Name of Policy:	Bed Bug Procedure	THE UNIVERSITY OF TOLEDO MEDICAL CENTER	
Policy Number:	3364-110-01-11	MEDICAL CENTER	
Department:	Nursing Services		
Approving Officer:	Chief Nursing Officer		
Responsible Agent:	Chief Nursing Officer		
Scope:	The University of Toledo Medical Center and its Medical Staff	Effective Date: 6/1/2023 Initial Effective Date: 08/01/2020	
New policy proposal Minor/technical revision of existing policy  X Major revision of existing policy Reaffirmation of existing policy			

# (A) Policy Statement

This procedure is authorized by the University's Nursing Service General Nursing Guidelines, Bed Bug Guideline.

# (B) Purpose of Policy

This procedure assists to effectively assess, identify, and address bed bugs to enact proper procedures to avoid a possible infestation at UTMC. The following is a decision grid of recommended steps for managing a patient or employee suspected or confirmed of having bed bugs.

## (C) Procedure

# 1. Decision Grid for Bed Bug Management (specific instructions follow):

Patient with Bed Bugs				
Level of Infestation	Procedure			
Report of bed bugs, no bugs found, no bites found.	Contact Environmental Services to clean room thoroughly. Continue to inspect patient periodically. No additional precautions needed at this time.			
Report of bed bugs. No bed bugs found. Bites on patient.	Contact Environmental Services to clean room thoroughly. Continue to inspect patient periodically. No additional precautions needed at this time.			
Bed bugs found on patient or environment. No bites on patient.	Contact Environmental Services to clean room thoroughly. See details below (starting on page 2) for procedures with patient.			
Bed bugs found on patient or environment. Bites on patient.	Contact Environmental Services to clean room thoroughly. See details below (starting on page 2) for procedures with patient.			
Employee has many bites but does not know if he/she has bed bugs.	No precautions needed. Instruct employee to consult with a pest control service for their living environment.			
Report of minimal bed bugs at home, only seen in mattresses & furniture. Employee may or may not have bites.	No precautions needed. Instruct employee to consult with a pest control service for their living environment.			

Employee with Bed Bugs				
Level of Infestation	Procedure			
Report of major infestation in home or apartment building, no bugs seen on employee or at work.	Handle case by case, being sensitive to the employee's right to privacy from having this disclosed. (see page 4)			
Bugs found on employee or employee belongings.	Handle case by case, being sensitive to the employee's right to privacy from having this disclosed. (see page 4)			

# 2. Patient with bed bugs, Inpatient Areas (including inpatient behavioral health) and Emergency Department (ED):

- (a) If there is possible/questionable bed bug infestation (e.g., report of bed bugs, but no bed bugs seen, with/without bed bug bites):
  - (i) Place patient in room per normal protocol (private room if possible; room with door preferred).
  - (ii) Inspect patient periodically for bed bugs. All staff should know what a bed bug looks like.
  - (iii) Ensure that appropriate PPE is worn during patient interactions
- (b) If bugs are found on an incoming patient with or without bites (e.g., in ED, just admitted from ED or being directly admitted):
  - (i) Place patient in private room and put contact precautions sign on door.
  - (ii) Remove all clothing and belongings and place in plastic bag with gooseneck tie (not bunny ear tie). Instruct family to take bag home immediately (or as soon as possible).
  - (iii) Inspect body for additional bed bugs as well as inspection of skin integrity due to bites. Provide clean gown or clothes to patient.
  - (iv) Limit traffic in room.
  - (v) Save bug in specimen cup for identification.
  - (vi) Contact Environmental Services (EVS) to clean room thoroughly. Close down the ED room until a terminal bed bug cleaning can be performed by EVS.
  - (vii) If patient is being admitted from the ED, notify House Supervisor, EVS and Lead Nurse/Department Director. Do not use the ED bed for transport since it could be housing bed bugs. Use a clean bed or wheelchair with clean linen.
  - (viii) If patient has been sitting in a waiting room, determine action on a case-by-case basis.
    - (a) If bugs were seen on patient, remove or isolate chair, if possible.
    - (b) If bugs were not seen on patient, contact EVS to clean area thoroughly.
- (c) If bed bugs are found on an inpatient who has been in the hospital, assess the need to move the patient to new room.
  - (i) If a patient will be discharged within two (2) days, may leave in room.
    - (a) Remove all clothing and all belongings and place in plastic bag with gooseneck tie (not bunny ears tie). Instruct family to take bag home immediately (or as soon as possible). Educate family.
    - (b) Inspect body for additional bed bugs as well as inspection of skin integrity due to bites. Provide clean gown or clothes to patient.
    - (c) Save bug in specimen cup for identification.
    - (d) Strip all linen from room and place into goose neck tied bag to go to laundry and place in appropriate infested linen kits.

- (e) Place trash into goose neck tied bag and call Environmental Services to pick up as soon as possible.
- (ii) Post contact precautions sign outside room and limit traffic in room.
  - (a) Limit movement of patients in the hospital if there is still a possibility, they have bed bugs.
  - (b) Once patient has been cleared of any bed bug infestation, remove from contact precautions.
  - (c) Notify Environmental Services when a patient is discharged so they can clean the room thoroughly.
- (iii) If <u>patient will NOT be discharged within two (2) days</u>, ensure the patient is in a private room:
  - (a) Remove all clothing and all belongings and place in plastic bag with gooseneck tie (not bunny ears tie). Instruct family to take bag home immediately (or as soon as possible). Give family educational brochure/flyer.
  - (b) Inspect body for additional bed bugs as well as inspection of skin integrity due to bites. Provide clean gown or clothes to patient.
  - (c) Save bug in specimen cup for identification.
  - (d) Strip all linen from room and place into goose neck tied bag to go to laundry and place in appropriate infested linen kits.
  - (e) Place trash into goose neck tied bag.
  - (f) Leave everything in old room (bags of linen, bed, furniture, trash)
  - (g) Notify Environmental services so they can clean the room thoroughly.

#### (d) In any of the above cases,

- (i) Investigate the source of the bug, they could have come in on patient or family. This will help with control efforts.
- (ii) Visitors should be assessed on a case-by-case basis. Once the patient is bug free, no restrictions unless it is determined that the patient's family also has a bed bug infestation in their home. Discuss findings with family and include bed bug educational information (available on the referenced websites below). Also, may need to appeal to the visiting family steps to take not to re-infest the patient's environment while in the hospital.
- (iii) Call Environmental Services to inspect other areas where the patient and family have been in the hospital.
- (iv) Periodically inspect patient for presence of bed bugs.
- (v) If a major bed bug infestation is discovered, the unit Director will notify the EVS Manager or Director to discuss the situation and determine if the room(s) or area should be closed and a pest company called. The pest control company will carefully inspect the infested room or area and possibly adjacent rooms (beside and above and below). The pest control company determines the extent of infestation, what treatment should occur, and how long the room should be closed after extermination. When inspecting, they will pay special attention to cracks and crevices, mattresses, bed frames, behind wallpaper, behind picture frames, outlets, and door and window molding. They will look for dark spots of dried bug excrement, light-brown molted skin of nymphs, and the bugs themselves which look similar to small, reddish ticks.
- (e) Nursing Assessment for Discontinuing Contact Precautions (Inpatient Areas) after Patient Assessment:

(i) Contact Precautions may be discontinued once the contact precaution steps have been completed and there is documentation of at least 24 hours of no bed bug sightings or new bites being seen.

### 3. Clinics, Ambulatory, Outpatient Areas:

- (a) If bed bugs are suspected, inspect patient:
  - (i) If no evidence of bed bugs, proceed with visit as scheduled.
- (b) If bed bugs found, reschedule appointment, all non-emergent procedures, and tests until patient is free of bed bugs, if possible.
  - (i) Save bug in specimen cup for identification.
  - (ii) Close off all areas the patient has visited, if possible, and call Environmental Services or, for off-sites, property management company for a thorough cleaning.
  - (iii) If a major bed bug infestation is discovered, the Department Director will notify EVS or property management to discuss the situation and determine if the pest control company should be called. Contracted pest control company will carefully inspect the infested area(s). The room should be vacated until inspected. The pest control company determines the extent of infestation, what extermination should occur, and how long the room should be closed after extermination.

# (c) If appointment cannot be rescheduled:

- (i) Place patient's belongings (e.g., purse, coat) in a plastic bag and goose-necktie shut.
- (ii) After the appointment, call Environmental Services for a thorough cleaning and inspection as above (3bii and iii).

## 4. Employee with bed bugs at home

- (a) Handle on a case-by-case basis, being sensitive to the employee's privacy.
- (b) Some suggestions are:
  - (i) Instruct employee to bring minimal belongings to work.
  - (ii) Have employee place items such as purse, bookbag or coat in a sealed bag while at work.
  - (iii) Have employee change shoes when they get to work, putting home shoes in a sealed bag and donning "work" shoes. Before going home, change shoes again. Work shoes do not need to be in a bag.
- (c) Employee who owns their home should contact a professional pest control company for assistance.
- (d) Employee who rents their apartment can contact the Toledo-Lucas County Health Department for assistance if their landlord refuses to get rid of the bugs.

#### 5. Environmental Services' role

- (a) All Environmental Services staff should be educated on how to recognize a bed bug.
- **(b)** Whenever cleaning a room, they should be alert for bugs in the usual hiding places in mattresses and furniture.

#### **6.** Special Comments:

(a) **Bed Bugs** - Small, brownish, flattened insects that feed solely on the blood of its host. The common bed bug, *Cimex lectularius*, is the species most adapted to living with humans. Unlike cockroaches that feed on filth, the level of cleanliness has little to do with most bed bug infestations. They usually feed at night and hide in cracks in the mattress and bed frame or in furniture, bags, and clothes near the bed during the day. They also may hide in bags and other clutter in the home, which is how they make their way into the hospital. Bed bugs can survive for many months without a feeding.

- (b) Diagnosis, Detection Bed bug bites are tiny, painless, and may not itch at first. Repeated bites over a period of time causes some people to become sensitized and they then develop an allergic response and begin itching. Bed bugs do not transmit diseases like mosquitoes do. Evidence of bed bugs on mattresses and furniture include dark spotting and staining, which is the dried excrement of the bugs. Also present may be eggs, eggshells, molted skins of maturing nymphs, rusty or reddish spots of blood, the bugs themselves, and sometimes a sweet, musty or "buggy" smell (though smell is not always present and should not be relied upon as a method of detection).
- (c) Treatment Treatment for infestation of bed bugs requires meticulous extermination of the infected environment and physical removal from the person. Symptoms may be treated with antihistamines and corticosteroids; infected lesions may be treated with antiseptics or antibiotics. Avoid scratching bites to prevent infection.
- (d) **Exposed persons** There is no prophylaxis for exposed persons. The risk of a healthcare worker picking up a bed bug in a hospital and carrying it home is very minimal and would be from sitting on an infested chair or mattress.

#### References:

American Society for Healthcare Environmental Services (ASHES), *Pulling Back the Sheets on the Bed Bug Controversy*; Retrieved from: <a href="http://www.healthcarepestcontrol.com/files/ashes-bedbug-white-paper.pdf">http://www.healthcarepestcontrol.com/files/ashes-bedbug-white-paper.pdf</a>.

Centers for Disease Control and Prevention (CDC); Public Health Image Library (PHIL), Retrieved from: <a href="https://phil.cdc.gov/Details.aspx?pid=12705">https://phil.cdc.gov/Details.aspx?pid=12705</a>

Centers for Disease Control and Prevention (CDC); Parasites, Retrieved from: http://www.cdc.gov/parasites/bedbugs.

Central Ohio Bed Bug Task Force: Retrieved from: http://centralohiobedbugs.org

Pest World.org; Retrieved from: https://www.pestworld.org/all-things-bed-bugs/signs-of-bed-bugs/

United States Environmental Protection Agency, Bed Bugs: Get Them Out and Keep Them Out, Retrieved from: https://www.epa.gov/bedbugs

Toledo-Lucas County Health Department, Bed Bugs Pest Operators and Bed Bugs Do's and Don'ts, Retrieved from: <a href="http://www.lucascountyhealth.com/?s=pest+control">http://www.lucascountyhealth.com/?s=pest+control</a>

Approved by:		<b>Review/Revision Date:</b> 8/2020 6/1/2023
<u>/s/</u>		
Kurt Kless, MSN, MBA, RN, NE-BC	Date	
Chief Nursing Officer		
Review: Review Policy & Standard Committee, Revision Completed By: Samantha Eitniear, MPH, RS CIC &		
Mark Eckhart, MPH, CIC, 6/2023	Next Review Date: 6/1/2026	
Policies Superseded by This Policy: Bed Bug Procedure		

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.