A Compendium of Strategies to Prevent Healthcare-Associated Infections in Acute Care Hospitals: 2014 Updates

Management Plans

All participants complied with the SHEA and IDSA policies on conflict of interest disclosure. Those with identified real or potential conflicts completed management plan statements, listed below.

Aiello, Allison: I consult for SCA Tork Green Hygiene Council, primarily a paper towel company. I provide education and information on hand hygiene. I do not discuss any hand hygiene products associated with the company or promote any products that they have. Although there is no true conflict, it may appear as a conflict because SCA Tork produces some hand hygiene products. SCA Tork has agreed that I do not have to comment on their hand hygiene products in any of the work that I do for them. My work is solely related to providing general education and tips on hand hygiene for the public or institutions. Similarly, for my litigation work, it relates to hand hygiene in the public but I cannot disclose the work. I can attest that I do not represent any company in this case and my consultancy is on the side of the consumer. There is no reason that my litigation work would have any influence on my work since SHEA and its partners are not represented by any company or institution. A panel of experts with no relevant conflicts of interest will review the sections I write to confirm that the recommendations therein are consistent with national recommendations and evidence-based practice.

Carling, Philip: I have patents related to a florescent system of environmental hygiene monitoring, which I have licensed to Ecolab Inc. This is indirectly related, and not relevant, but is disclosed for transparency reasons. I made sure that I will not myself or let others directly or exclusively endorse the intellectual properties I have licensed to Ecolab Inc.

Carrico, Ruth: The only work that may be related to the CDI Compendium update involves some technical writing I have done with Ketchum, the PR company that represents Clorox. This writing has involved use of multiple strategies for disinfection when addressing C. diff. Use of clorox products (hypochlorite) are EPA approved sporicidal agents and their use is in alignment with current recommendations by multiple agencies and organizations. No new or controversial information has been approached in writing and no references were ever made to individual companies during writing.

Dellinger, Patch: I have, in the past 2-3 years given two lectures at conferences sponsored by and paid for by CareFusion. My talks at those conferences were about topics independent of and not related to the skin preparation products marketed by CareFusion. I have not written or edited any portion of the Compendium related to skin preparation.

Donskey, Curtis: GOJO, 3M, and Ecolab sell products used for environmental or skin disinfection, and Ecolab and 3M market products used for monitoring environmental cleaning. To minimize the influence of financial conflicts, I ensured that my involvement with these companies does not overlap with the sections being written. In sections that I participated in writing, I did not include any comments on products produced by the companies. In relevant discussions, I did not make any comments related to products from the companies.
Fakih, Mohamad: I have had a salary support for a research nurse from Cardinal Health ($24K) in 2009-10 to improve peripheral venous catheter placement and maintenance. In addition, I have had institutional support (Ascension Health) for $60K (2009-10) and $80K (2011) for a research nurse working on improving compliance with proper placement and maintenance of peripheral venous catheters. I have not done any studies on specific devices or medications supported by industry and do not have any financial conflicts.

Gerding, Dale: I did not write the section related to prevention using non-toxigenic C. difficile, and I did not vote on recommendations related to non-toxigenic C. difficile. I did not participate in any writing or discussion of treatment agents for C. difficile should they be considered part of the Compendium.

Greene, Linda: CareFusion produces a surgical skin prep solution; however, the honorarium I received involved a talk on automated surveillance which was unrelated to the SSI compendium. This company also has a surveillance software system. No other presentations were related to the Compendium. No monies exceeded $500. I have not offered input into surgical prep or automated surveillance to the other members.

Haas, Janet: I was Principal Investigator on a hand hygiene automated monitoring study funded by 3M. Hand hygiene automated monitoring is a sub-topic of the Compendium on which I am co-lead author. I did not write the section on automated monitoring. All sections were co-edited with another person, and reviewed by the expert team and partner organizations. I did not write the section on automated monitoring of hand hygiene compliance. The recommendations related to this topic reflect the combined assessment of the co-authors of the Compendium, and the suggestions of the expert review panel and the Partners.

Hadaway, Lynn: I consult with many device manufacturers on clinical issues involving product/device use and provide evidence-based presentations at many locations in the USA and other countries. My work does not involve central venous catheters; however, many add-on devices such as needleless connectors and disinfection caps are included. My work for these manufacturers involves analysis of published evidence and providing advice to clinical users. My work is always based on the scientific evidence and such is the case with the work on the Compendium. Since I work for competing manufacturers on a regular basis, my focus is always on clinical outcomes, patient care, and user experiences with the devices. If any decisions need to be made regarding specific content about one of the devices for which I work I will recuse myself from voting on that issue or question. The committee will be told my reasons for this recusal. Content of all guidelines are written collaboratively without such financial relationships and are reviewed by the entire committee. All work is thoroughly supported by published evidence.

Huang, Susan: The reported financial conflicts arose after the drafting of the Compendium section that I participated in, but before publication. Thus, it was disclosed, but had no impact on my advice/input/contributions during the drafting of the related section. No plan is needed since the conflicts did not exist at the time of the meetings/drafting of the Compendium section.
Kaye, Keith: Sage Pharmaceuticals makes CHG wipes that are used by some for pre-operative preparation of patients. This practice (CHG bathing prior to surgery) was discussed in the Compendium. I recused myself from discussions related to CHG bathing during the Compendium meetings and work sessions. I did not write this section of the Compendium.

Loo, Vivian: I am an occasional speaker for Optimer Pharmaceuticals Inc. for which I receive honoraria. I acted as an advisor for a Merck ad board meeting for which I received an honorarium. These companies are involved with C. difficile therapy. For the guidelines, I did not work on the therapy section. I did not write a guideline statement related to C. difficile therapy and I did not vote on these recommendations.

Mermel, Leonard: During the writing process I was a consultant for CareFusion, Bard, ICU Medical, 3M, Marvao, Fresenius; these companies above make products that involve intravascular catheters and I am a co-lead author of the compendium dealing with this subject matter. We do not mention or recommend products in our compendium section. No section of the compendium is written solely by me without point by point discussion with my co-author. Also, the Compendium section is peer-reviewed by our writing committee and outside reviewers. I did not write the first draft of the primary revisions of our section of the Compendium. Individual manufacturers or their products are not be discussed. A panel of experts will review our section of the Compendium to confirm that the recommendations therein are consistent with national recommendations and evidence-based practice.

Moody, Julia: The reported financial conflicts arose after the drafting of the compendium section that I participated in, but before publication. No plan is needed as the conflicts did not exist at the time.

Pegues, David: The HRET appointment and stipend payment is provided through SHEA, with project goals that aligned with those of SHEA. I do not perceive this compensation to be a potential conflict of interest, but disclose it for purposes of transparency.

Polgreen, Philip: I have received funding from GOJO industries to support research efforts related to hand hygiene. This research has been focused on understanding how to measure and study compliance with existing hand hygiene recommendations. We have no plans to commercialize. The research I am doing is related to approaches that my group is developing that are not commercially available, and we have no plans to make them commercially available. I recused myself during relevant discussions and votes. I also did not write any text that overlapped with my involvement with GOJO. I have and will continue to recuse myself during relevant discussions and votes. In addition, anything that I write or participate in writing will be reviewed by a panel of experts with no relevant conflicts of interest to confirm that the recommendations therein are consistent with national recommendations and evidence-based practice.

Rupp, Mark: I have disclosed a variety of research studies with industry sponsors that manufacture products or devices that are pertinent to infection prevention. Contracts to perform these studies are made with the institution that employs me (University of Nebraska Medical Center). I have also disclosed that I serve, or have recently served, as an advisor or consultant to a number of companies. As a member of the Guidelines Committee, it is possible a guideline may have as its topic something to do with one of the products or devices that I have studied or one of the companies that I have served as a
consultant. I will recuse myself from voting on any guideline or position statement in which there is a potential COI.

Weber, David: I serve as a consultant for Clorox. Clorox is EPA registered as a sporicidal agent (i.e., it can be used to kill *C. difficile* on environmental surfaces). The Compendium did not use the name of any product; and I suggested that rather the use of an EPA registered sporicidal agent be recommended (there are several products approved by the EPA). Further, I did NOT vote or edit this section of guidelines, which provided recommendations for surface disinfection.