



# The Infection Doctor and the Isolation Sign

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## Perspective

Obviously, this touched me enough to wright about it. I am not sure this will make me feel better, but I hope it makes a difference. I was seeing a patient whom I was familiar with from a previous admission. He greeted me with a smile on his face and warmth in his voice. I felt encouraged and proceeded with the usual workflow. During the encounter, I noted that his family member was not wearing a gown or gloves. The patient was on contact isolation with an isolation sign placed at the door. I was waiting for the right moment to ask the family member to wear a gown thinking he might stop providing information if he was given instructions. I waited until I collected the story about the patient's presentation then I nicely asked the family member if he would wear a gown. I notified him that there is a sign at the door that he may had missed. At that time, two other family members entered the room without gowns or gloves. He snapped at me indicating that there is no way he was going to wear a gown or letting his family members wear gowns. The more I explained about our policy the more he declined and became persistent. He said "my dad's main doctor and two other doctors were here today without gowns, one of them even hugged him...none of them told me to wear a gown". I replied "I am a doctor too " but that did not change his mind. He went on "I have been coming here to visit, I have never been asked to wear a gown, how come you are telling me to wear a gown?".

I replied, "visitors should comply with isolation precautions, you should have been told to do so". The patient told him "Just wear a gown" but he did not. All this happened in two minutes, but they felt as long as two hours. I felt so hopeless, and my face became warm. I felt flushed. I was telling myself "How can I defend my point and our policy if my own colleagues and our own staff are not following the policy". He had no obligation to do what I was telling him to do. I finished the exam and left the room quietly. I was wondering why this happened, is it because the role models are not adherent to isolation precautions, is it because I am a female

while his other doctors were males, or because I was too nice about it? Should have I told him that I am the infection doctor? Would that have affected the outcome? Was I afraid of him escalating the situation and complaining about me? Was I concerned about the patient satisfaction which is a measure that hospitals get monitored for? or I just did not have a strong case because of my colleagues' actions. I notified the primary team about what happened, and they promised to talk to him. I hope they did. Regardless, I continued my day on the consult service, I decided that I did not have time to think about this and I washed it off. But this was on my mind at the end of the day. "Is this going to happen again? ", "what should I do if I encounter this scenario in the future?"...I did not find the answer. I felt a burning sensation in my throat and heaviness on my chest before my eyelids surrendered to the fatigue. Increasing compliance with isolation precaution is important to reduce hospital acquired infections but it has always been a struggle for hospitals [1]. Health-care providers may have an average level of adherence with isolation precautions despite of the high-level awareness of infectious diseases risk [2]. Visitors' adherence to isolation signs is important since they may be implicated in transmission of infectious pathogens [3]. There is an urgent need to improve health care staff and visitors' compliance to ensure safe patient care and to reduce nosocomial infections. However, there is dissociation between the recommended practices and the adherence inside hospitals which sets a poor example for visitors. The role that providers and nurses play is extremely important, they not only inspire visitors but should request them to don personal protective equipments. Respecting the isolation precaution policies will ensure that health care workers focus on taking care of patients instead of having side conversations with visitors about wearing a gown.

## References

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