A ***PRINTED*** copy of this resource may not be the most recent version.

Bed Bugs

Purpose

To prevent transmission of bedbugs to patients and health care providers.

To prevent or minimize the risk of an undetected infestation and resulting impact on the facility.

To provide guidance to health care providers (HCPs) on how to:

- Identify.
- Isolate.
- Inform.

Note: These are general recommendations and guidelines. If a program/facility has a specific bed bug process in place, refer to and follow program/facility specific processes.

Definitions

Bed bug
A small reddish brown oval shaped insect with a flattened body. The size is 5-10 millimeters long or the size of a ladybug. Bed bugs are classified as blood-sucking parasites on warm-blooded hosts.

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

Health Canada. (2022). *Bedbugs - what are they?* Image retrieved August 2024, from Bedbugs: what are they? - Canada.ca

Infestation
To inhabit or overrun in numbers or quantities large enough to be harmful, threatening, or obnoxious, e.g., bedbugs found in the environment.

Evidence of bedbug infestation include signs of feeding and excreta (small blood stains and/or dark spots) on sheets and mattresses.

Overview

Bed bugs hide in cracks and crevices during the day and come out at night to feed as they require a blood meal for development. Their typical life span is between 6 to 12 months.

Bed Bugs cannot fly but can crawl quickly over floors, walls, and ceilings. They also hitch rides on clothing, furniture, purses, and luggage.

Infestation Presentation

- If bed bugs are present there may be dark spotting and staining on sheets, mattresses, pillows, and carpets and with severe infestations there may 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. The lesions are often itchy and remain itchy for weeks.
- The main concern is the risk of secondary infection from scratching the lesions however 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.**

Transient introductions of bedbugs occur when bedbugs are brought into a facility on clothes or belongings. Hospital and acute care environments are more likely to have transient introduction of bedbugs rather than an infestation as acute care rooms are designed to minimize the risk of infestation, e.g., sparsely furnished, metal furniture and free of clutter.

Mode of transmission

- Bed bugs are occasionally transported into hospital and other health care environments from the person's home or personal belongings.
- Bed bugs have not been linked to the transmission of any disease and are not regarded as a medical threat.
- **Transmission does not occur from person to person.** Bed bugs spread by a person coming in direct contact with infested materials (e.g. luggage, clothes, bedding).

Best Practices

Prevention and Risk Assessment

Early detection measures minimize the risk of bedbug infestation and spread. Observe patient clothing or belongings for signs of bedbugs, e.g., visible bedbugs or bites, and if bedbugs are suspected then ask questions to determine if their current accommodation has bedbugs. Health care providers may also speak with family to determine if they are aware of any history of bed bugs, signs of bites.

Use the IPAC Quick Reference for Management of Lice, Scabies and Bed Bugs from Vancouver Coastal Health to assist in identification of bugs if found.

Additional Precautions – within IH Healthcare Facilities

- In addition to Routine Practice, Contact Precautions are required for all suspected, or confirmed infestations of bed bugs.
- The appropriate Contact signage is to be posted outside of the patient's door or designated bed space.
- Have patient change into facility approved clothing (example: gown or scrubs)
- Contain patient possessions including backpacks or handbags in *sealed* plastic bags – label and ensure separation from clean items. Keep bag sealed until patient leaves facility.
- Clean and disinfect solid surface belongings such as cell phones.

Cleaning and Disinfection of Patient Environment

- Environmental Services follow EVSSOP301 Bedbugs, Fleas, Maggots
- If an infestation is suspected in a healthcare setting:
    - Consult/report to unit or facility manager.
    - Manager will engage with Pest Control/Environmental Services/Facilities Maintenance or other partners as required.

Waste, Laundry, Dishes and Cutlery

- Use Routine Precautions for cutlery and dishes.
- Place facility soiled or used laundry directly into linen bags and seal immediately; routine laundry practices will kill bed bugs.
- Place patient's personal laundry into a sealed bag. Instruct family to wash and dry items using high temperature. If items are non-washable, instruct them to place the item in a dryer on high heat for 30 min.

Education for Patient and Visitors

- Refer the patients and family to HealthLinkBC https://www.healthlinkbc.ca/healthlinkbc-files/bed-bugs for more information on bedbugs.

Discontinuing Precautions

- Precautions may be discontinued after patient belongings are bagged, and housekeeping has cleaned & disinfected the room.

Management of Exposed Health Care Provider

- Health care providers (HCP) who believe they have acquired bites, or bed bugs from an exposure while at work should contact Provincial Workplace Health Contact Centre at 1-866-922-9464 for an assessment or email OHN@WHcallcentre.ca. (The PWHCC is for IH employees only.)

- Health care providers (HCP) who believe they have acquired bites or bed bugs from an exposure outside of the workplace should seek assessment and clearance from their family physician before returning to work.

Considerations for Specific Units or Healthcare Settings

Long Term Care Facilities

- Follow Best Practices section above for healthcare facilities.

For additional detailed resources in *high-risk* scenarios, see Appendix 5 of Vancouver Coastal Health: Bed Bugs PH_0400: D-00-11-30039 Bed Bug (healthcarebc.ca)

Community Healthcare Facilities

Patients with suspected or confirmed bed bug infestations the following can be considered for their visit to an IH community facility:

- Explore the options of providing service.
    - *Examples:* Can the service come to the individual? Can the time of the service be adjusted until after pest control has dealt with the infestation in their dwelling? Is there an alternative to the service?
- If service needs to be provided:
    - Consider scheduling visit for the end of day, if possible.
    - Utilize Routine Practice and Point-of-Care-Risk Assessment (PCRA) to determine if any other personal protective equipment (e.g. gloves or gown) is required.
    - Direct the person to an area within the office that would be easiest to clean & disinfect after the visit is complete (e.g. sparse furnishings, uncluttered, easily cleanable floors, and furniture).
    - If possible, place all personal belongings including backpacks and handbags in a large plastic bag during the visit. Once the person leaves, dispose of the bag by carefully compressing it and placing it in a sealed plastic bag.
    - For cleaning & disinfection after the visit is complete, consult EVSSOP301 Bedbugs, Fleas, Maggots.

For additional detailed resources, see Appendix 4 of Vancouver Coastal Health: Bed Bugs PH_0400: D-00-11-30039 Bed Bug (healthcarebc.ca)

References

1. Alberta Health Services, Infection Prevention & Control. (2022). *Bedbug control for healthcare facilities.* Retrieved August 2024, from Bedbug Control for Healthcare Facilities (albertahealthservices.ca)

2. Health Canada. (2022). *Bedbugs - what are they?* Image retrieved August 2024, from Bedbugs: what are they? - Canada.ca

3. HealthLinkBC. (2020). *Bed Bugs.* Government of BC. Retrieved August 2024, from Bed bugs | HealthLink BC

4. Vancouver Coastal Health. (2017). *Bed Bug: PH_400.* Retrieved August 2024, from D-00-11-30039 Bed Bug (healthcarebc.ca)

5. Vancouver Coastal Health, Health Protection. (2012). *Guide to bed bug control.* Retrieved August 2024, from8-Bed Bug Pamphlet (2012/03/29) (vch.ca)

Effective Date	December 2012		
Last Reviewed	March 2025		
Partners Reviewed	Environmental Services, Facilities/P3		
Approved By	IPAC		
Owner	Infection Prevention and Control		
Revision History	Date	Section	Revision
	October 2019 & August 2024	Entire document	Formatting and language
	April 2025	New Sections	Prevention/Risk Assessment IPAC Quick Reference Guide to Management of Lice, Scabies and Bed Bugs
		Removed section	Client Homes Patient treatment for bites