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**NEARLY 1 IN 20 HOSPITALIZED PATIENTS ANNUALLY ACQUIRE AN "HAI"**  
 Central line-associated bloodstream infections (CLABSIs) are considered one of the most deadly healthcare-associated infections (HAIs). Preventing HAIs, and CLABSIs in particular, has become a national patient safety priority.

**MORTALITY RATES ASSOCIATED WITH CLABSI INFECTIONS ARE AS HIGH AS**



**EACH CLABSI INFECTION COSTS MEDICARE: \$26,000**

**WHY MEASURES MATTER**

For the past eight years, CLABSI initiatives have saved as much as \$1.8 billion in excess healthcare costs.\*

**\$1.8 BILLION SAVED**



**PROGRESS SO FAR**

As promising as these results have been, there is more work to be done.



For the last two decades, the CDC—along with private partners—increased efforts at reducing rates of HAIs, including CLABSIs.



In 2003, NQF endorsed a measure developed by the CDC that addresses CLABSI rates.



27 states are now requiring public reporting of certain HAIs, including CLABSIs, for all their hospitals.

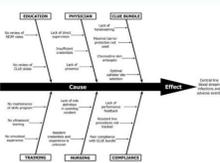


Under Medicare, hospitals are encouraged to curb HAIs. Starting in FY2015, HHS reduces payments to hospitals that have the highest HAIs (top quartile) by 1%.

\* (CDC estimate) <http://www.cdc.gov/hai/progress-report/index.html> 02-2016. Illustration: FuelEd, Inc.



**Marc Mullen**  
 Vice President/General Manager  
 OptiFreight® Logistics, a Cardinal Health company



**Hand Washing**

- The CDC advises hospital staff to always disinfect hands:
  - before patient contact
  - after contact with blood, body fluids, or contaminated surfaces (even if gloves are worn)
  - before invasive procedures
  - after removing gloves (gloves are not 100% preventative).
- To disinfect your hands, always use soap and water or hand sanitizer.
- Hands-free sanitizer dispensers are a quick way to disinfect and reduce the spread of infection.



Infection Prevention in Conversation is the podcast of the HIS journals, the Journal of Hospital Infection and Infection Prevention in Practice. In an informal setting, Dr Gemma Winzor talks to expert guests about current research, challenges and opinions in infection prevention and control (IPC). An engaging listen for infection control specialists, healthcare professionals or anybody with an interest in infection control, microbiology, epidemiology or healthcare more broadly. The podcast covers a wide variety of subjects in infection control, allowing the stories behind recent research to come to the front as guests discuss their personal experiences, careers and interests in IPC. Spectrum of conditions caused by HIV infection "AIDS" and "Aids" redirect here. For other uses, see AIDS (disambiguation). Medical conditionHIV/AIDSOther namesHIV disease, HIV infection[1][2]The red ribbon is a symbol for solidarity with HIV-positive people and those living with AIDS.[3]SpecialtyInfectious disease, immunologySymptomsEarly: Flu-like illness[4]Later: Large lymph nodes, fever, weight loss[4]ComplicationsOpportunistic infections, tumors[4]DurationLifelong[4]CausesHuman immunodeficiency virus (HIV)[4]Risk factorsUnprotected anal or vaginal sex, having another sexually transmitted infection, needle sharing, medical procedures involving unsterile cutting or piercing, and experiencing needstick injury[4]Diagnostic methodBlood tests[4]PreventionSafe sex, needle exchange, male circumcision, pre-exposure prophylaxis, post-exposure prophylaxis[4]TreatmentAntiretroviral therapy[4]PrognosisNear normal life expectancy with treatment[5][6]11 years life expectancy without treatment[7]Frequency64.4 million - 113 million total cases[8]1.5 million new cases (2021)[9]38.4 million living with HIV (2021)[8]Deaths40.1 million total deaths[8]650,000 (2021)[8]Human immunodeficiency virus infection and acquired immunodeficiency syndrome (HIV/AIDS) is a spectrum of conditions caused by infection with the human immunodeficiency virus (HIV).[9][10][11] a retrovirus.[12] Following initial infection an individual may not notice any symptoms, or may experience a brief period of influenza-like illness.[4] Typically, this is followed by a prolonged incubation period with no symptoms.[5] If the infection progresses, it interferes more with the immune system, increasing the risk of developing common infections such as tuberculosis, as well as other opportunistic infections, and tumors which are otherwise rare in people who have normal immune function.[4] These late symptoms of infection are referred to as acquired immunodeficiency syndrome (AIDS).[5] This stage is often also associated with unintended weight loss.[5] HIV is spread primarily by unprotected sex (including anal and vaginal sex), contaminated blood transfusions, hypodermic needles, and from mother to child during pregnancy, delivery, or breastfeeding.[13] Some bodily fluids, such as saliva, sweat and tears, do not transmit the virus.[14] Oral sex has little to no risk of transmitting the virus.[15] Methods of prevention include safe sex, needle exchange programs, treating those who are infected, as well as both pre- and post-exposure prophylaxis.[4] Disease in a baby can often be prevented by giving both the mother and child antiretroviral medication.[4] Known as the Berlin Patient and the London Patient, two individuals have been reported cured of AIDS and the NIH and Gates Foundation pledged \$200 million focused on developing a global cure for AIDS.[16] While there is no broadly available cure or vaccine, antiretroviral treatment can slow the course of the disease and may lead to a near-normal life expectancy.[5][6] Treatment is recommended as soon as the diagnosis is made.[17] Without treatment, the average survival time after infection is 11 years.[7] In 2021, about 38 million people worldwide were living with HIV and 650,000 deaths had occurred in that year.[8] An estimated 20.6 million of these live in eastern and southern Africa.[18] Between the time that AIDS was identified (in the early 1980s) and 2021, the disease has caused an estimated 40





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