# **HAI-Lights Newsletter**

An infection prevention and control resource for academic partners

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**HAI-Lights Refresher Question –** The Summer 2025 newsletter discussed measles transmission and prevention. Answer this question to test your measles knowledge; **solution on page three**.

#### Which of the following symptoms is unique to measles?

- a) Conjunctivitis
- b) Moderate fever
- c) Dry cough
- d) Koplik spots



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## **Respiratory Disease Season**

It is important to **protect patients and healthcare workers** during the upcoming respiratory disease season by preparing and implementing preventive measures highlighted in this newsletter.

RSV is a common respiratory virus that spreads through droplets when an infected person coughs or sneezes, either by direct contact (i.e., bodily fluid from an infected individual) or indirect contact (i.e., touching a contaminated surface or object) (CDC, 2025d). RSV spreads in the fall and winter, usually peaking in December and January (CDC, 2025d), and can be difficult to distinguish from other respiratory viruses, like flu and COVID-19 (i.e., diagnosis and treatment difficulty or delays).

The flu virus spreads through droplets when a sick person coughs, sneezes, or talks (CDC, 2025c), or through touching a contaminated surface or object, then touching the mouth, nose, or eyes (CDC, 2025c). Anyone can become severely sick with the flu, but certain people are at higher risk of developing serious flu-related complications: 1) people 65 years and older, 2) people with chronic medical conditions (e.g., asthma, diabetes, or heart disease), 3) pregnant women, and 4) children younger than five years (CDC, 2025c).



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<u>COVID-19</u> has a range of respiratory symptoms (e.g., fatigue, shortness of breath, fever), from mild to severe, that can affect more than just the respiratory system, and spread without symptoms (CDC, 2025b). Virus particles are invisible to the naked eye; when someone with COVID-19 exhales, the droplets contain virus particles that can be inhaled by others and contaminate nearby surfaces (CDC, 2025b).

### **Respiratory Hygiene**

Respiratory hygiene and cough etiquette can prevent respiratory pathogen transmission with or without symptoms, decreasing transmission risk (CDC, 2007). Protect yourself and others from deadly germs:

- Wash your hands; follow and enforce proper hand hygiene.
- Remind others to **cover coughs and sneezes** with tissues or elbows; perform proper hand hygiene immediately afterward.
- Put hygiene supplies, <u>educational signs</u>, and no-touch waste bins in areas accessible to staff, patients, and visitors.
- Encourage **prompt testing** for respiratory symptoms for timely and appropriate isolation, quarantine, and treatment.
- Maintain <u>proper ventilation</u> and three feet of space between people in shared spaces.
- Regularly <u>clean frequently touched surfaces</u> (e.g., countertops, handrails, doorknobs).



### **Respiratory Disease Infection Control Precautions**

RSV: Standard Precautions should be followed for the duration of illness, along with Contact Precautions for infants, children, and immunocompromised patients. Extend the duration of Contact Precautions for immunocompromised patients due to prolonged virus shedding. Polymerase chain reaction (PCR) tests are highly effective at detecting RSV, but the reliability of antigen testing to determine when to remove patients from Contact Precautions is uncertain.

<u>Flu</u>: **Standard and <u>Droplet Precautions</u>** should be implemented for patients in a healthcare facility with suspected or confirmed flu for **7 days after illness onset or 24 hours after the resolution of fever and respiratory symptoms, whichever is longer**. Facilities may apply Droplet Precautions for longer periods based on clinical judgment, such as in the case of children or immunocompromised patients, who may shed the virus for longer periods of time.

<u>COVID-19</u>: Implement **Standard and <u>Airborne Precautions</u>**. Aerosol-generating procedures should take place in an airborne infection isolation room, if possible. Provide respirators or well-fitting facemasks to patients with suspected or confirmed COVID-19 or to patients with any respiratory symptoms (e.g., runny nose, cough, sneeze). Patients should not be cohorted unless they have confirmed COVID-19 through testing.

## **CDC Project Firstline**



When we practice consistent infection control—every person, every action, every day—lives are saved. The <a href="Healthcare Safety Unit">Healthcare Safety Unit</a> joins <a href="Project Firstline">Project Firstline</a>, a CDC-led **infection control training collaborative** <a href="for-healthcare">for healthcare</a> workers. Explore these resources and share with peers: 1) <a href="Recognizing Risks in Healthcare">Recognizing Risks in Healthcare</a>, 2) <a href="Learn Where Germs Live in Healthcare">Learn Where Germs Live in Healthcare</a>, and 3) <a href="Infection Control Guidance">Infection Control Guidance</a> for Respiratory Viruses.

View this training about Project Firstline resources: Infection Control Practices for Respiratory Virus Season.

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### Antimicrobial Use and Resistance



Antibiotics are a helpful treatment tool, but do not work on infections caused by viruses. Unnecessarily prescribing antibiotics will not help, and the side effects may cause more harm than the infection itself. Read more about antibiotic prescribing do's and don'ts here: <a href="CDC">CDC's Antibiotic Prescribing and Use</a>.

## **Healthcare Safety Unit**

The Department of State Health Services <u>Healthcare Safety Unit</u> promotes **safe and quality healthcare through awareness, education, transparency, monitoring, and response**, improving the well-being of all Texans. The Unit has two multidisciplinary groups: 1) Epidemiologic Investigations and 2) Data and Training.

#### **Additional Resources**

- Subscribe to the HAI-Lights Newsletter and provide feedback to help us improve
- CDC Infection Control Basics
- Association for Professionals in Infection Control and Epidemiology (APIC)
- Texas Society of Infection Control and Prevention (TSICP)

**HAI-Lights Refresher Answer:** Which symptom is unique to measles?

- a) Conjunctivitis
- b) Moderate fever
- c) Dry cough
- d) Koplik spots Tiny white spots that may appear inside the mouth two to three days after measles symptoms begin.



### References

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