

# Hospital-acquired infections

Reducing your patients' risk with disposables

When patients come to the hospital, they expect to get better. No matter how good their care is, if patients acquire an infection while in the hospital, they face longer stays, increased costs, and even the risk of death. The number of hospital-acquired infections in the U.S. each year are alarming — and many are preventable. Lower reimbursement rates and wider reporting mandates have increased the pressure on hospitals to reduce preventable HAIs.

## The high toll of hospital-acquired infections

The CDC estimates that HAI is the eighth leading cause of death in the U.S.<sup>12</sup> Hospitalacquired infections are a serious problem and a threat to patient health:

- There are an estimated 1.7 million HAIs at U.S. hospitals each year.<sup>1</sup>
- Annually, 98,987 deaths in the U.S. are attributed to HAIs.<sup>1</sup>

### Putting a price on infection

Regardless of the reason of their initial admission, patients with an HAI often incur significant costs in expenses and length of stay:

- Each infection adds between \$12,197 and \$15,275 in excess health care costs.<sup>6,2</sup>
- Preventable HAIs in critically ill patients can increase length of stay in the ICU by 11.4 days.<sup>8</sup>
- Bloodstream infections in critically ill patients result in doubling of ICU stay and adding an average of \$40,000 in excess costs.<sup>5</sup>

#### **Decreasing reimbursement**

Medicare and private insurance companies will soon reduce or eliminate their reimbursement for certain types of infections, adding to the economic pressures on hospitals to reduce HAIs:

- New Medicare guidelines deny reimbursement for some types of HAI
- The guidelines will cost hospitals an estimated \$91 million per year.<sup>7</sup>
- Medicare now requires conditions present on admission to be documented by a physician, potentially increasing the number of infections labeled as hospital-acquired.<sup>9</sup>

#### Finding ways to reduce risk

Facing these challenges, hospitals need to do all they can to reduce their patients' risk of HAI. Since drug-resistant pathogens can persist on surfaces for weeks, one way to reduce the risk of HAI is to decrease the number of supplies reused between patients.<sup>4</sup> Reusable supplies are proven reservoirs of pathogens:



#### Philips disposable supplies

As part of a comprehensive HAI policy, disposable supplies can help reduce your patients' risk of infection.<sup>4,10</sup> Philips Healthcare offers a range of disposable supplies to meet your facilities' needs — blood pressure cuffs, ECG leads,  $SpO_2$  sensors and more, in a wide variety of sizes for patients of all ages.

Risk	Philips Disposable Product Offering	
77% of reusable ECG leads have been shown to harbor one or more antibiotic-resistant pathogens – even after being cleaned and prepared for the next patient. <sup>3</sup>		<ul> <li>Philips Disposable ECG Lead Sets</li> <li>Seamless patient flow, quality assurance while reducing risk of HAI</li> <li>Leads last up to 25 connection cycles</li> <li>Telemetry and defibrillator compatible</li> <li>Lightweight, PVC free, peelable ribbon-style cable; customized fit for every patient</li> </ul>
66% of reusable SpO <sub>2</sub> sensors ready for the next patient were contaminated with bacteria. <sup>10</sup>		<ul> <li>Philips Single Patient Use Disposable SpO<sub>2</sub> Sensors</li> <li>Designed to last a single patient's average hospital stay</li> <li>One sensor fits large adult to pediatric patients</li> <li>Comfortable wrap designs for adults, infants and neonates</li> </ul>
Intentionally contaminated supplies have been found to remain contaminated after cleaning, disinfection or sterilization measures. <sup>11</sup>	PHILIPS PHILIP	<ul> <li>Philips Single Patient Disposable NIBP Cuffs</li> <li>Soft material for greater patient comfort</li> <li>Full range of color-coded sizes</li> <li>Single or double hose models</li> <li>latex- and PVC-free</li> </ul>

#### References

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<sup>7</sup>The Cost of Errors (Modern Healthcare, June 2, 2008) http://www.modernhealthcare.com/article/20080602/SUB/503568050

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<sup>9</sup> POA (present-on-admission) Coding Challenges (Modern Healthcare, June 2, 2008) http://www.modernhealthcare.com/apps/pbcs.dll/article?AID=/20080602/SUB/982794939/-1/ toc02.06.08

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