the Infection Control Coordinator.)

There is no need for separate eating or drinking utensils and partners can share beds without any increased risk.

Linen and clothing can be taken home, (in a plastic bag), washed and dried as normal.

