

**Egyptian Society of Infection Control (ESIC)**  
**Tropical Medicine and Microbiology Departments-**  
**Ain Shams University**

*Infection Surveillance & Research Group  
(ESIC-ISRG)*



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- **Board of the group:**

**President: Prof. Ossama Rasslan**

**Vice President and creator: Ass. Prof. Nadia Abdelaaty**

**Treasurer: Ass.prof. Fatma Ali El Din**

**Moderator : Ass.prof. Lamiaa Azzam**

**Coordinator : Dr. Dina M. Erfan**

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**Dr. Azza Hassan**

- **Advisory Board:**

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- **Members:**

**Dr. Noha Esmat (Web Mistress)**

**Dr. Manar Mohamed**

**Dr. Sayed Mohamad**

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## Goals:

### **A. Surveillance:**

1. Study the pattern of bacterial infections in the department.
2. Study the pattern of sensitivity and resistance of different detected micro-organisms.
3. Calculation of infection rates for comparison and evaluation of preventive measures.
4. Study and minimize risk factors for acquisition of infection.

### **B. Education and Training (Occupational Health):**

1. Nurses: hand hygiene, aseptic techniques, safe injections, environmental cleaning, and waste disposal.
2. Residents and House officers: hand hygiene, aseptic techniques, safe injections, environmental cleaning, and waste disposal.
3. Workers: environmental cleaning and waste disposal.
4. Reporting of any accidental injuries.

### **C. Antibiotic Stewardship:**

5. Minimize the use of unnecessary antibiotics.
6. Limit the use of certain antibiotics, to be used according to the guidelines.
7. Provide guidelines for empiric and prophylactic antibiotic prescription.
8. Train residents for proper antibiotic prescription in terms of indication, doses and duration.



9. The end goal is to decrease antibiotic resistant strains and decrease the cost of antibiotic use in the department.

***D.Environmental monitoring:***

***E. Research:***

Descriptive and interventional studies

**Suspected Outcome:**

Our outcome will be measured by:

- Infection rates
- Resistance rate
- Clinical outcome
- Hospital stay
- Antibiotic expenditure
- Mortality rates
- Frequency of antibiotic re-administration within 7 days
- Microbiologic outcome "response rate".