

A **PRINTED** copy of this guideline may not be the most recent version. The **OFFICIAL** version is located on IHNET at the Policies & Procedures Home Page

IS1400 Bed Bugs EFFECTIVE DATE: December 2012

REVISED DATE:

REVIEWED DATE: October 2019

6.0 PURPOSE

To prevent transmission of bedbugs to patients and staff.

7.0 DEFINITIONS

Bed bug – is a small reddish brown oval shaped insect with a flattened body. The size is 5-7mm long or the size of a lady bug. Bed bugs are classified as blood-sucking parasites on warm-blooded hosts.



Bed bugs ARE NOT ASSOCIATED with the transmission of human disease.

8.0 GUIDING PRINCIPLES

8.1 Background Information:

- Bedbugs are occasionally transported into hospital and other health care environments from the person's home.
- Bed bugs have not been linked to the transmission of any disease and are not regarded as a medical threat.
- There is no person to person transmission, but requires direct personal contact with infested material

8.2 Biological Information:

- Hide in cracks and crevices during the day and come out at night to feed.
- Require blood meal for development.
- Typical life span between 6 to 12 months.
- Extreme heat (approx 45 degrees C) or cold is lethal heat is more effective.
- Cannot fly but can crawl quickly over floors, walls and ceilings. They also hitch rides on clothing, furniture, purses and luggage.

8.3 Signs of Infestation:

- If bed bugs are present there will be dark spotting and staining on sheets, mattresses, pillows and carpets.
- With severe infestations there will be a sweet musty odour.
- Bed bugs usually bite people at night on any exposed skin bite marks are typically raised welts or localized swelling while others have no reaction at all.
- · Lesions are often itchy and remain itchy for weeks.
- Main concern is the risk of secondary infection from scratching the lesions.
- It is important to recognize that not all bites or bite-like reactions are due to bed bugs.
- Confirmation requires finding and identifying the bugs themselves.



9.0 PROCEDURE

9.1 Acute Care – if a bed bug infestation is suspected:

 Place patient on Contact Precautions until persons belongings are bagged and housekeeping has attended the room

REFER TO JH0400 CONTACT PRECAUTIONS

- Contain patient possessions including backpacks or handbags in sealed plastic bags label and ensure separation from clean items.
- Patients should be instructed NOT to remove any belongings from sealed bags.
- Instruct family to wash and dry washable items using high temperature.
- If items are unwashable, instruct them to place the item in a dryer on high heat for 30 min
- Refer the pts family to HealthlinkBC https://www.healthlinkbc.ca/healthlinkbc-files/bed-bugs
 for more information on bedbugs
- Any decision to treat a room, evacuate a room or replace equipment will be made in consultation with the unit staff involved, the unit leader, Housekeeping, Pest Control and Infection Control as required and recommendations made on how to proceed will be communicated with stakeholders.
- A physician assessment can determine whether antihistamines and corticosteroids may be prescribed to reduce allergic reactions, and antiseptic or antibiotic ointments to prevent infection.

4.2. Residential Care

- Place patient on Contact Precautions until persons belongings are bagged and housekeeping has attended the room
 - **REFER TO IH0400 CONTACT PRECAUTIONS**
- Train healthcare providers to look for bites on residents and talk to family members.
- Train environmental and housekeeping staff on what to look for during routine cleaning/maintenance.
- If a bed bug infestation is suspected follow Acute Care information above.

4.3 Client Homes

- Utilize Routine Practice Guidelines. If providing direct care, consider wearing a gown if there is heavy infestation
- Wearing light coloured clothing will assist in easier detection of bedbugs. Avoid pants with cuffs
- Limit work items being brought into a client's home. Only bring in what is essential.
- Store work items in a pest proof bag or container that items will remain bug free in. If none are available, consider hanging your items rather than placing on furnishings.
- Equipment used on the client should be placed in a sealed bag and returned to the unit for cleaning.
- Inspect clothing and equipment for bedbugs after visit and remove any stragglers.
- Refer clients to read the info in the references below to learn how they can prevent and/or
 get rid of bed bugs or print off a copy of the Vancouver Coastal guide to bed bug control
 http://www.vch.ca/Documents/Guide-to-bed-bug-control.pdf



4.4 Community Office

- Utilize Routine Practice Guidelines. If you suspect heavy infestation of bedbugs, wear gloves and a gown to protect clothing.
- Place all personal belongings including backpacks and handbags in a large plastic bag during the visit.
- Carefully compress the bag to make it small and place it in another garbage bag and seal
 it.
- Clean and disinfect equipment, stretcher and exam tables as per usual routine.
- Vacuum all places that might harbour bed bugs such as cloth chairs, couches, carpet etc..
 Empty the vacuum cleaner contents into a sealed plastic bag. Throw it out immediately in a tightly closed garbage can.
- Use a scrub brush to remove bed bugs and eggs from the mattress seams. Wash nozzles and brushes in hot water with detergent.

4.5 Staff

 Contact Workplace Health and Safety if there is concern regarding bites acquired from bed bugs found among a patients belongings

10.0 REFERENCES

- 1) https://www.healthlinkbc.ca/healthlinkbc-files/bed-bugs accessed Oct/19
- 2) Vancouver Costal Health (VCH) guide to bed bug control http://www.vch.ca/Documents/Guide-to-bed-bug-control.pdf accessed Oct/19
- 3) Health Canada bed bug information https://www.canada.ca/en/health-canada/services/pest-control-tips/bedbugs-what-are-they.html accessed Oct/19