



SHEA

The Society for Healthcare
Epidemiology of America

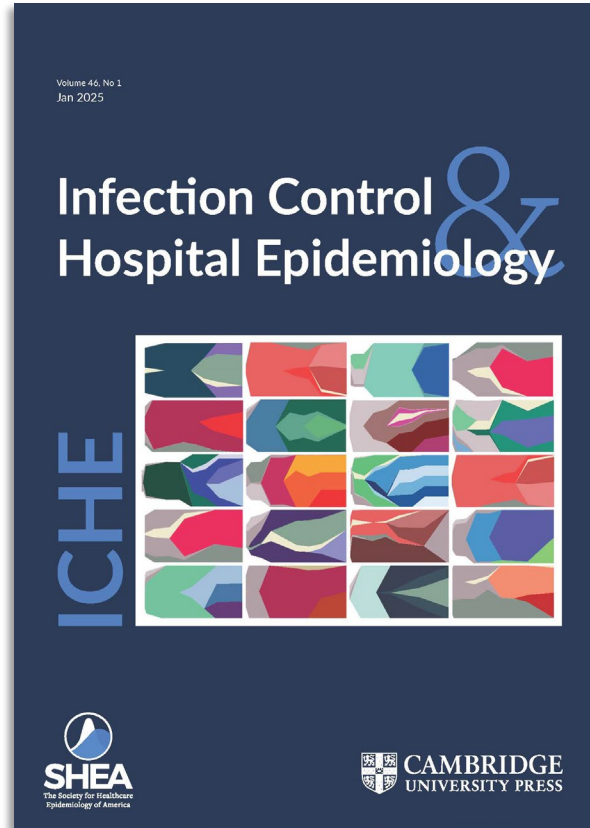
SAFE HEALTHCARE FOR ALL



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ICHE Journal



Infection Control & Hospital Epidemiology publishes scientifically authoritative, clinically applicable, peer-reviewed research on control and evaluation of the transmission of pathogens in healthcare institutions and on the use of epidemiological principles and methods to evaluate and improve the delivery of care. Major topics covered include infection control practices, surveillance, antimicrobial stewardship, cost-benefit analyses, resource use, occupational health, and regulatory issues.

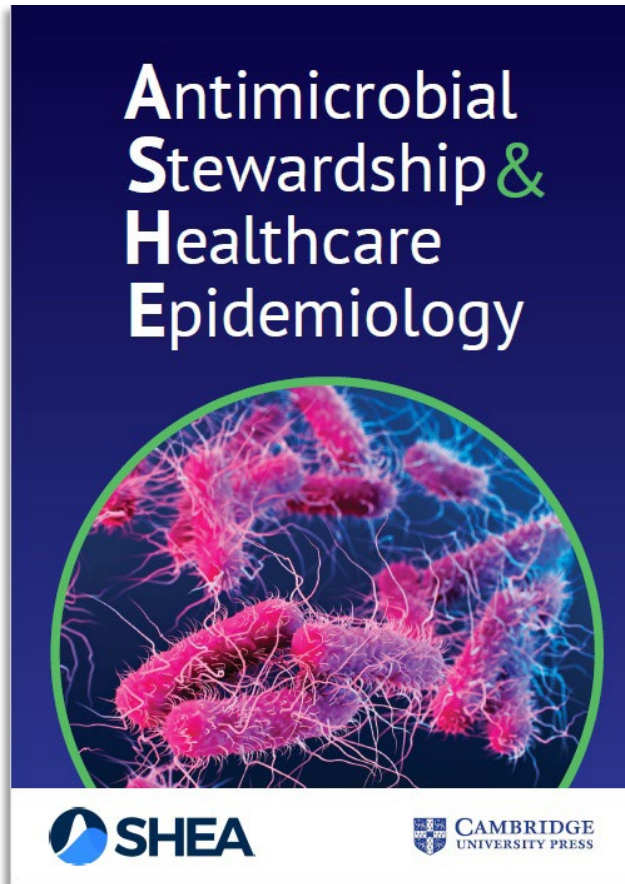
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ASHE JOURNAL



High quality articles across the full spectrum of antimicrobial stewardship and healthcare epidemiology.

Exceptional author experience through constructive peer review, competitive turnaround times, immediate online publication, a streamlined production process, and social media promotion.

Global, **open access journal**, bringing the widest possible impact, reach and discoverability of your research.

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TUNE IN TO SHEA'S PODCASTS



AVAILABLE ON:



Online ID Fellows Course

Primer on Healthcare Epidemiology, Infection Control & Antimicrobial Stewardship



SCAN TO
LEARN MORE





SHEA Members Open Forum

Get ready for real discussion! This is a peer-driven, discussion-based program designed for SHEA members to connect, share experiences, and talk through real-world challenges.



October 29th at 4:00 – 5:00 pm ET

Moderator: Harjot K. Singh, MD, ScM



You Can Help!

Improving Antibiotic Stewardship
and Infection Prevention in
Nursing Homes



eLearning Course





LEARNINGCE
SHEA Online Education Center

Visit
LearningCE
for details!



UPCOMING LIVE PROGRAMS

Measuring the Social & Environmental Impact of Antimicrobial Stewardship & IP

October 6, 2026 | 4:00 – 5:00 pm ET

November 9, 2026 | 4:00 – 5:00 pm ET

Preventing Health-Care Associated Infections in Congregate & Ambulatory Settings

November 19, 2026 | 2:30 – 3:30 pm ET

January 27, 2027 | 4:00 – 5:00 pm ET



Virtual Workshop

Two Day Workshop: November 5 - 6, 2026

Improving Infection Prevention & Antibiotic Use in Long-Term Care: From Guidance to Practice



Connect with SHEA



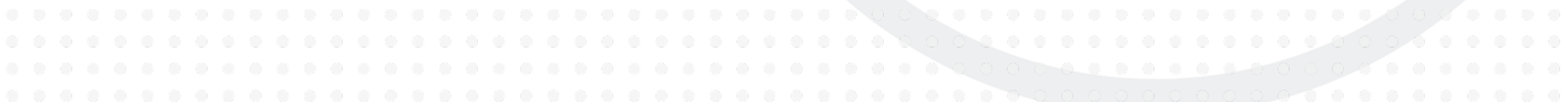
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SHEA Webinar

Town Hall
2026

Housekeeping



- Technical difficulties? Visit: <https://support.zoom.us>
- Webinar recording, PowerPoint presentation, and references available on learningce.shea-online.org
- Streaming Live on SHEA's Facebook page
- Zoom Polling, Q&A & Chat



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September Town Hall Panelists:



Dr. Tom Talbot
Vanderbilt University



Dr. Katie Passaretti
Advocate Health



Dr. Chris Nyquist
Children's Hospital Colorado

Invited Panelist:



Dr. Susan Huang

University of California, Irvine School of Medicine

SEPTEMBER 29, 2026

Isolation Precautions II: Continuing the Conversation

Chris Nyquist MD, MSPH



Adam Hook Design Hooktees.com

August 11, 2026 SHEA Town Hall

Isolation Precautions Recap

Highlights:

- Transmission based isolation : Respiratory isolation pearls
- COVID...still



Links to August Recorded Town Hall <https://learningce.shea-online.org/>

2024 Guideline to Prevent Transmission of Pathogens in Healthcare Settings

(HICPAC draft 11/2023)

- Transmission Pathways
 - Pathogens that spread via the air
 - Continuum of respiratory pathogen transmission through the air
 - Pathogens that spread via touch
 - Physical contact with the pathogen
- Fundamental Elements Needed to Prevent Transmission of Pathogens in Healthcare Settings
 - Hand Hygiene
 - Personal Protective Equipment (PPE)
 - Gloves, Gowns, Masks, Respirators, Eye/Face protection
 - Mask/eye/gown protection with potential splashes
 - Environmental Cleaning and Disinfection
 - Specialized Air Handling

<https://www.cdc.gov/hicpac/php/meeting-materials/index.html>

Now accessible in CDC Archived documents

CDC Updates re: Respiratory Isolation Issues

- Sept 11, 2026: Return to work recommendations- after 3 days if their symptoms are improving, feel well, fever free without fever-reducing medication
- Archive old COVID guidance

Upcoming webinars/ discussions with key stakeholders ongoing:

CDC experts summarizing recent CDC evidence reviews evaluating use of a gown and gloves, as part of the personal protective equipment, during the care of a patient infected with SARS-CoV-2 and the duration of Transmission-based Precautions for patients and residents with acute respiratory virus infection.

Future Plan: Receiving expert feedback on possible draft recommendations followed by posting for public comment October/November 2026

MRSA Precautions in Hospitals

What is Really Needed?

Susan Huang, MD MPH
Chancellor's Professor, Infectious Diseases
Medical Director, Epidemiology & Infection Prevention
University of California, Irvine School of Medicine

MRSA Contact Precautions: Pros & Cons

PRO

1. Extensive shed by humans
2. Extensive transfer to HCP
3. Substantial HCP transfer to patient
4. Barriers prevent pick up/transfer
5. Effective in multiple circumstances
6. Prevents later infection

CON

1. Workflow compliance troublesome
2. Too common → HCP dissatisfaction
3. Piles of laundry or disposable trash
4. Environmental concerns
5. Carriage may not lead to infection
6. Alternatives exist

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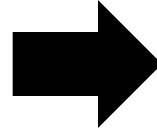
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- 6. Alternatives exist**

**Given effectiveness of CP, not reasonable to drop CP without instituting an alternative.
HCP unhappy with MRSA CP usually because MRSA is too common → needs IPC solution.**

Other Strategies to Prevent MRSA in Hospitals

Can we rank by effectiveness?

- Hand hygiene
- Environmental cleaning
- Active screening
- Decolonization, targeted
- Decolonization, universal
- Antibiotic stewardship
- Vaccination

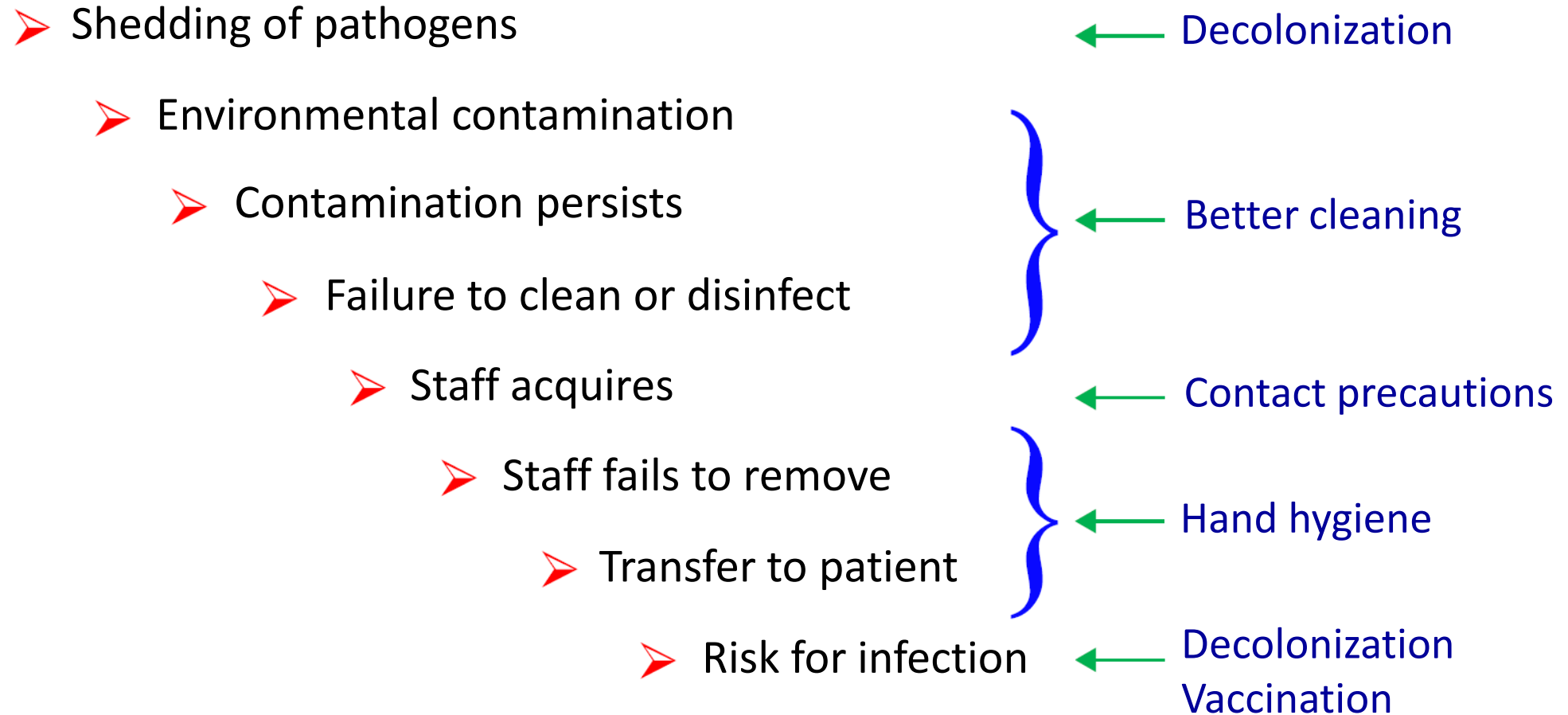


- 1. Hand hygiene**
2. ...
3. ...
4. ...
5. ...
- 6. Antibiotic stewardship***

*Ranked last because not a primary prevention strategy.

Evidence is not prioritized to determine effect on MRSA containment.

Human Pathogen Transmission: Cascade of Unfortunate Events



Decolonization Prevents Cascade of Unfortunate Events

➤ Shedding of pathogens



Prevents shedding

➤ Environmental contamination

➤ Contamination persists

➤ Failure to clean or disinfect

➤ Staff acquires

➤ Staff fails to remove

➤ Transfer to patient

Broad solution for all MDROs
Benefits carriers too

➤ Risk for infection

Impact of Universal Decolonization Trials in Healthcare

Trial	Setting	N	Intervention	Decolonization Impact
Climo et al. ICU Trial ¹	7 Academic Hospitals 9 Adult ICUs	7700	Daily CHG	23% ↓ MRSA/VRE acquisition 28% ↓ Bloodstream infections
Pediatric Scrub Trial ²	5 Academic Hospitals 10 Pediatric ICUs	1500	Daily CHG	36% ↓ Bloodstream infections
REDUCE MRSA Trial ³	43 Community Hospitals 74 Adult ICUs	74,000	Daily CHG 5d bid mupirocin	37% ↓ MRSA clinical cultures 44% ↓ Bloodstream infections
Mupirocin-Iodophor Swap Out Trial ⁴	137 Community Hospitals 233 Adult ICUs	353,000	Mupirocin-CHG vs Iodophor-CHG	Mupirocin superior to Iodophor by 18% for <i>S. aureus</i> ; 14% for MRSA
ABATE Infection Trial ⁵	53 Community Hospitals 194 Adult Non-ICUs	340,000	Daily CHG Mupirocin if MRSA+	Subset effect in patients with devices: 37% ↓ MRSA/VRE clinical cultures 32% ↓ Bloodstream infections
CLEAR Trial ⁶	Post Hospital Discharge	2,100	CHG, Mupirocin qweek x 6 mo	30% ↓ MRSA Infection at 1y 17% ↓ All infection; 85% rehospitalized
Protect Trial ⁶	28 Nursing Homes	14,000	CHG – all bathing, Iodophor 5d qweek	31% ↓ Infection hospitalization/1,000d 18% ↓ All cause hospitalization/1,000d

¹ Climo MW NEJM 2013;368:533-42

² Milstone AM. Lancet 2013;381:1099-1106

³ Huang SS NEJM 2013;368:2255-65

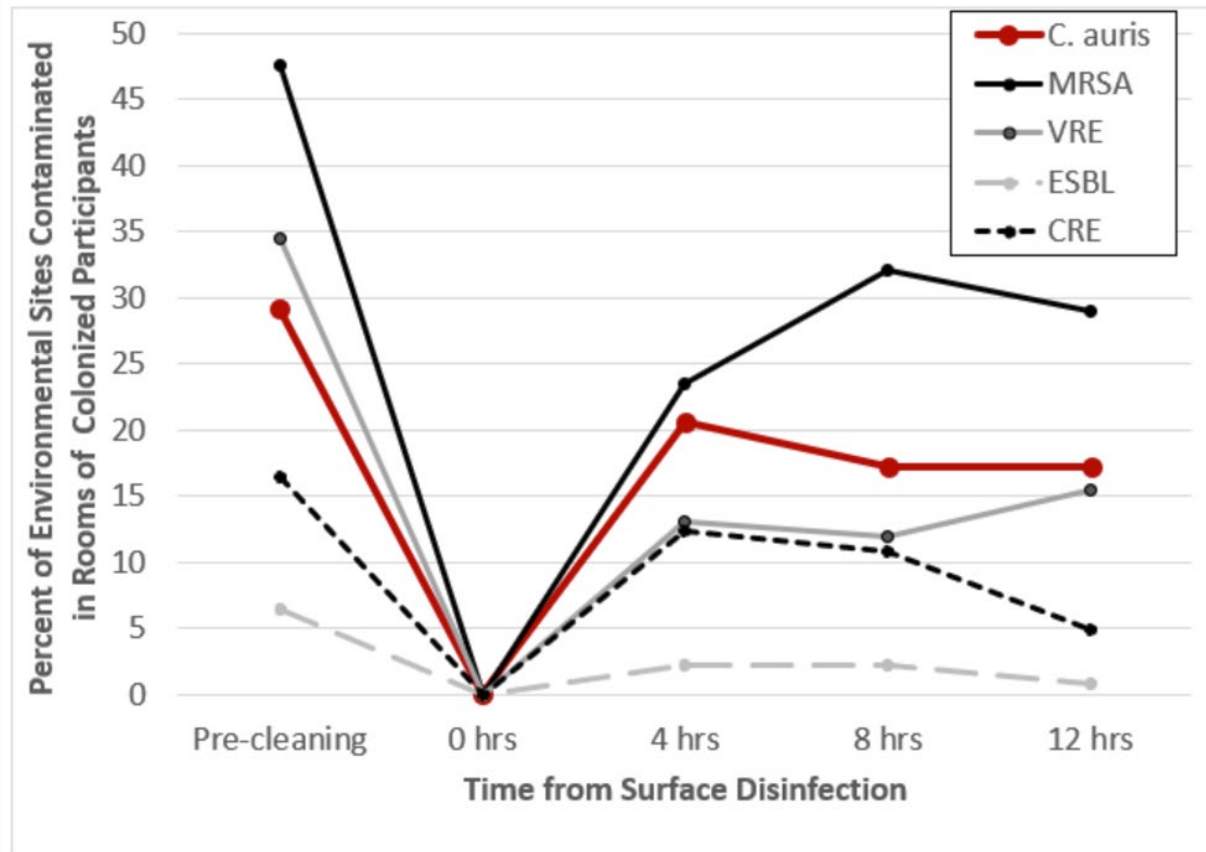
⁴ Huang SS JAMA 2023;330:1337-47

⁵ Huang SS Lancet 2019;393:1205-15

⁶ Huang SS NEJM 2019;380:638-50

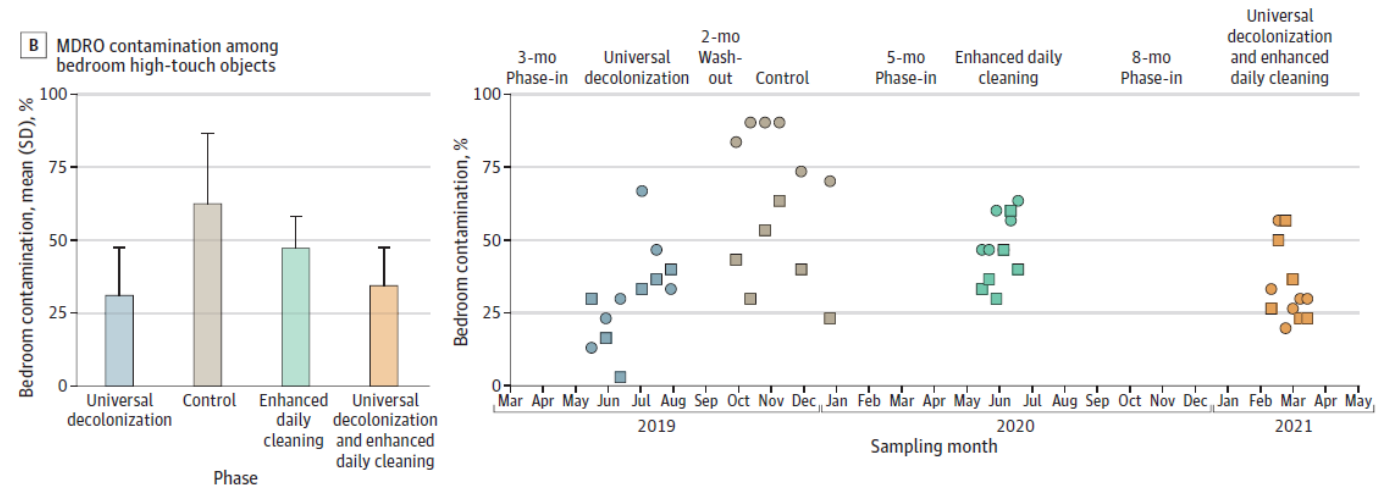
⁷ Miller LG NEJM 2023;389:1766-77

Rebound of MDRO Contamination after Cleaning

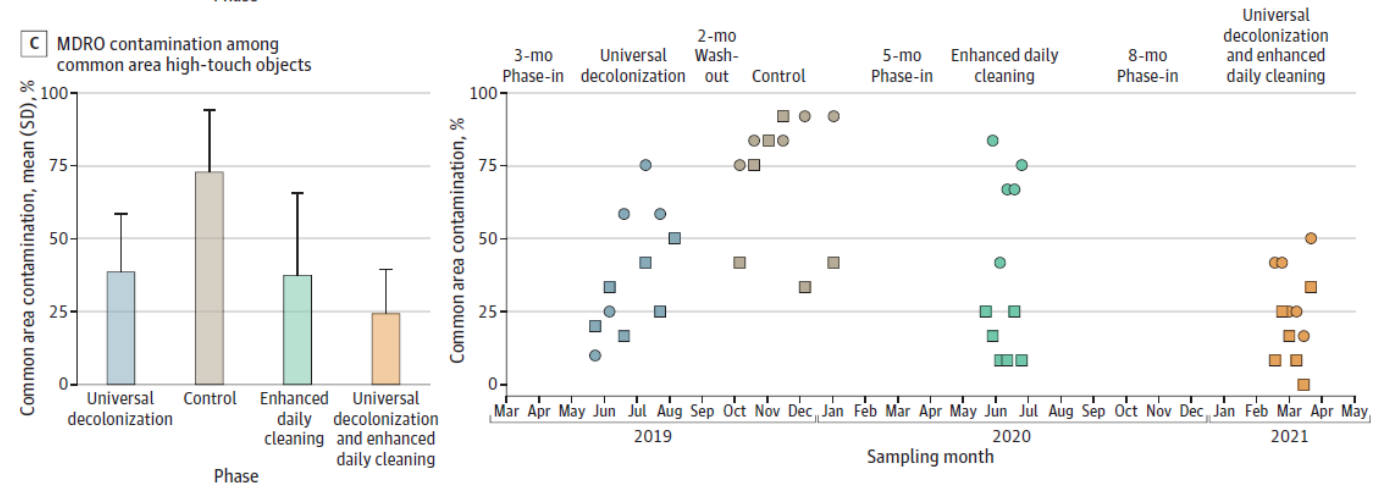


Effect of Enhanced Cleaning vs Decolonization on Environmental Contamination

Nursing Home Bedroom Contamination



Nursing Home Common Area Contamination



Strategies to Prevent MRSA

Ranked by Effectiveness, Adoptability

- Hand hygiene
- Decolonization, universal or targeted
 - with or without active screening
- Environmental cleaning
- Contact precautions
- Antibiotic stewardship
- Vaccination



Methicillin Resistant
Staphylococcus
aureus (MRSA)



Evidence yields standard guidance



Discontent and innovation → variation



Evidence yields standard guidance



Problem, variable solutions