Indiana Department of Health

Welcome

to the

Healthcare Associated Infections Antimicrobial Resistance Webinar Series

Webinar Overview

- Schedule – bi-monthly
- Intended audience – hospital infection preventionists
- Upcoming topics:
  - The Three Rs – August 2021
  - *Candida auris* – October 2021
  - No webinar in December
  - MDROs – February 2022

Please visit the HAI-AR Webinar Series webpage for Hospital Infection Preventionists by clicking here!

Indiana Department of Health

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The HAI-AR Team Presents "The Three Rs": Reach-Out, Reporting, & Resources

Overview

- Meet the Indiana Department of Health HAI-AR team
- Review recent updates to Indiana's HAI reporting rule
- Review Indiana's communicable disease reporting rule focusing on reporting for multidrug resistant organisms (MDRO)
- Review reporting for *Candida auris*
- Discuss updated resources and helpful tools available on IDOH's HAI-AR webpages
- Review some additional resources available from other agencies
- Question and answer session

Meet the HAI-AR Team

Indiana Department of Health

Tina Feaster
Healthcare Associated Infections Director
cfeaster@isdh.in.gov
317-233-7825

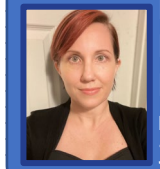
Haley Beeman
Healthcare Associated Infections Epidemiologist
hbeeman@isdh.in.gov
317-234-2805

Antimicrobial Resistance Epidemiologist

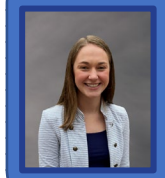
Candida auris Epidemiologist

Lauren Sprague
Occupational Health Nurse
Lsprague@isdh.in.gov
317-234-2804

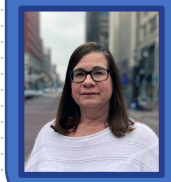
Jennifer Spivey
IP Program Manager
jspivey1@isdh.in.gov
317-471-7844



Melissa Meador
NHSN Public Health Investigator
mmeador1@isdh.in.gov
317-439-8772



Hannah Gallion
Antimicrobial Resistance Public Health Investigator
hgallion@isdh.in.gov
317-233-2886



Marcie Bryant
Candida auris Public Health Investigator
mbryant@isdh.in.gov
317-670-1820

11 District Infection Preventionists & 1 Infection Prevention Epidemiologist

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Contacts by Subject Matter

Questions About	Primary Contact	Secondary Contact
Healthcare associated infections (CLABSI, CAUTI, VAP & SSI) NHSN reporting and mapping CP-CRE IMPs Injection safety	HAI epidemiologist	LTC NHSN PHI
Long-term care facility COVID-19 reporting	LTC NHSN PHI	HAI epidemiologist
Antimicrobial resistance and susceptibility Antimicrobial stewardship CP-CRE reporting (all mechanisms except IMPs) MDRO containment MRSA and *C. diff.*	AR epidemiologist	AR PHI
Candida auris reporting *Candida auris* infection control practices	CA epidemiologist	CA PHI
Infection prevention concerns Infection Control Assessment and Response (ICAR)	IP program manager and infection preventionist for your district	
Fit testing Ebola Healthcare associated *Legionella* Bloodborne pathogens, tattoo, eyelash extension, sharps and infectious waste	occupational health nurse	HAI epidemiologist

Infection Preventionists

For infection control and prevention questions and concerns, please refer to the contact for your district IP or Jennifer Spivey, IP program manager.

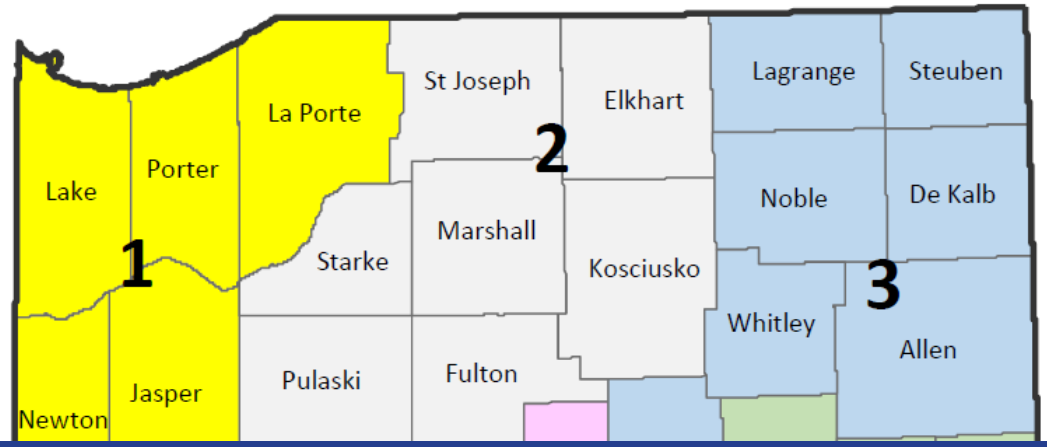
Long Term Care Infection Prevention Team Districts

Tina Feaster CIC- Healthcare Associated Infections Supervisor
Cfeaster@isdh.in.gov 317-233-7825

District 1: 66 facilities
Janene Gumz-Pulaski RN,
CIC JGumzPulaski@isdh.in.gov
317-499-3877

District 2 -72 facilities
Victor Zindoga RN
vzindoga@isdh.in.gov
317-509-8964

District 3- 72 facilities
Pam Bennett RN



IPs cover proactive and reactive Infection Control Assessment and Response (ICAR) in long term care (LTC) for COVID-19 and other outbreak types in LTC, acute care (hospitals), long term acute care hospitals (LTACHs), and dialysis facilities.

For the current district map, please go to the HAI webpage.

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Non-HAI-AR Team State Contacts

Indiana Department of Health

District Field and LHD Support Epidemiologists

Indiana Department of Health
Epidemiology Resource Center
Main: 317-233-7125
Fax: 317-234-2812

After Hours: 317-233-1325

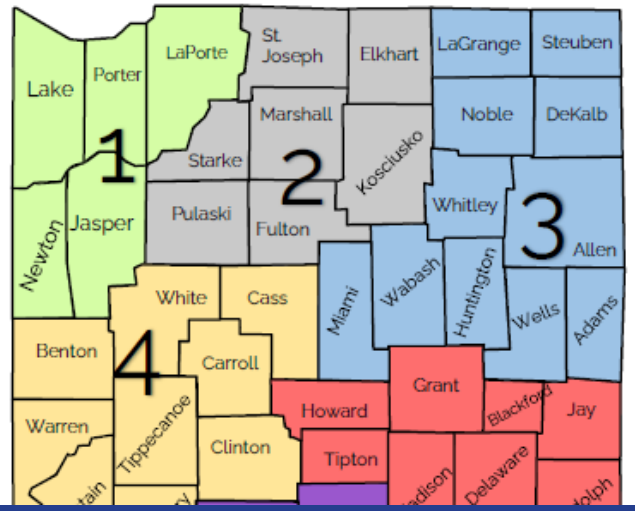
District Field and LHD Support Epidemiologists

District 1
Field Epidemiologist
Cyndy Fohrman
(317) 473-2696
cfohrman@isdh.in.gov

LHD Support Epidemiologist
Madisen Mrotek
(317) 450-4643
mmrotek@isdh.in.gov

District 2
Field Epidemiologist
Christina Wheeler
(317) 690-9466
chwheeler@isdh.in.gov

LHD Support Epidemiologist
Taylor Gumns
(765) 860-6705
tgumns@isdh.in.gov



District 5
Field Epidemiologist
Ali Snively
(317) 430-3848
asnively@isdh.in.gov

LHD Support Epidemiologist
Jason Collins
(317) 452-0708
jacollins1@isdh.in.gov

LHD Support Epidemiologist
Kira Richardson
(317) 409-5602
kirrichardson@isdh.in.gov

District 6
Field Epidemiologist
Tracy Larcheveque
(317) 460-1208
tlarcheveque@isdh.in.gov

For additional epidemiologic support, please reach out to the field and LHD support epidemiologist in your district.

For the current district map, please click here.

Indiana Department of Health

Emergency Epidemiologist On-Call

If you have a question, you can call the IDOH main phone line at 317-233-7125.

The emergency on-call epidemiologist is also available after hours and on weekends at 317-233-1325.

HAI-AR Reporting Overview

Indiana Department of Health

HAI Reporting Rule

ARTICLE 15. HOSPITAL LICENSURE RULES

Rule 1. Hospital Operation, Management, Construction, Equipment Requirements *(Repealed)*

(Repealed by Indiana State Department of Health; filed Dec 21, 1994, 9:40 a.m.: 18 IR 1280; errata filed Jan 5, 1995, 4:20 p.m.: 18 IR 1290)

Rule 1.1. Definitions

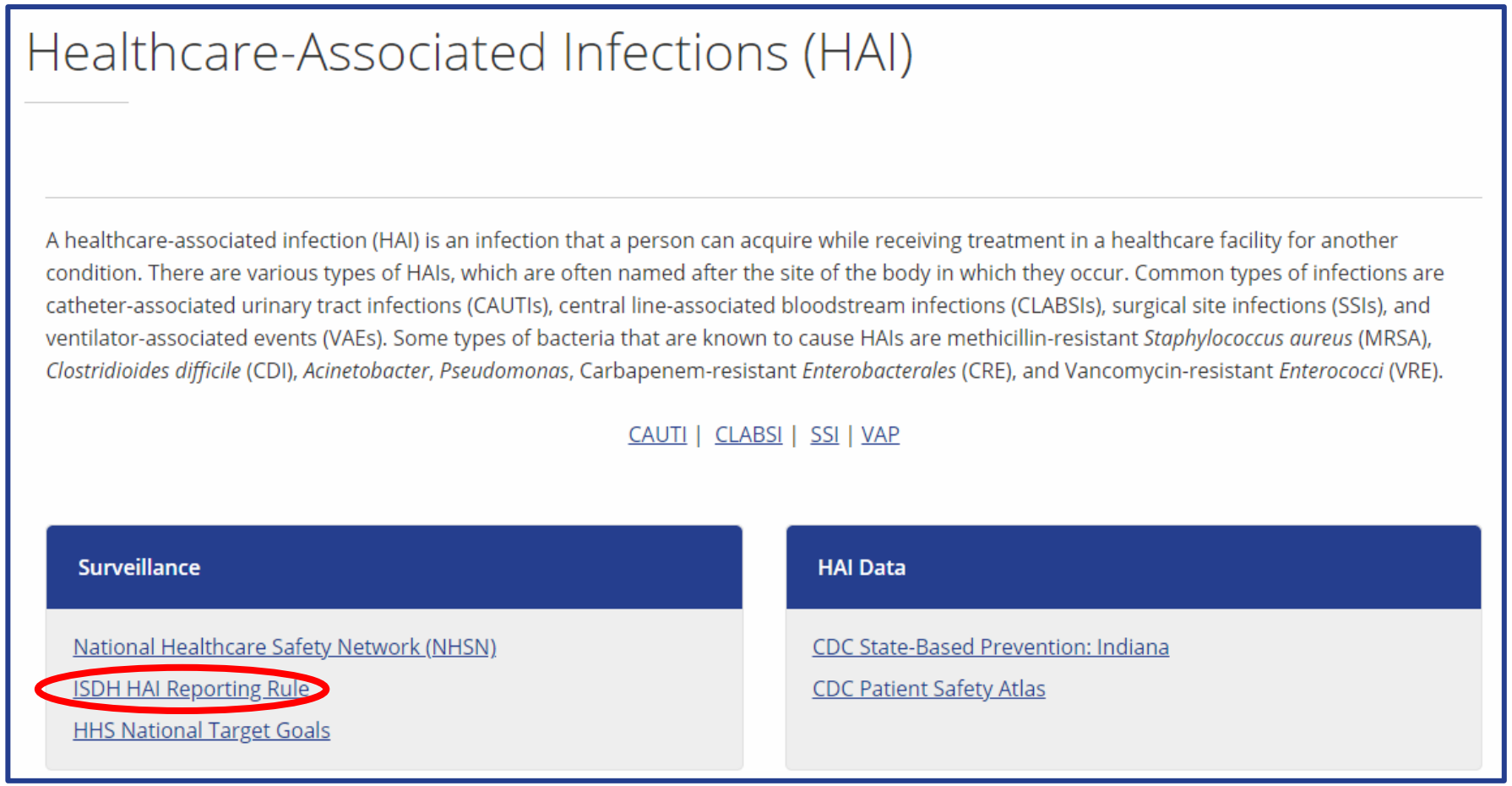
410 IAC 15-1.1-1 Applicability

Authority: IC 16-21-1-7; IC 16-21-1-9
Affected: IC 16-19-3; IC 16-21-1

Sec. 1. The definitions in this rule apply throughout this article except as otherwise indicated. *(Indiana State Department of Health; 410 IAC 15-1.1-1; filed Dec 21, 1994, 9:40 a.m.: 18 IR 1261; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Nov 16, 2006, 4:01 p.m.: 20061213-IR-410050193FRA; readopted filed May 22, 2007, 1:44 p.m.: 20070613-IR-410070141RFA; readopted filed Jul 14, 2011, 11:42 a.m.: 20110810-IR-410110253RFA; readopted filed Sep 13, 2017, 4:08 p.m.: 20171011-IR-410170339RFA)*

Find it here on the HAI webpage!

HAI Reporting Rule



Healthcare-Associated Infections (HAI)

A healthcare-associated infection (HAI) is an infection that a person can acquire while receiving treatment in a healthcare facility for another condition. There are various types of HAIs, which are often named after the site of the body in which they occur. Common types of infections are catheter-associated urinary tract infections (CAUTIs), central line-associated bloodstream infections (CLABSIs), surgical site infections (SSIs), and ventilator-associated events (VAEs). Some types of bacteria that are known to cause HAIs are methicillin-resistant *Staphylococcus aureus* (MRSA), *Clostridioides difficile* (CDI), *Acinetobacter*, *Pseudomonas*, Carbapenem-resistant *Enterobacterales* (CRE), and Vancomycin-resistant *Enterococci* (VRE).

CAUTI | CLABSI | SSI | VAP

Surveillance

National Healthcare Safety Network (NHSN)

ISDH HAI Reporting Rule

HHS National Target Goals

HAI Data

CDC State-Based Prevention: Indiana

CDC Patient Safety Atlas

Find it here on the HAI webpage!

Indiana Department of Health

Communicable Disease Rule

TITLE 410 INDIANA STATE DEPARTMENT OF HEALTH

Final Rule
LSA Document #15-39(F)

DIGEST

Adds 410 IAC 1-2.5 to add definitions, reporting requirements, dangerous communicable diseases, disease intervention measures, general and specific control measures, and documents incorporated by reference. Adds and modifies control measures for schools, daycare facilities, preschools, health care facilities, and food handlers. Adds reporting requirements for physicians, hospital administrators, and laboratories. Repeals 410 IAC 1-2.3. Effective 30 days after filing with the Publisher.

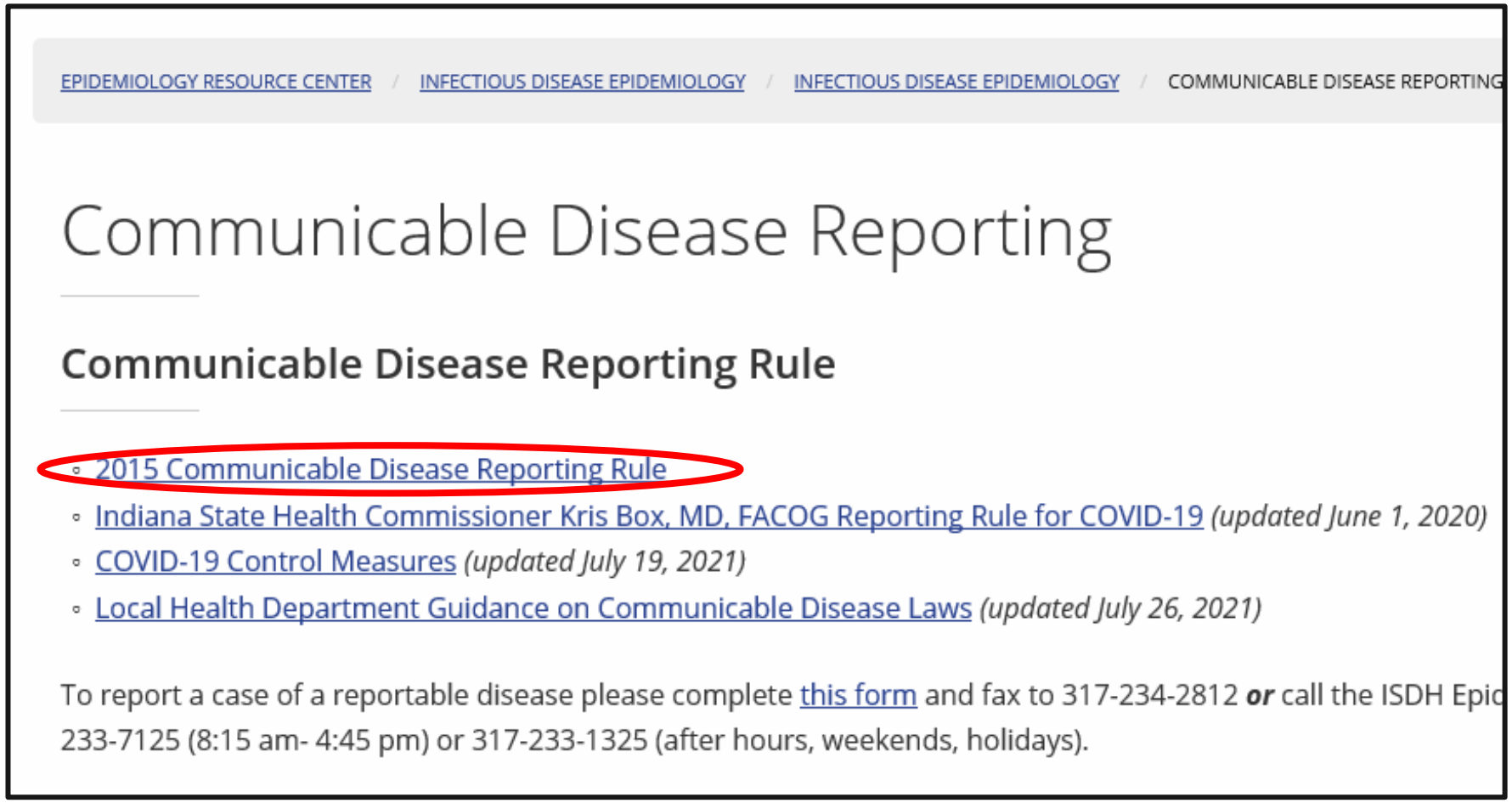
410 IAC 1-2.3; 410 IAC 1-2.5

SECTION 1. 410 IAC 1-2.5 IS ADDED TO READ AS FOLLOWS:

Rule 2.5. Disease Reporting and Control

Access the communicable disease reporting resources here!

Communicable Disease Rule



EPIDEMIOLOGY RESOURCE CENTER / INFECTIOUS DISEASE EPIDEMIOLOGY / INFECTIOUS DISEASE EPIDEMIOLOGY / COMMUNICABLE DISEASE REPORTING

Communicable Disease Reporting

Communicable Disease Reporting Rule

- 2015 Communicable Disease Reporting Rule
- Indiana State Health Commissioner Kris Box, MD, FACOG Reporting Rule for COVID-19 *(updated June 1, 2020)*
- COVID-19 Control Measures *(updated July 19, 2021)*
- Local Health Department Guidance on Communicable Disease Laws *(updated July 26, 2021)*

To report a case of a reportable disease please complete this form and fax to 317-234-2812 ***or*** call the ISDH Epi
233-7125 (8:15 am- 4:45 pm) or 317-233-1325 (after hours, weekends, holidays).

Access the communicable disease reporting resources here!

Communicable Disease List

Access the communicable disease reporting resources here!

Report incidences of the following infections, diseases, or conditions to the Local Health Department — Phone Number: _____

Reportable Communicable Diseases and Conditions for Health Care Providers, Hospitals, and Medical Laboratories
Effective December 25, 2015
410 IAC 1-2.5-75 & 76

Report immediately on suspicion (!). Report within 24 hours (*). All others report within 72 hours or as noted.

Acquired Immunodeficiency Syndrome (AIDS)
*Animal Bites
Anaplasmosis (*Anaplasma* species)
! Anthrax (*Bacillus anthracis*)
! Arboviral (Eastern Equine, St. Louis, La Crosse, West Nile, California, Western Equine, Powassan, Japanese)
Babesiosis (*Babesia* species)
! Botulism (*Clostridium botulinum*)
! Brucellosis (*Brucella* species)
Campylobacteriosis (*Campylobacter* species)
Carbapenemase-producing Carbapenem-resistant Enterobacteriaceae (CP-CRE)
Chancroid (*Haemophilus ducreyi*)
! Chikungunya virus
! Hantavirus pulmonary syndrome
! Hemolytic uremic syndrome, postdiarrheal
! Hepatitis, viral, Type A
Hepatitis, viral, Type B
! Hepatitis, viral, Type B, pregnant woman (acute and chronic) or perinatally exposed infant
Hepatitis, viral, Type C (acute), within five (5) business days
Hepatitis, viral, Type Delta
! Hepatitis, viral, Type E
Hepatitis, viral, unspecified
Histoplasmosis (*Histoplasma capsulatum*)
HIV infection/disease (The following conditions related to HIV are laboratory reportable)
Cryptococcus neoformans
Kaposi's sarcoma (biopsies)
Pneumocystis carinii
Rabies, postexposure treatment
Rocky Mountain spotted fever (*Rickettsia* species)
! Rubella (German Measles)
! Rubella congenital syndrome
Salmonellosis, non-typhoidal (*Salmonella* species)
! Shigellosis (*Shigella* species)
! Smallpox (Variola infection)
Adverse events or complications due to smallpox vaccination (vaccinia virus infection) or secondary transmission to others after vaccination.
! St. Louis encephalitis (SLE)
Staphylococcus aureus, vancomycin resistance level of MIC ≥ 8 µg/mL or severe *Staphylococcus aureus* in a previously healthy person
Streptococcus pneumoniae, invasive

Indiana Department of Health

Communicable Disease List

Effective immediately (2/6/2018) cases of chlamydia, gonorrhea, and syphilis should be reported using this form. Phone and fax numbers for your county can be found on the ISDH STD Prevention webpage under the "STD Morbidity Reporting in Indiana" heading.

Resources

- Rule Change Notification Letter
- Changes to Communicable Disease Rule
- Confidential Report of Communicable Diseases Form (**Updated 2/2/2018;** please review the listed conditions carefully, as some have been removed)
- Indiana Confidential Sexually Transmitted Disease (STD) Reporting Form **(Updated 2/6/2018)**
- Lab
- 2015 Reportable Disease List (Edited 9/11/2020)
- Communicable Disease Reporting Presentation Slides
- HIPAA and Public Health Letter

Page last updated: September 21, 2020

Page last reviewed: August 1, 2016

Access the communicable disease reporting resources here!

Indiana Department of Health

CP-CRE, VRSA, and *S. aureus* Reporting

How to report:

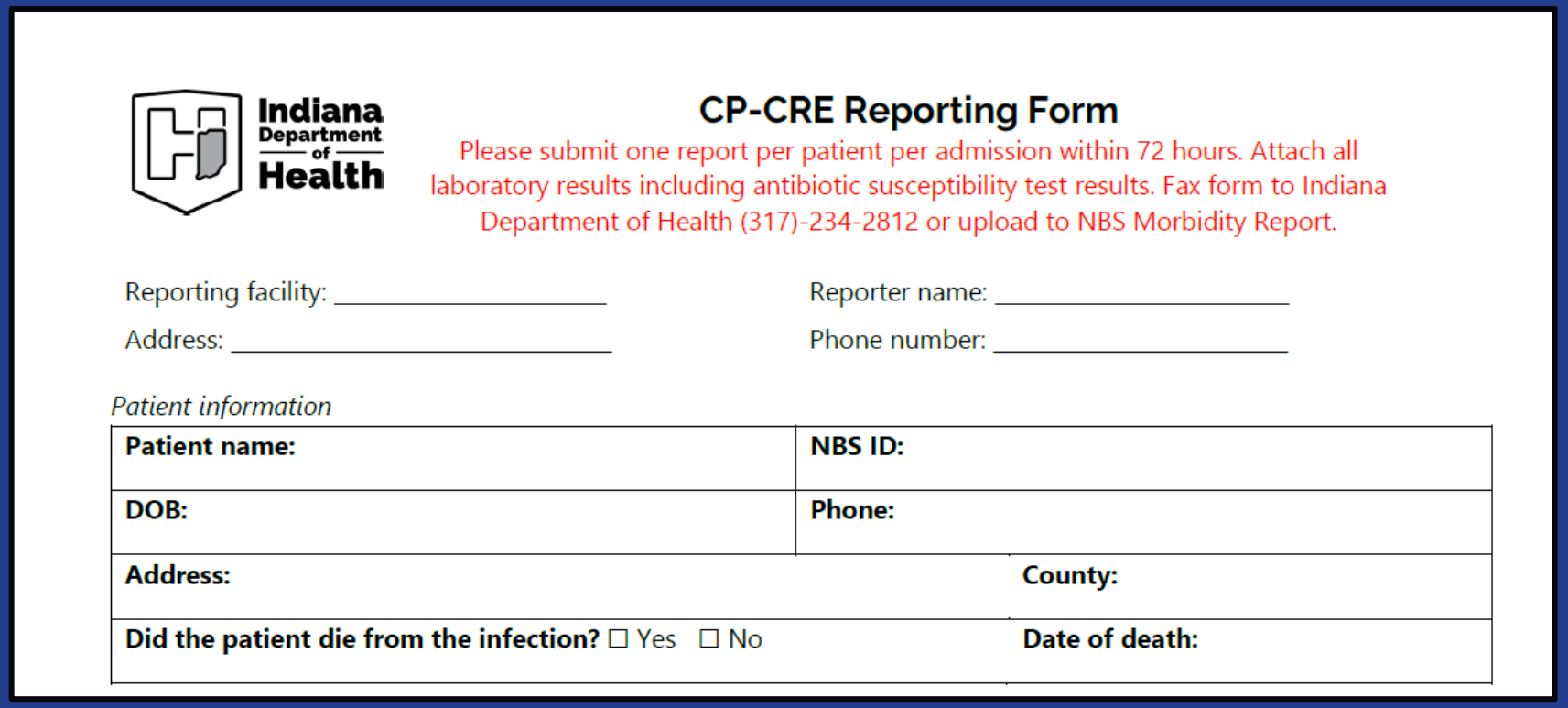
- Option 1: create morbidity report in NBS
  - attach all documents to morbidity report
- Option 2: fax all documents to AR epidemiologist or AR public health investigator
  - secure fax number: 317-234-2812

Documents to include when reporting:

- history and physical
- all relevant lab reports
- antimicrobial susceptibility testing (AST) report

CP-CRE Reporting Form

This form can be downloaded from the Antimicrobial Resistance webpage on the IDOH website.



Indiana Department of Health

CP-CRE Reporting Form

Please submit one report per patient per admission within 72 hours. Attach all laboratory results including antibiotic susceptibility test results. Fax form to Indiana Department of Health (317)-234-2812 or upload to NBS Morbidity Report.

Reporting facility: _____ Reporter name: _____

Address: _____ Phone number: _____

Patient information

Patient name:	**NBS ID:**	
DOB:	**Phone:**	
Address:		**County:**
Did the patient die from the infection? ☐ Yes ☐ No		**Date of death:**

When reporting suspected cases of CP-CRE, please fill out this form in NBS and attach to a morbidity report.

Include an H&P for the patient as well as all available labs and antimicrobial susceptibility testing (AST) results.

Indiana Department of Health

Candida auris Reporting

How to report:

- Option 1: create morbidity report in NBS
  - attach all documents to morbidity report

- Option 2: fax all documents to CA epidemiologist
  - secure fax number: 317-234-2812

Documents to include when reporting:

- history and physical
- all relevant lab reports
- antimicrobial susceptibility testing (AST) report

Reporting algorithm available here!

Candida auris Reporting Algorithm

A *Candida auris* case is received through lab identification.

Healthcare facility reports *Candida auris* case to Indiana Department of Health. Suspected cases should be reported within 72 hours with attached copies of any available lab results, antimicrobial susceptibility testing (AST) results and H&P.

Reporting suspected *C auris* cases.

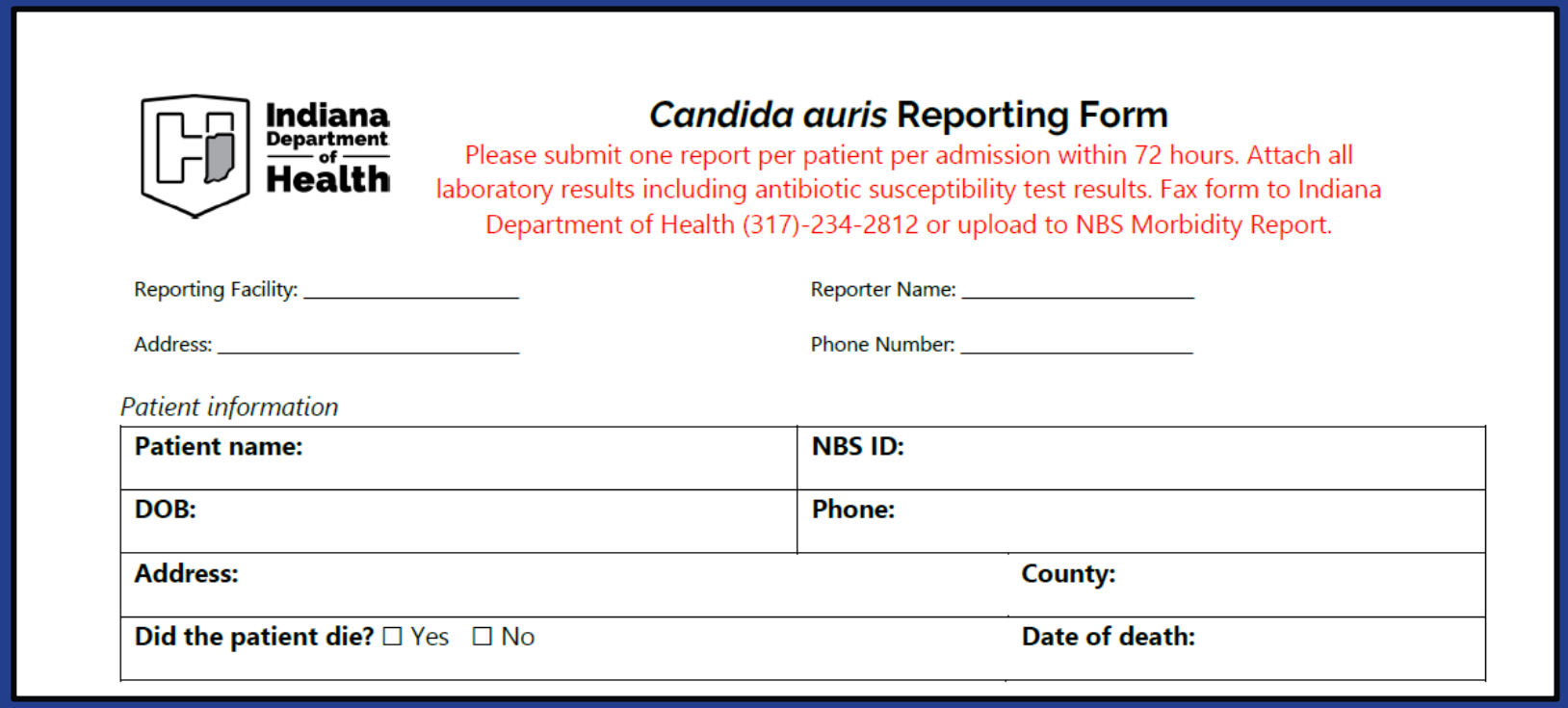
- Create morbidity report in NBS and attach supporting documents (preferred method).
- Fax documents to IDOH's secure line at (317) 234-2812.

IDOH recommendations

Patient should be placed in enhanced barrier contact precautions (without confirmed IDOH lab result). Use EPA List P products to disinfect environment and patient rooms. Flag patient's chart for quick identification in case of re-admission. Ensure an interfacility transfer form is utilized when a patient is transferred. Screen roommates for *C. auris* colonization, if applicable.

Candida auris Reporting Form

This form can be downloaded from the *Candida auris* webpage on the IDOH website.



Indiana Department of Health

Candida auris Reporting Form

Please submit one report per patient per admission within 72 hours. Attach all laboratory results including antibiotic susceptibility test results. Fax form to Indiana Department of Health (317)-234-2812 or upload to NBS Morbidity Report.

Reporting Facility: _____ Reporter Name: _____

Address: _____ Phone Number: _____

Patient information

Patient name:	**NBS ID:**	
DOB:	**Phone:**	
Address:		**County:**
Did the patient die? ☐ Yes ☐ No		**Date of death:**

When reporting suspected cases of CA, fill out this form in NBS and attach to a morbidity report.

Include an H&P for the patient as well as all available labs and antimicrobial susceptibility testing (AST) results.

Candida auris Webpage

Resources available here!

Candida auris

What is *Candida auris* and why is it important?

Candida auris (C. auris) is an emerging fungus that presents a serious global health threat. *C. auris* is resistant to many of the antifungal drugs commonly used to treat infections. *C. auris* can cause many different types of infection, such as bloodstream, wound, urinary tract, and ear. Invasive *C. auris* infections have been associated with 30-60% mortality rates among hospitalized patients. Most deaths have occurred in persons with other serious illnesses that increased the risk of death. *C. auris* is a public health concern due to its potential for multi-drug resistance, ability to spread in healthcare settings, and rapid appearance in many parts of the United States. Click here to see the latest national information from the Centers for Disease Control and Prevention (CDC). *C. auris* infections have also been reported in dozens of other countries. Outbreaks of this organism have occurred in healthcare settings, so early identification and communication about cases are essential to awareness and prevention.

Severe *Staph* in a Previously Healthy Person

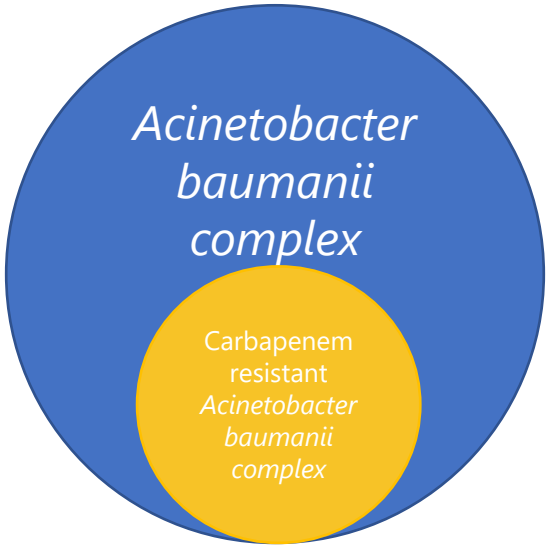
Criteria:

- *Staphylococcus aureus* isolated
- Infection results in death or ICU admission
- Case must not have been hospitalized, had surgery, or been a resident of a long-term care facility within the past year
- Case must not have had hemo- or peritoneal dialysis, percutaneous device, or indwelling catheter at time of culture

Organisms on “Watch”

Carbapenem-resistant *Pseudomonas aeruginosa* (CRPA)

Carbapenem-resistant *Acinetobacter baumannii complex* (CRAB)



*Do not start a case or submit a morbidity report for these organisms in NBS. Please include any antimicrobial susceptibility testing (AST) if possible.

Resources

Indiana Department of Health

HAI-AR Website

Directions:

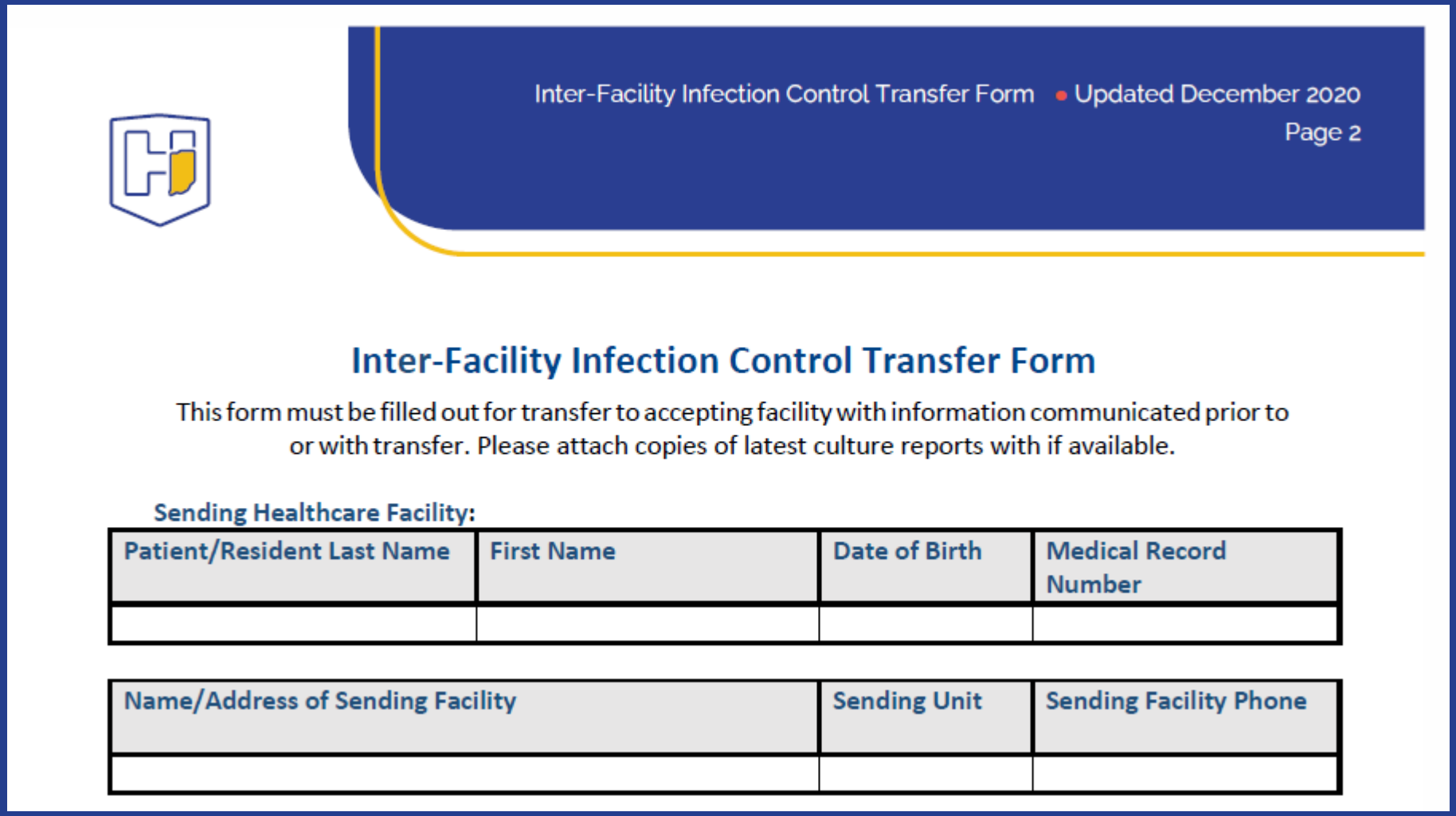
1. Go to in.gov/health
2. Click on “Epidemiology Resource Center” (ERC)
3. Under “Infectious Disease Epidemiology” click “Healthcare-Associated Infections and Antimicrobial Resistance Epidemiology,” or click here.

Inter-Facility Infection Control Transfer Form

Download the form here!

Inter-Facility Infection Control Transfer Form

Download the form here!



Inter-Facility Infection Control Transfer Form

This form must be filled out for transfer to accepting facility with information communicated prior to or with transfer. Please attach copies of latest culture reports with if available.

Sending Healthcare Facility:

Patient/Resident Last Name	First Name	Date of Birth	Medical Record Number

Name/Address of Sending Facility	Sending Unit	Sending Facility Phone

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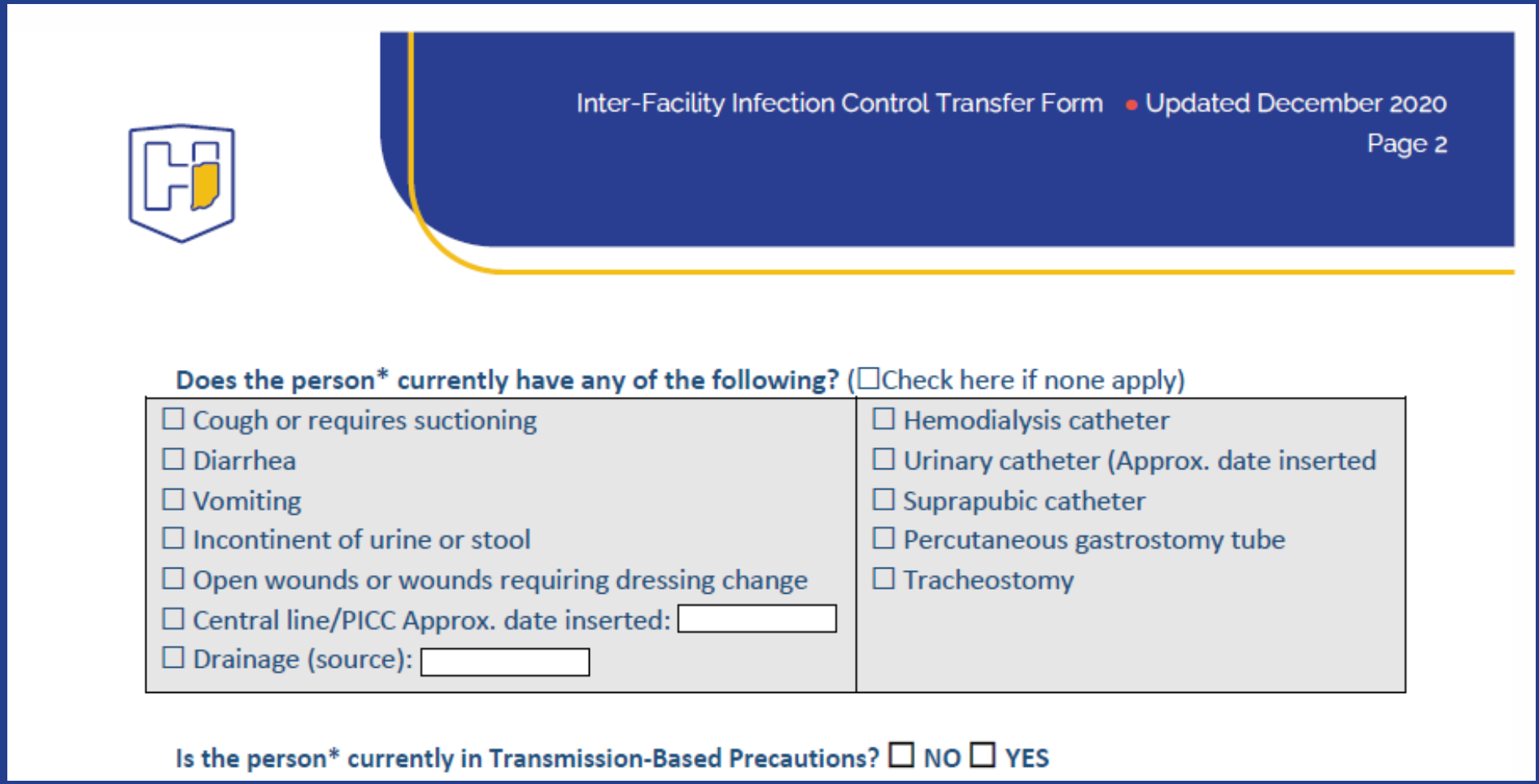
Inter-Facility Infection Control Transfer Form

Download the form here!



Inter-Facility Infection Control Transfer Form • Updated December 2020
Page 2

Does the person* currently have any of the following? (☐Check here if none apply)

☐ Cough or requires suctioning	☐ Hemodialysis catheter
☐ Diarrhea	☐ Urinary catheter (Approx. date inserted
☐ Vomiting	☐ Suprapubic catheter
☐ Incontinent of urine or stool	☐ Percutaneous gastrostomy tube
☐ Open wounds or wounds requiring dressing change	☐ Tracheostomy
☐ Central line/PICC Approx. date inserted:	
☐ Drainage (source):	

Is the person* currently in Transmission-Based Precautions? ☐ NO ☐ YES

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CRE vs CP-CRE vs CPO

		CRE	CP-CRE	CPO
MDRO		Yes	Yes	Yes
Case definition requirements	Enterobacterales?	Yes	Yes	Not necessarily
	Resistant to Carbapenem?	Yes	Yes	Not necessarily
	Geno/pheno positive?	No	Yes	Yes

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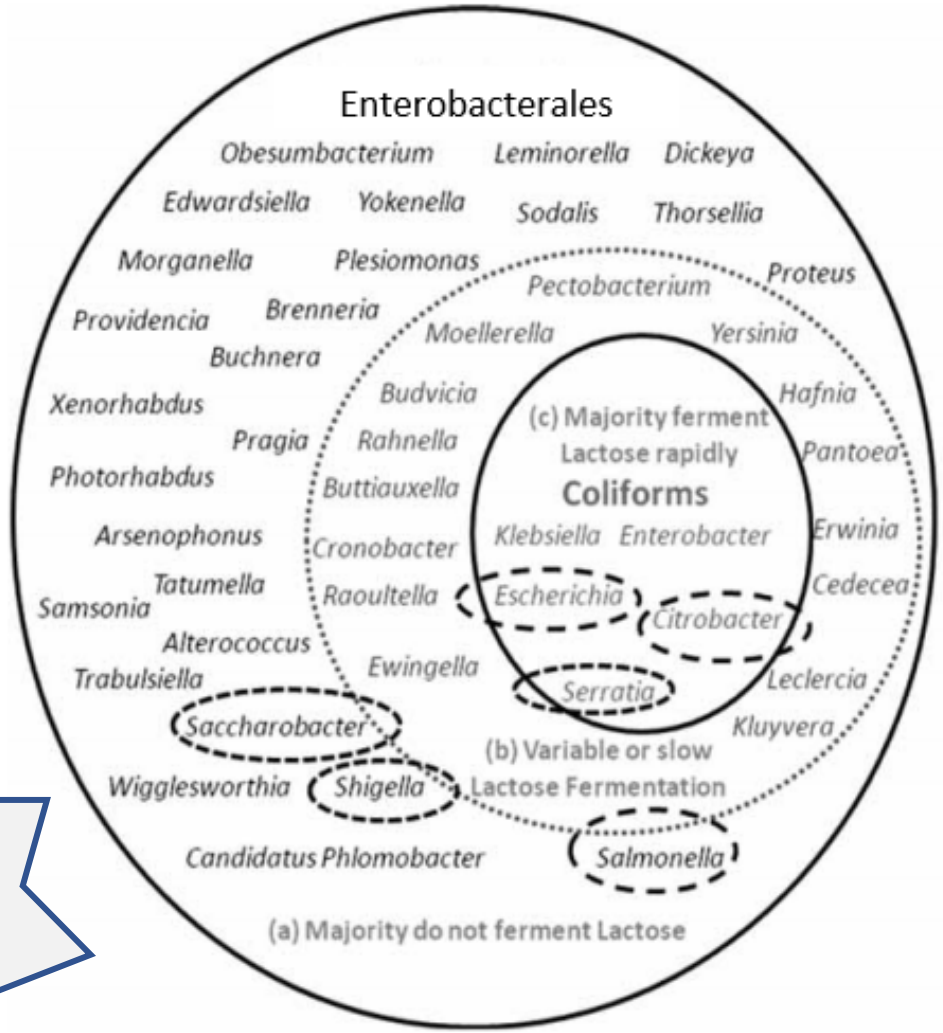
CP-CRE Identification

Enterobacterales (Enteric Organisms)

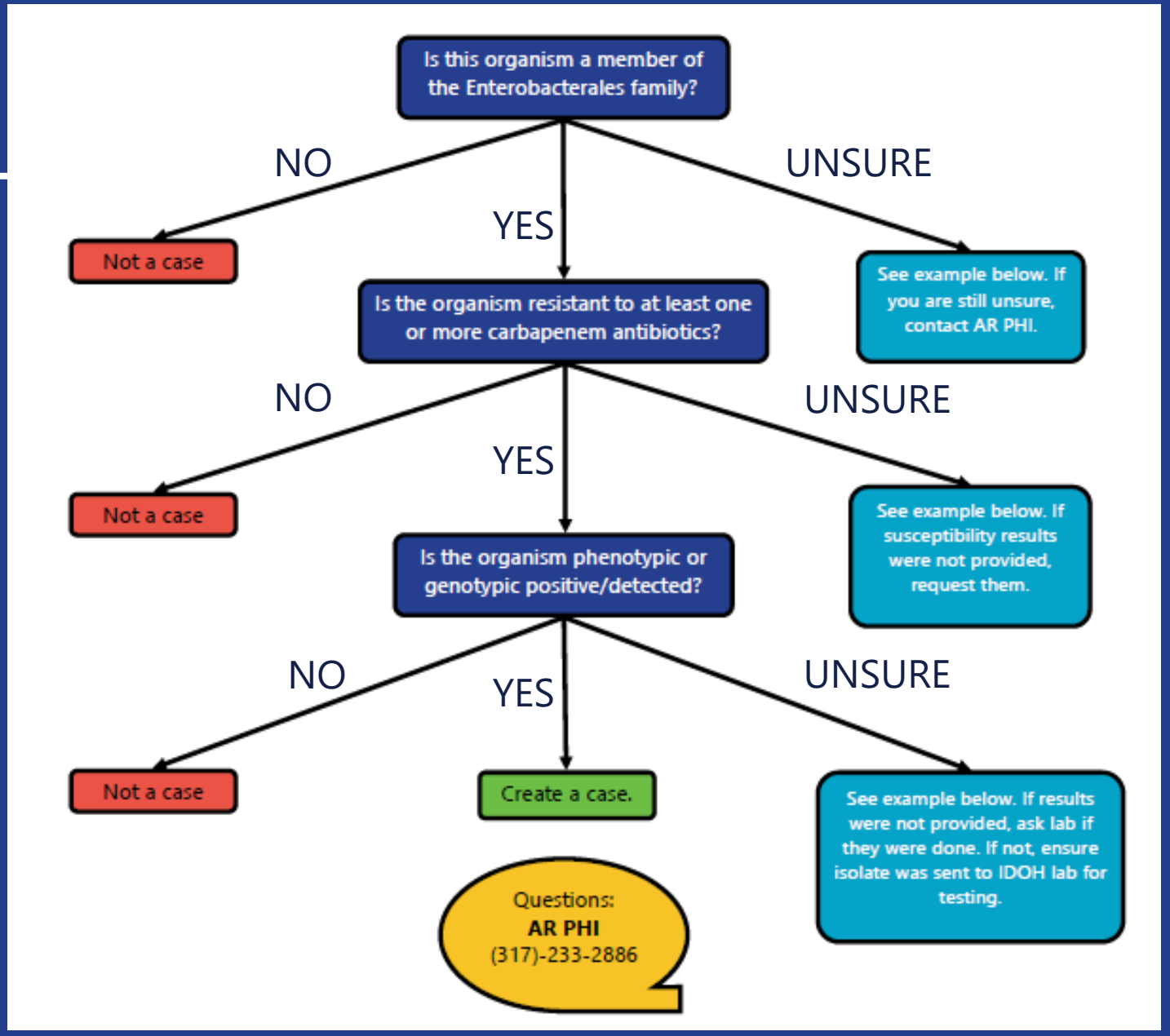
- *Escherichia* sp. (*E.coli*)
- *Klebsiella* sp. (*K. pneumoniae, K. variicola, K. oxytoca, K. ozaenae, K. ornitholytica*, etc.)
- *Enterobacter* sp. (*E. aerogenes, E. cloacae*, etc.)
- *Citrobacter* sp. (*C. freundii, C. koserii*, etc.)
- *Providencia* sp. (*P. rettgeri, P. stuartii* etc.)
- *Morganella* sp. (*M. morganii*, etc.)
- *Serratia* sp. (*S. marcescens*, etc.)
- *Proteus* sp. (*P. mirabilis, P. vulgaris, P. penneri*, etc.)
- Note: there are many more genera included within the family, but these are the most common CP-CRE that you will see



Find it here on the AR Webpage!

CP-CRE Identification Algorithm

Find the CP-CRE identification algorithm on the AR webpage!



Indiana Department of Health

CP-CRE Identification Algorithm

Enterobacterales

Escherichia sp.
Klebsiella sp
Enterobacter sp.
Citrobacter sp.
Providencia sp.
Marganella sp.
Serratia sp.
Proteus sp.
and others…

Genotypic Testing

Carba-R
PCR
*Will detect: KPC, IMP, NDM, OXA-48, VIM

Phenotypic Testing

mCIM
CarbaNP
MHT
*Will result positive or negative

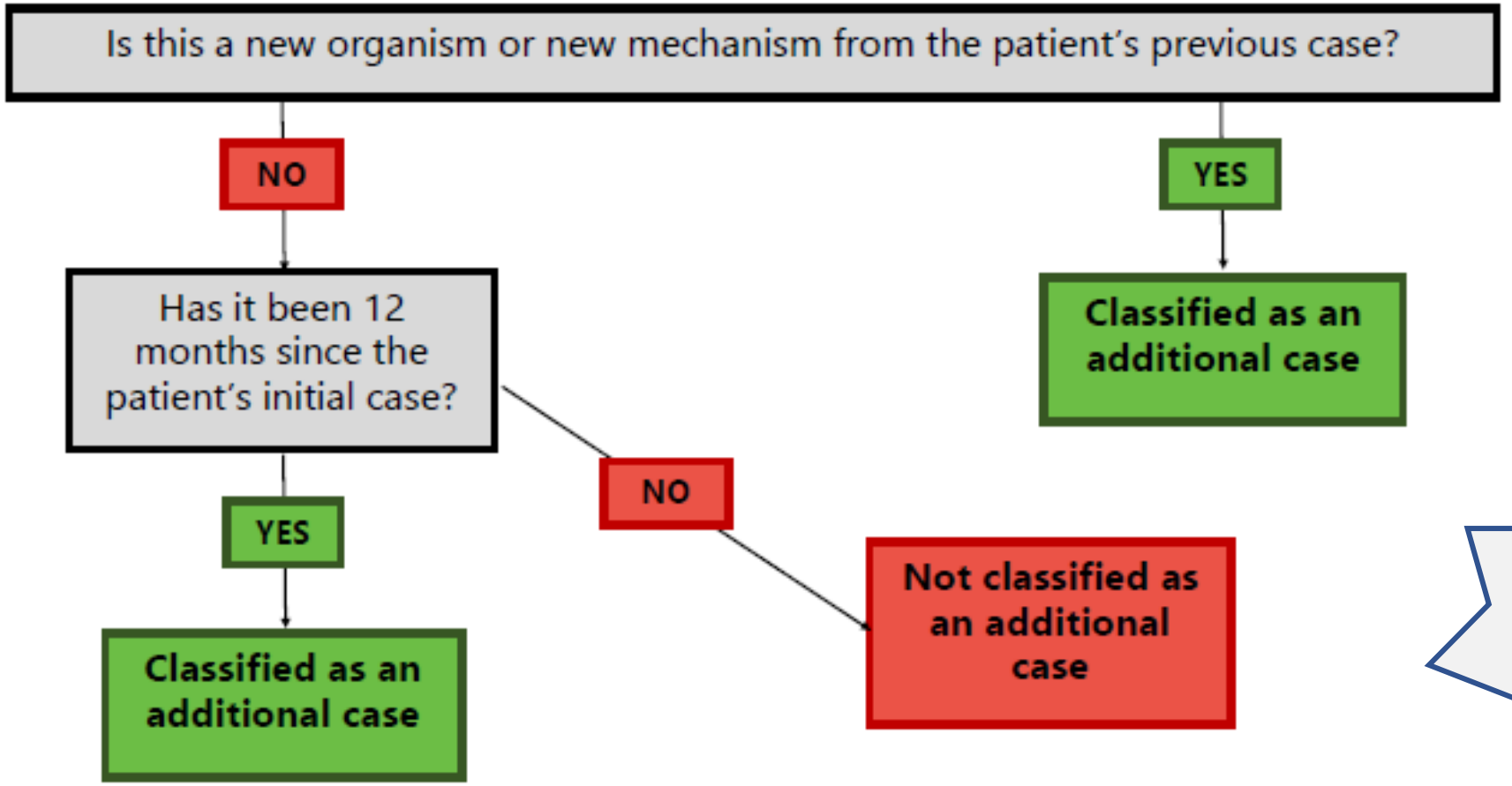
Carbapenems

Meropenem
Imipenem
Doripenem
Ertapenem

Find it here on the AR Webpage!

Indiana Department of Health

CP-CRE Recurrent Case

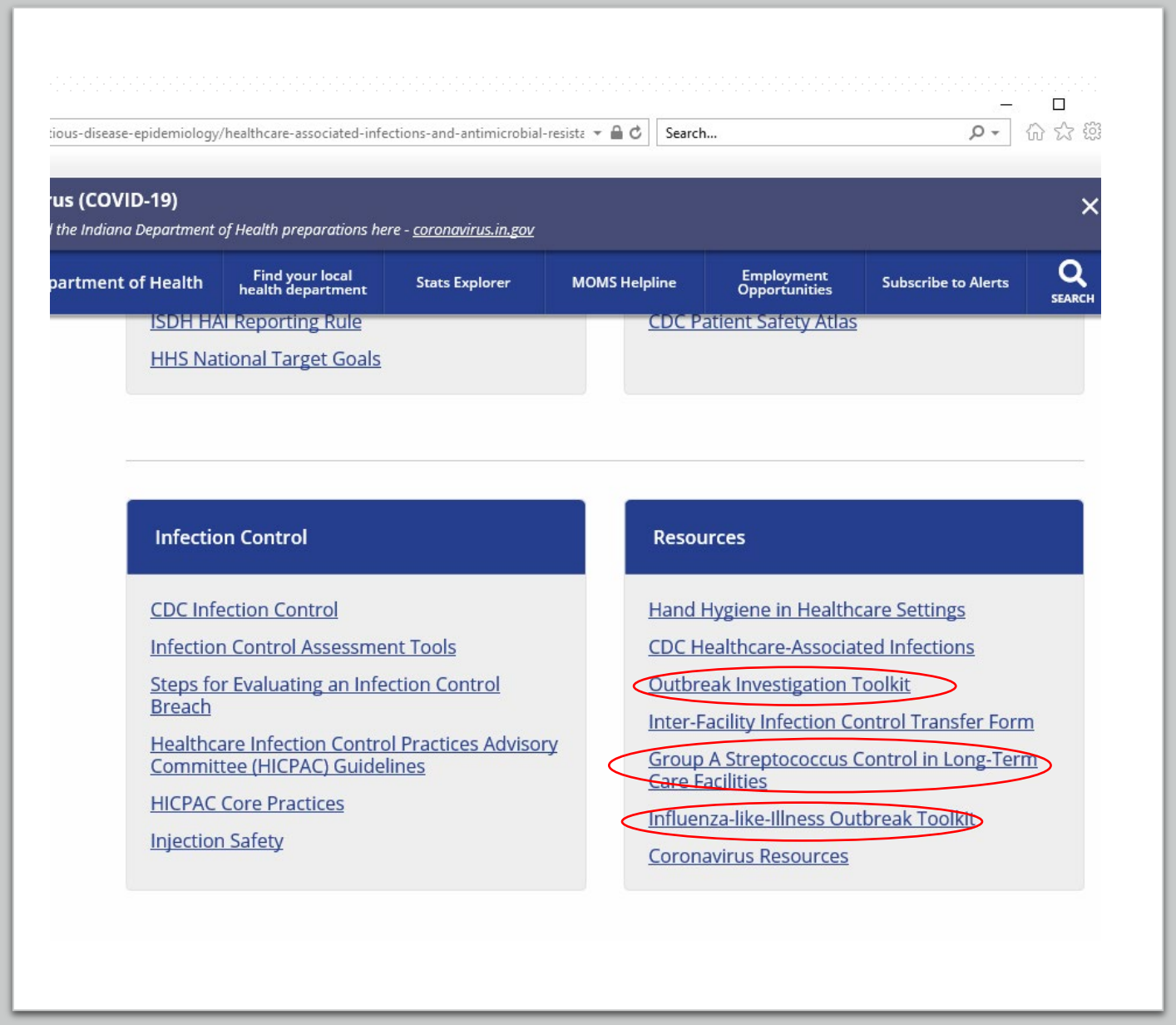


Find it here on the AR webpage!

Toolkits and Documents

- CDC's HAI outbreak investigation toolkit
- Influenza-like illness outbreak toolkit
- Group A *Streptococcus* control in long-term care facilities

Find the HAI webpage here!



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HAI/AR/AS Prevention Resource Page

The HAI/AR/AS webpage serves to distribute resources to both providers and patients.

This webpage is the product of collaboration among multiple Indiana agencies.

Topics covered include:

- Healthcare associated infections
- Antimicrobial resistance
- Antimicrobial stewardship
- Sepsis

Find the HAI/AR/AS webpage here!

Partner Organization	Initiatives and Programs	Audience
Indiana Hospital Association (IHA)	• Antimicrobial Stewardship • Healthcare Associated Infections • Sepsis • MRSA • C. diff Infections	• Acute Care
QSource/atom Alliance	• Antimicrobial Stewardship • Healthcare Associated Infection • C. diff Infections	• ER Departments • Physicians offices • Pharmacists • Dentists • Outpatient Departments • Long-term Care
Indiana State Department of Health (ISDH)	• Antimicrobial Stewardship • Antimicrobial Resistance • Healthcare Associated Infections	• Indiana healthcare facilities • The public

Indiana Department of Health

Prevention Resources for Acute Care Providers

Antimicrobial Resistance

Overview

Antimicrobial Resistance | ISDH

CDC Antibiotic Resistance Investments

Antibiotic Resistance Threats Report, 2019 | CDC

National Action Plan for Combating Antibiotic-Resistant Bacteria

Toolkits and Resources

MDRO Background and Toolkit | IHA

CRE Control and Prevention Toolkit | AHRQ

CDC Interim Guidance for a Health Response to Contain Novel or Targeted MDROs

Sepsis

Overview and Campaigns

Sepsis Initiative | IHA

Survive Sepsis | IHA

Toolkits

2017 Sepsis Awareness toolkit | IHA

2016 Sepsis Awareness Campaign case study | IHA

CDC Resources

Sepsis Information Homepage | CDC

Sepsis Infographic for Hospitals

Indiana Department of Health

CDC's Project Firstline

The Project Firstline collaborative was launched in 2020.

The collaborative is designed to provide infection control training to healthcare workers.

[Access Project Firstline here!]

Indiana Department of Health

CDC's Project Firstline

Project Firstline's Inside Infection Control Series videos:

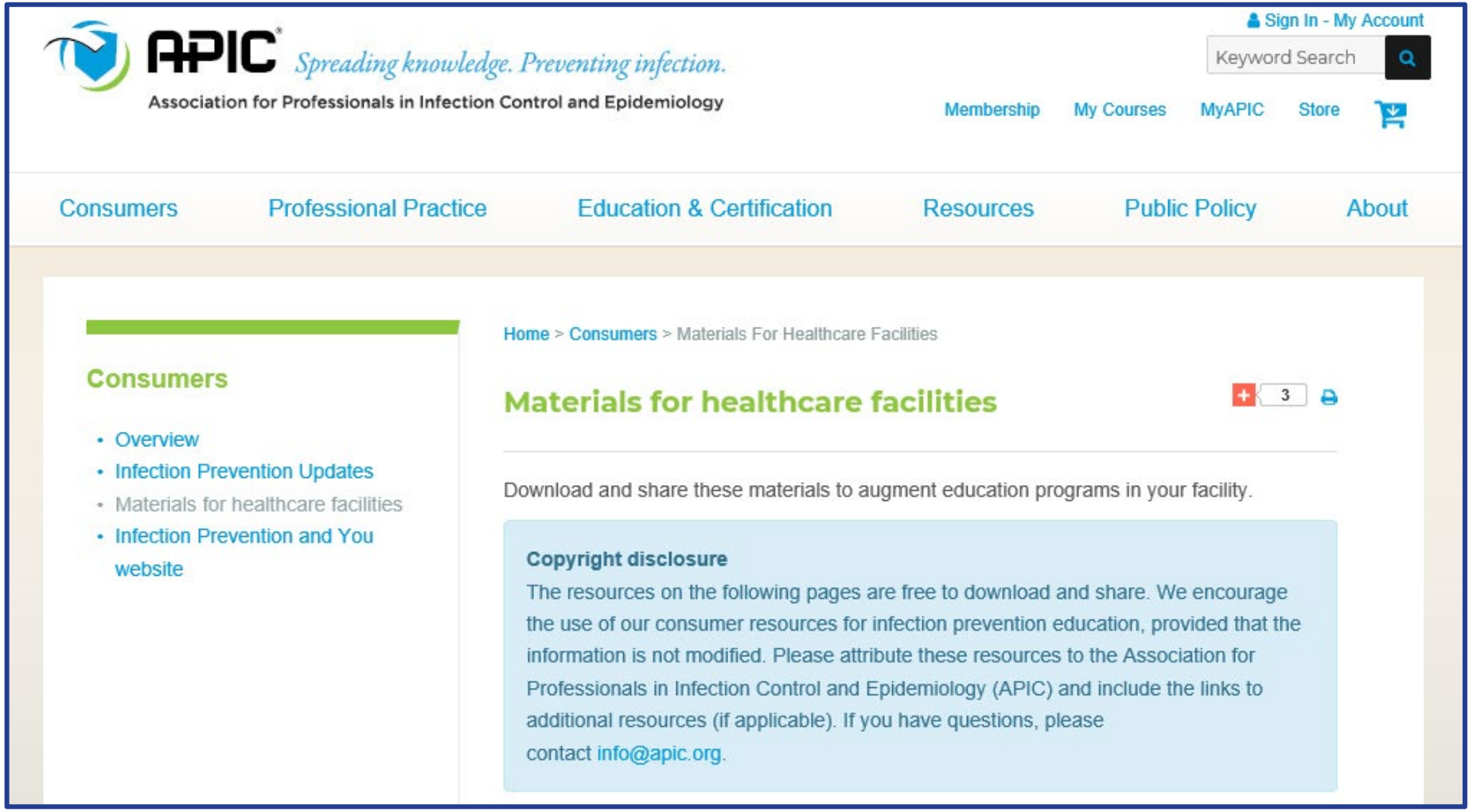
- "How do I test the seal on my N95?"
- "Do we really have to talk about hand hygiene? Again? Yes!"
- "Why does contact time matter for disinfection?"
- "Cleaning? Disinfection? What is the difference?"

Project Firstline's educational videos:

- "Safety tips for giving vaccine from a multi-dose vial"
- "Respiratory droplet basics"

APIC's Materials for Healthcare Facilities

[Visit APIC's webpage by clicking here!]



APIC's Materials for Healthcare Facilities

Some available materials include:

The Do's and Don'ts for wearing procedure masks in non-surgical healthcare settings

- Flyer for healthcare professionals [PDF]

The Do's and Don'ts for wearing N95 respirators in non-surgical healthcare settings

- Flyer for healthcare professionals [PDF]

The ABC's of Antibiotics

- Flyer for patients [PDF]
- Flyer for patients – Español [PDF]

What are healthcare-associated infections?

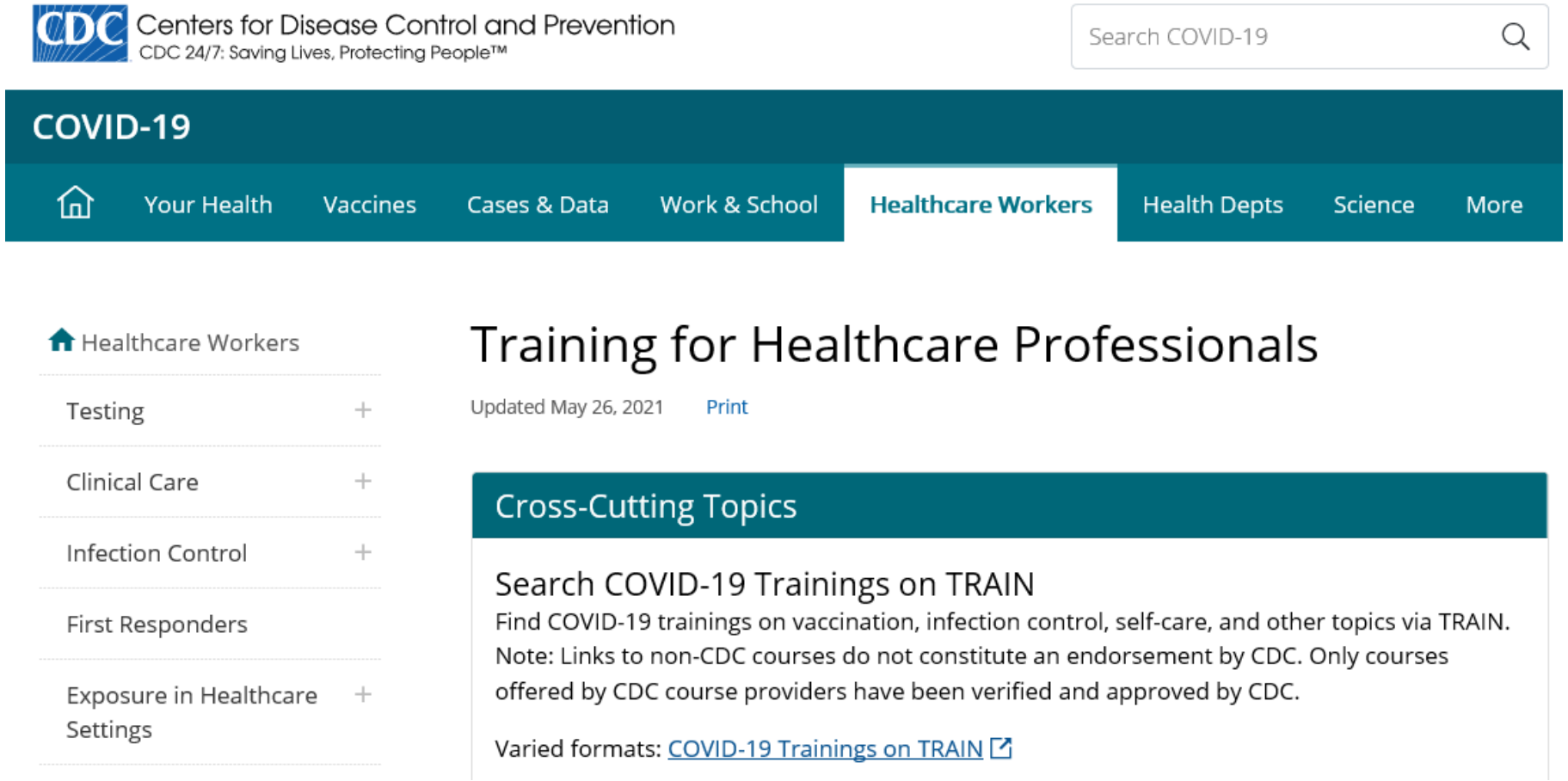
- Flyer for patients [PDF]

Infection Prevention and You at the Hospital

- Hospital poster [large file, PDF]
  (11"x17", high-resolution for professional printing)
  (PDF en Español)**
- Hospital flyer [PDF]
  (8.5" x11", for professional printing, also desktop printer-friendly)
  (PDF en Español)
- Hospital brochure [PDF]
  (8.5" x 11", two pages, desktop printer-friendly)
  (PDF en Español)
- Hospital tri-fold brochure [PDF]
  (high-resolution for professional printing)
- Hospital PowerPoint presentation for closed circuit TV [large file, PPT]
  (PPT en Español)

COVID-19-Related Trainings from the CDC

[Visit CDC's COVID-19: Training for healthcare professionals by clicking here!]



COVID-19-Related Trainings from the CDC

Some available trainings include:

Nurses on Shift Work and Long Hours
Learn ways to reduce workplace fatigue and stay healthy. Free CE.

Self-paced online course: Nurses on Shift Work and Long Hours

Workplace Violence Prevention for Nurses
Learn about the scope and nature of violence in the healthcare setting. Free CE.

Self-paced online course: Workplace Violence Prevention for Nurses

The Science of Social Distancing: Part 1
Learn about the science on social distancing, strategies to support it, and how findings from past pandemics — as well as the current one — can shape responses today.

Webinar: The Science of Social Distancing: Part 1

The Science of Social Distancing: Part 2
Learn more about social distancing. Topics include benefit-risk analysis of social/physical distancing strategies, including for vulnerable populations; strategies for mitigating mental health impacts; and what science is available to guide eventual relaxation of measures.

Webinar: The Science of Social Distancing: Part 2

Pfizer-BioNTech COVID-19 Vaccine: What Healthcare Professionals Need to Know
Learn about the COVID-19 vaccine manufactured by Pfizer Pharmaceuticals, based on the recommendations of the Advisory Committee on Immunization Practices and guidance from the manufacturer. Free CE.

Self-paced online course: Pfizer-BioNTech COVID-19 Vaccine

Moderna COVID-19 Vaccine: What Healthcare Professionals Need to Know
Learn about the COVID-19 vaccine manufactured by Moderna, Inc., based on the recommendations of the Advisory Committee on Immunization Practices and guidance from the manufacturer. Free CE.

Self-paced online course: Moderna COVID-19 Vaccine

Question and Answer

If you need someone added to the distribution list, please contact Hannah Gallion, AR PHI, at hgallion@isdh.in.gov.