

## Factsheet for Patients/Family

### How do I know if I have a CPE?

At this time we do not do routine surveillance for CPE, however if you are being tested for other types of bacteria we may pick this up.

### What are additional precautions?

It is very important to contain the bacteria so it does not spread to others. We do this by:

- Isolating CPE patients and putting a “Contact Precautions” sign on the door.
- Wearing a yellow long sleeved gown and gloves when entering the room to care for the patient.
- Washing our hands before entering the room and after leaving the room.
- Dedicated equipment or adequate cleaning and disinfecting of shared equipment, with particular attention to management of urinary catheters and associated equipment.

### What about family/visitors?

Family and visitors can visit you. Healthy family and visitors have a low risk of acquiring infection with CPE. All visitors must be instructed by the staff on how to use Additional Precautions. Children and infants should be closely supervised. We ask that your visitors only visit you and your room, and to do the following:

- Clean their hands before entering your room and when leaving
- Not to use your bathroom
- Not to eat or drink in your room

### Good hand hygiene practices:

Remind all staff and visitors to practice good hand hygiene before and after they touch you. Ask your nurse or doctor to demonstrate proper hand hygiene techniques (15 seconds of soap and running water OR alcohol-based hand rub until hands are dry).

### You need to clean your hands:

- After using the bathroom
- After blowing your nose
- Before eating and drinking
- Before and after you touch your dressing or wounds
- When your hands are visibly dirty (soiled)
- Before you leave your room

### What will happen at home?

It is important to wash hands often at home for fifteen seconds each time, especially after using the bathroom and before preparing food.

No special cleaning of items in your home (e.g., dishes) are required.

Clothing may be laundered in the usual manner, along with the rest of the household laundry.

If you go to another health care facility, visit another doctor or have Home Care services you should tell them that you have CPE. They may use Additional Precautions when providing care, which will help prevent spread to others and helps your doctor choose the correct antibiotic treatment.

### What can I do to help?

Remind **all** staff caring for you to wash their hands when they enter your room and when they leave. Wash your hands after you use the toilet, before you eat, after blowing your nose, after touching your dressing.

If you are going for tests in another department tell the staff transporting you that you have ESBL.



# CPE

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### What is CPE?

CPE stands for Carbapenemase-producing *Enterobacteriaceae*. *Enterobacteriaceae* are a family of bacteria, many of which live naturally in our bowels.

Carbapenemase-producing *Enterobacteriaceae* (CPE) produce carbapenemase enzymes that can break down many types of antibiotics, making the bacteria very resistant.

### How are CPE spread?

Most people who carry CPE have no symptoms of infection and are said to be colonized. The main site of colonization of CPE is the bowel. CPE is not spread through the air, but may survive on equipment and surfaces, such as bedrails, tables, chairs, countertops and door handles. CPE can be spread from one person to another by unwashed hands or from contact with soiled equipment and surfaces

### Does CPE go away?

People who have CPE in their bowel will likely carry it for a long time. You may be treated if CPE is causing symptoms of infection.

### Who is at risk for CPE?

Risk factors for infection and colonization with CPE will be similar to those of other resistant bacteria, such as ESBL- producing E.coli and *Klebsiella pneumoniae*, two common urinary tract infection bacteria.

Currently, the major risk factor is receiving health care in settings that have CPE, e.g., hospitals along the U.S. eastern seaboard (particularly New York City), Greece, Israel and the Indian subcontinent. CPE outbreaks have been seen in hospitals around the world, including Canada. People coming from the Indian subcontinent, with or without exposure to health care, are also at risk.

### What special precautions are required for CPE?

Your healthcare team will continue to provide the same level of patient care. If a patient/resident is identified with CPE, roommates and patients in close proximity will be screened for CPE.

Additional Precautions will be used to prevent the possible spread of the bacteria. For example:

- You will be moved to a single room
- A sign will be placed on your door to remind others who enter your room about the special precautions (i.e. instructions to wash hands, wear gown and gloves)
- Speak to your doctor or nurse about special instructions regarding leaving your room
- You will not be able to participate in group activities
- Tests may be moved to the end of the day to ensure adequate cleaning of equipment between patient use
- Everyone who leaves your room must clean their hands well, including you
- Your hospital record will indicate CPE

### What is CPE colonization?

If you have CPE in your body and it is not causing an infection you are colonized. Although you are not sick because of these bacteria, you could pass it on to someone else and make them sick.

### What is a CPE infection?

In people with a poor immune system these bacteria can cause infections.

Infection occurs when CPE enters the body at specific sites and causes symptoms of disease. For example, CPE can cause pneumonia and urinary tract infections. Since CPE are resistant to many types of antibiotics, treatment is difficult and may involve antibiotics which have significant side effects.