

APIC History National Conference



1997
New Orleans,
Louisiana

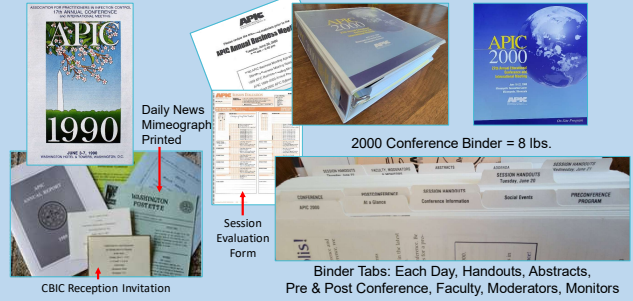


APIC Original Steering Committee Honored

Back L-R: ?, Julie Garner, Patricia Lynch, Betsy Pantelick, Rita McCormick, ? Front L-R: Jean Vandermade, Grace Emori, Carolyn Langewisch

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APIC Conferences – Binders, Printed Materials



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APIC Conferences – Bags & Badges



2007 – 25th Anniversary
Multi-pocket canvas bag,
2 Handles + 2 backpack
straps



2024
3 oz fiber bag,
2 Handles, single zipper



2007
Pocket Purse
Version



2024
Single Tag
QR Code



1990
Credit Card
Version

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APIC Conferences – Audio Options



Cassette Tapes

1995 International Forum
Science, Common Sense and
Reality in Infection Control



CD-ROMs

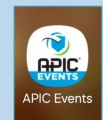
2004 Phoenix
Turning up the heat
On Infection Control



2010

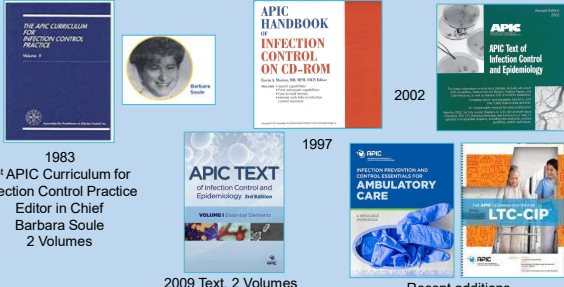


Cellphone Apps



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APIC Text – Print, CD & Digital



1983
1st APIC Curriculum for Infection Control Practice
Editor in Chief
Barbara Soule
2 Volumes

2002

1997

2009 Text, 2 Volumes

Recent additions

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Julia Garner, RN



- CDC Chief for Hospital Infectious Programs
- "The Brown Julie": The first guidelines for infection control
- Isolation precautions in hospitals
- Traveled the world supporting the field

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Grace Emori, RN



Interned as a child due to World War 2

Nurse Epidemiologist with CDC

Had quiet GRIT

Always a resource for those in the field

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Claire Coppage, RN



No Photo Available

A character! Dynamic presenter with engaging techniques

CDC RN

Early on she taught the ONLY training program in the world for infection prevention.

Animal Lover

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APIC Begins 1972




APIC in 1972

Our First President...
Patricia Lynch
RN, MBA



Provided ICPs with a professional Organization for education and Support and relationships

President—[Patricia Lynch](#)
 President-Elect—Kay Wenzel
 Vice-President—Shirley Cheick
 Corresponding Secretary, Official Letters—Carolyn Langewisch
 Recording Secretary, Official Records and Chairman of Membership—Leilani Kicklighter
 Treasurer and Chairman of Finance—Ruth Groeneveld

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Patricia (Pat) Lynch & M. Jeanne Cummings – Harborview, Seattle, 1987

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If you could go back and give yourself advice when you were starting, what would that be?

- Find professionals with more experience and learn from them
- Find your resources and stick to the evidence: Join APIC, know the texts available to you, guidelines, ect.
- Your power as professional comes from influence not position
- Market your program
- Don't get discouraged by your mistakes. LEARN FROM THEM



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Technology Changes

- Changes in how to gather data.
 - All paper, pencil, and leg work.
 - Silver lining kept well connected with those giving the care
- Win: OR risk adjusted information
 - Collaborated with OR to classify the surgeries
 - Technology partners helped input and calculate data



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Technology Impact

- Radiology
 - CT scan
 - MRI
- Laboratory
 - Rapid Tb test
 - PCR
 - Genome testing
- Antimicrobial stewardship

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Technology Impact – Laboratory

- Testing for tuberculosis
- Rapid sputum test: Xpert MTB/RIF molecular test
- Based on polymerase chain reaction, which detects *Mycobacterium tuberculosis* DNA and, simultaneously, resistance to rifampin
- Results within two hours
- 2010 WHO endorsed the use of the Xpert MTB/RIF for the diagnosis of tuberculosis
- Sputum culture: 1 to 8 weeks to provide results

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Technology Impact – Laboratory

- Testing for tuberculosis: Blood test
- QuantiFERON (QFT) is an interferon- γ release assay (IGRA)
- Aids in the evaluation of tuberculosis (TB) infections; latent or active
- Recommended by the CDC as an alternative to the tuberculin skin test (TST)
- Offers improved performance and quicker results
- 2001, FDA approved the 1st generation of QuantiFERON-TB (QFT)
- 2017, 4th generation, QuantiFERON-TB Gold Plus, approved

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Technology Impact - Radiology

- Computed tomography, CT scan
- Sir Godfrey Hounsfield was an eccentric engineer at the Beatles' record company
- He pondered whether it was possible to detect hidden areas in Egyptian pyramids
- He figured how to use high-energy rays to reveal what's invisible to the naked eye
- He invented a way to see inside the hard skull and get a picture of the soft brain inside



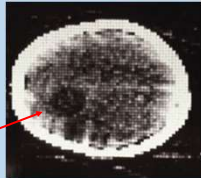
Godfrey Hounsfield stands beside the EMI-Scanner in 1972
PA Images via Getty Images

<https://theconversation.com/50-years-ago-the-first-ct-scan-let-doctors-see-inside-a-living-skull-thanks-to-an-eccentric-engineer-at-the-beatles-record-company-149907>

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Technology Impact - Radiology

- Computed tomography, CT scan
- 1st CT scan: October 1, 1971
 - Atkinson Morley Hospital
 - Wimbledon, England
- The brain of a middle-aged female patient with a suspected tumor in the left frontal lobe
- It took two days to reconstruct the images on a mainframe computer EM (Electric and Music Industries)



The first clinical CT scan, with brain tumor visible as darker blob

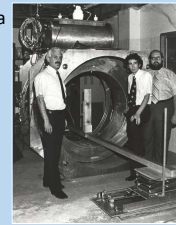
'Medical Imaging Systems: An Introductory Guide,' Maier A, Steidl S, Christlein V, et al., editors., CC BY

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Technology Impact - Radiology

Massachusetts General radiologists pioneer the use of MRI to diagnose illness and injury

- 1976 an image of a tumor in the thorax of a mouse was obtained
- 1st human scan,
 - July 3, 1977
- A cross-section of Minkoff's chest, revealing his heart, lungs, vertebrae, and musculature



Mass General Hospital MRI

L-R: Dr. Raymond Damadian, his 1977-model scanner, his colleagues Lawrence Minkoff and Michael Goldsmith

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Port of Longview



- The Port of Longview is a deep-water port authority located in Longview, on the Columbia River
- Eight marine terminals (docks)
- Approximately 1,000 domestic and international ships and barges arrive and depart per year,
- Primarily focused on bulk cargo like grain and wood products



<https://wstc.wa.gov/wp-content/uploads/2020/01/2015-0421-BP13-PortofLongview-3.pdf>
<https://www.google.com> (AI Overview)

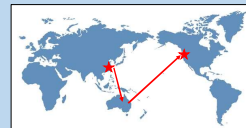
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Port of Longview



Case Study

- A 33 year old Pilipino male became ill, while working on a freighter (cargo ship)
- Medical care provided in SE Asia: Dx: pneumonia, Rx: antibiotics
- Medical care provided in Australia: Dx: pneumonia, Rx: antibiotics
- Arrived in Longview, acutely ill, presented in ED



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Port of Longview



Case Study

- Chest x-ray: fluid filled cavitary pulmonary lesions
- Dx: Pulmonary tuberculosis
- Admitted: Airborne Isolation
- Cowlitz County Public Health Department notified
- Stevedore Shipping Company, Portland, OR notified

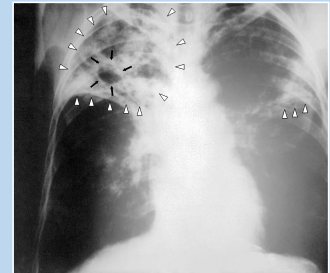
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Chest Radiograph - Tuberculosis

White Triangles Δ
Bilateral Infiltrates

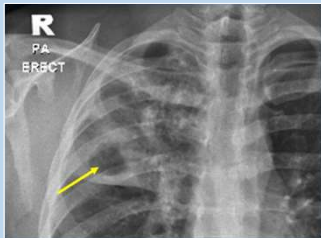
Black Arrows →
“Caving Formation”

Diagnosis:
Advanced bilateral
pulmonary Tb

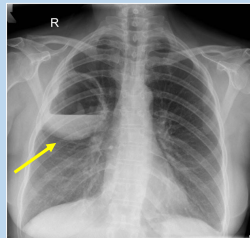


https://en.wikipedia.org/wiki/Lung_cavity

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Yellow Arrows – Cavitary Pulmonary Lesions
Diagnosis: Advanced Tuberculosis



Rt: with fluid

<https://radiopaedia.org/cases/cavitating-lung-lesion>

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Port of Longview



Case Study



- Cowlitz County Health Department tasks
- All crew on freighter were exposed to a case of active M. Tb
- All crew needed post exposure evaluation
- All crew had chest x-rays done at the local hospital

- Freighter – Tender – Auto – ED



Ship Tender

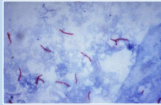
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Port of Longview



Case Study

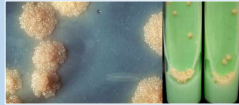
- Hospitalization included multi drug regimen
- Sputum smears for AFB and cultures were obtained
- When 3 consecutive negative sputum smears for AFB were obtained on different days, he was eligible for discharged



M. Tb, Ziehl-Neelsen stain



M. Tb bacteria



M. Tb culture

<https://microbenotes.com/mycobacterium-tuberculosis/>

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Port of Longview



Case Study

- After 5 weeks of hospitalization,
- Discharged home: the Philippine Islands



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Developing and Implementing Key Protocols

- Body Substance Isolation
- Barb's hospital was only the THIRD in the US to implement.
- Taught to her by Pay Lynch, Jeanne Cummings, and Marjorie Jackson
- Published in 1990
- Change management tactics to get buy in



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Implementing Key Protocols

- Body Substance Isolation
- Harborview Medical Center, Seattle, WA
- Highline Hospital, Burien, WA
- Study Period: 1984 – 1988
- Published AJIC, February 1990

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Implementing Key Protocols

- Hepatitis B vaccine
- First licensed for use in 1981, Heptavax
- This initial vaccine was a plasma-derived version, developed from blood donations from individuals who had recovered from hepatitis B and had developed antibodies.
- 1986, a recombinant version of the vaccine, Recombivax HB, licensed
- 1989, a second recombinant vaccine, Engerix-B, was licensed

<https://www.google.com/search?client=firefox-b-1-d&q=when+was+hep+b+vaccine+introduced>

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Implementing Key Protocols

- Hepatitis B vaccine: original strategy
- Target only people at highest risk, such as healthcare workers, intravenous drug users, and patients on dialysis
 - HCW: ED, OR, L&D received the vaccine first
- This strategy didn't work because the disease can be transmitted to people who aren't in high-risk groups
- 1991 strategy changed to recommend that all infants and young children receive the vaccine
- This has led to a decline in hepatitis B infections in the United States, and has virtually eliminated the disease in children under 19

<https://www.google.com/search?client=firefox-b-1-d&q=when+was+hep+b+vaccine+introduced>

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How did you influence or mentor others in the field of infection prevention?

- Willing to support her staff with formal processes as well as informal
- Took calls from anyone who reached out
- Role Model
- Writing and teaching around the world



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Closing Advice

- The field is dynamic, impactful, and always evolving.
- Lean into this.
- Enjoy your work



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Elaine Larson, AJIC Editor
Retire: December 31, 2019
APIC 2019 Philadelphia



Nate White
Grandson

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Elaine & Nate
Exit stage, together!

APIC 2019
Philadelphia



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Closing Advice-Glenda

- Being an IP is a way of life, it's not just a job!
- Get to know staff: Laboratory, Radiology, EVS, Facilities
- Surprises and opportunities pop up, when least expected
- It can take you to places that you never dreamed of going!
- Have fun – enjoy the ride!



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Barbara Soule

Elaine Larson

Glenda Schuh

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