

September/October 1981

Volume 2/Number 5

Editorial

Rubella Policies for Hospitals and Health Workers

Stephen Schoenbaum, M.D.

Original Articles

Clinical, Epidemiologic and Microbiologic Features of a Persistent Outbreak of Amikacin-resistant Serratia marcescens
Julio C. Arroyo, M.D.; W. Lloyd Milligan, Ph.D.;
Bosko Postic, M.D.; Jimmie Northey, M.T. (ASCP);
Ellen Parker, R.N.; and Charles S. Bryan, M.D.

Excessive Levels of Gram-Negative Bacteria in Hemodialysis Machines Because of Inadequate Cleaning Guidelines

Inge Gurevich, R.N., M.A.; Fay Williams, M.T.; and Burke A. Cunha. M.D.

Comparison of Injected and Oral Polio Vaccine for Booster Immunization During the 1979 Polio Outbreak in Lancaster County, Pennsylvania Robert G. Doe, M.D.; Bruce Keeger, D.P.H.; and John L. Randall, M.D.

Nosocomial Urinary Tract Infection: A Prospective Evaluation of 108 Catheterized Patients
Alan I. Hartstein, M.D.; Susan B. Garber, R.N.;

Thomas T. Ward, M.D.; Stephen R. Jones, M.D.; and Virginia H. Morthland, B.S.

Rubella Immunization of Hospital Personnel: A Debate

Martin E. Evans, M.D. and William Schaffner, M.D.

AHA Guidelines

Recommendations for the Control of Rubella Within Hospitals

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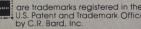
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*Brandberg A, Holm J, Hammarsten J, et al: Paper II, in *Problems in the Control of Hospital Infection, Royal Society of Medicine International Congress and Symposium Series No. 23.* London, Academic Press Inc. Ltd.

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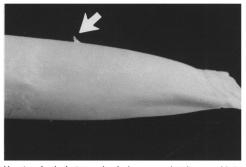


Cut Risks, Not Fingers.

Problem

Culture specimen collection tubes which utilize a glass ampule for storing transport medium increase the risk of infection via pathogenic microorganisms on the part of physicians, nurses, and medical technologists alike. The manual crushing of the glass ampule, which can require up to 15 lbs. of actuation force, may result in glass fragments puncturing the plastic tube material, lacerating or piercing the finger of the user, and thus permitting immediate or subsequent infection in the handling process.

Recent clinical documentation on the subject has pointed out the potential hazards such tubes present, by providing a portal of entry for such virulent microorganisms as hepatitis A and B, and non-A, non-B hepatitis viruses.¹



Unretouched photograph of glass ampule after crushing.

The fact that most culture tubes are narrow in diameter also increases the risk of contact between the swab and the top of the tube as the swab is returned for immersion into the medium. Again, improper or inadvertent handling of the tube may result in contact with specific pathogens.

Once contaminated, the tube presents a definite health hazard for all who handle the tube during the collection, transport and testing process, and one which may not be apparent to those who come into direct contact with it.

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¹ Wasielewski, Joseph, Girard, Susan, and Lim, Audrey. "Injury Resulting from Crushed Glass Ampules." *Laboratory Medicine*, Vol. 11, No. 9, September 1981. Reprints available on request.



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