Hospital Acquired Pneumonia (HAP) Prevention

What is HAP?

Hospital Acquired Pneumonia (HAP) is an infection in the lung that occurs more than 48 hours after admission to a hospital. It is an infection that was not present before the patient came to the hospital. HAP is the second most common hospital acquired infection. It is the most common cause of death among hospital acquired infections.

What are some of the risk factors for HAP?

Some factors that may increase the risk of HAP include:

- Weakened cough
- Mechanical ventilation
- Tracheostomy tubes
- Suctioning
- Weakened immune system from disease or medications
What are the some of the signs/symptoms of HAP?

The patient may experience:

- Green, yellow or pus filled secretions
- Fever
- Increased fatigue
- Shortness of breath
- Coarse (crackling) breath sounds
- Loss of appetite

How is HAP diagnosed?

There must be evidence on the chest x-ray of HAP as well as at least one other symptom such as fever, an increased number of white blood cells, or the presence of yellow, green, or pus filled secretions from the lungs.

What treatments are available for patients with HAP?

- Antibiotic therapy may be used
- Frequent turns may be done in order to prevent secretions from building up in the lungs making breathing easier
- Lung treatments/medications may be given to help loosen and remove thick secretions from the lungs and improve the body’s ability to carry oxygen in the blood
- Oxygen may be provided in order to maintain good oxygen levels
HAP Prevention Bundle

Craig Hospital has adopted a group of prevention strategies to reduce the chance of getting HAP. This group of strategies is called the “HAP Prevention Bundle”. Some of the components of the bundle include:

- **Clean Hands** – all staff will wash hands or use antibacterial hand gel before and after each patient interaction. Additionally, gloves are worn by staff during all direct patient contact

- **Frequent Oral Care** – research studies have shown that providing frequent oral care for patients with artificial airways (e.g. tracheostomy tubes) reduces the amount of bacteria in the mouth, decreasing chances of HAP occurring

- **HOB elevation** - Keeping the patient’s head of the bed at 30 degrees, when safe and appropriate, reduces the chance of germs from the patient’s mouth coming in contact with the lungs. Please keep in mind that increasing the head of bed to 30 degrees may require more frequent skin checks and turning

- **Clean Suction Technique and Closed Suction Catheters** – when used correctly during suctioning they decrease the chances of introducing any outside germs to the patient’s lungs

What can YOU do to help prevent HAP?

- **Clean Hands** – we encourage all family, friends, and visitors to use the same hand hygiene methods as staff while spending time at Craig. Antibacterial soap and antibacterial hand gel are available in each patient room and available for your use

- **Ask Questions** – contact your nurse or respiratory therapist about any questions or concerns you may have about HAP and its prevention

- **Partnership** – work alongside Craig staff to ensure that oral care, clean suction techniques, and head of bed elevation goals are being met

- **Speak Up** – say something if you notice a family member, friend, or staff member that did not wash their hands before touching a patient