

# Patients' experiences of infection precautions used in their care A literature review

Wangsi Li Xiling Sun

Bachelor's thesis
June 2020
Health Care
Degree Programme in Nursing

Jyväskylän ammattikorkeakoulu JAMK University of Applied Sciences



#### Description

Author(s)	Type of publication	Date					
Wangsi Li	Bachelor's thesis	June 2020					
Xiling Sun		Language of publication: English					
	Number of pages 21	Permission for web publication: x					
Title of publication Patients' experiences of infection precautions used in their care A Literature Review							

Degree programme

Degree Programme in Nursing

Supervisor(s)

Jalonen Anu, Luotojoki Tiia, Sinivuo Riikka

Assigned by

-

#### Abstract

Hospital infections are very common, and there are many ways to infect them, such as surgical wounds and infections by nurses. Therefore, exploring how to prevent infection is very important to patients.

The aim of the thesis is to describe the various patients experiences of infection precautions used in their care. The purpose of the thesis is produce information that can be used developing the nursing care of patients with infectious diseases.

The study was conducted as a literature review and the data was collected using one database is CINAHL. The results were analyzed by using inductive content analysis method from five articles. The results were divided into three categories:1. Give emotional support 2. Teamwork between patients and their families 3. Daily inspection of isolation equipment in isolation ward.

In conclusion, we can use some preventive measures to reduce the incidence of infection, to make patients safer to take care of, prevention of medical-related infections is very important for the medical care of each country.

Keywords/tags (subjects)

Infection precautions, isolation, hematological disease isolation, patient experience

Miscellaneous (Confidential information)

# **Contents**

1 Introduction	2
2 The importance of infection precautions	3
2.1 Infection precautions	3
2.2 patient experience	5
3 Aim, purpose and research questions	6
4 Methodology	7
4.1 Literature review	7
4.2 Scientific article selection process	8
4.3Data analysis	9
5 Results	11
6 Discussion and conclusion	13
6.1 Discussion of key findings	13
6.2 Ethical issues, reliability and validity	14
6.3 Conclusion and recommendations for further studies	14
References	16
Appendix	
Appendix 1.Data on the patient's experience in taking infection precaut	ions17
Tables	
Tables 1.Inclusion criteria	7
Tables 2.Searching results	7
Figures	
Figure 1. Classification of nursing measures	9

### 1 Introduction

Hospitals are densely populated and are most susceptible to contamination by pathogenic microorganisms. There are many factors that can cause hospital infections, such as wound infections after surgery, and some diseases that cause infections such as pneumonia and sepsis. There is also an infection in the nurse intervention, such as a urinary tract infection when the nurse catheterizes the patient. There are also venous catheter infections. Therefore, prevention of infection is very important for patients, and nurses should take measures to prevent infection. (Hegerle et al. 2018)

According to research statistics, medical-related infections occur in every country, so this is a worldwide problem. According to the data, 6.4% of hospitalized patients in England have infections, 7% of patients in Europe have infections, and even 37,000 have died of infection. Therefore, prevention of medical-related infections is very important for every country's medical care. There are four preventive measures to prevent infection, such as environmental hygiene, hand hygiene, use of personal protective equipment, and safe disposal of sharp tools. (Gammon 2007.)

Environmental hygiene: the environment must be kept clean and dry without pollution, and the environment must be kept clean and hygienic after each use. (Harold 2007.)

Hand hygiene: refers to keeping hands clean and not wearing jewelry. Wash hands before and after each contact with the patient. Washing hands is recommended with running water and hand sanitizer. (Ifeoma 2016.)

Use of personal protective equipment: gloves should be worn for invasive procedures and should only be worn once. Replace gloves in time before contacting the next patient. If gloves are found to be broken, replace gloves in a timely manner. (Fereday & Muir-Cochrane 2006.)

Safe disposal of sharp tools: in order to protect the medical staff and prevent patient infection, there are strict requirements for the disposal of sharp tools. Do not bend or break the needle before handling, do not directly touch the needle part of the syringe manually, and do not close the needle tightly. (Dale & David 2006.)

Therefore, it is very important for nurses to take comprehensive measures to prevent infection. The aim of the thesis is to describe the various patients' experiences of infection precautions used in their care. The purpose of the thesis is producing information that can be used developing the nursing care of patients with infectious diseases.

# 2 The importance of infection precautions

For patients who need to infection precautions, it is important to isolate the patient himself, which is not only beneficial to the patient, but also to other patients and doctors and nurses in the hospital. Infection precautions of patients who need to be isolated can give the patient a living environment that suits her. The proper living environment promotes the recovery of the patient's disease. Therefore, infection precautions of patients are an important point. (Chapman & Rush 2003.)

# 2.1 Infection precaution

Precautions means that the patient's blood, body fluids, excreta, and secretions are considered infectious and need to be isolated, regardless of whether there are obvious blood stains, contamination, contact with incomplete skin and mucous membranes, and contact with the above substances. (Gawad 2017.)

Standard precautions refer to the prevention of infections of blood-borne pathogens and various body fluid transmission diseases, including blood, secretions, and excretions. Standard precautions are mainly through some protective measures to prevent infections, such as hand washing, gloves, surgical isolation suits and facial protection measures to prevent contact with blood and skin to reduce the risk of infection. (Amoran & Onwube 2013.)

Droplet precautions are mainly used to prevent particles less than 5 microns in diameter in air, mainly for patients with infectious diseases, such as pneumonia, various influenza, pertussis and other infectious diseases. Because infectious particles can spread in the air and spread to others, masks should be used to prevent infection. (Fajemilehin, Dare & Oluseyi 2010.)

Contact precautions are measures taken by a nurse to contact an item in a patient's environment, such as touching a patient's clothing, or touching a patient's skin such as wound secretions, pressure sores, or other body fluids of the patient. Therefore, exposure prevention can reduce the risk of contracting diseases. (Johansson, Nuutila & Virtanen 2005.)

Airborne precautions are based on the principle of air flow to clean exhaust and ventilation. Because of the spread of pathogens in the air, for example, patients with infectious diseases can spread pathogens by breathing cough, and there are microbes in the pipeline. Therefore, air precautions are very important to prevent infection. (Picalau, 2012.)

Definition of protective isolation of hematological diseases: Because patients with blood diseases have reduced immune function and are prone to serious infections, in order to prevent infection, protective isolation measures should be taken for such patients to allow patients to be in a sterile environment throughout the treatment. In the prevention of infection. (Annibali, 2017.)

Prevention of infection is very important for patients, and it can be strengthened standard precautions to reduce the risk of infection. By improving the hospital infection prevention and control management network; improving the patient's awareness in preventing and controlling infections; tracking and observing infection risk factors; focusing on disinfection and sterilization monitoring methods can effectively protect the safety of patients. Reducing the risk of infection can promote the treatment of patients' own diseases and prevent other complications. (Park & Seale, 2017.)

# 2.2 Patient experience

In order to do a good job of patient care, it is important to interview patients with their experiences. We must respect the patient's feelings and understand what they want most to give them better care. In order to understand the patient's feelings, we interviewed patients with surgical site infections and learned about their feelings. Patients with surgical site infections not only have physical pain, but also psychological fear and anxiety, as well as economic pressure. Through their

experience, you can understand how much damage the surgical site infection has caused them, so it is very important for patients to prevent infection. (Nazarko 2008.)

By interviewing patients' experiences and feelings, they can understand that nurses do not do well in one aspect and need to improve and improve. They can also know where the nurses are doing what they like, which can improve and improve our infection prevention measures. The paper selected 60 patients from the ICU for interviews. The data showed that 36 patients agreed that the nurses should give information reminders before indwelling catheterization, and told patients about the benefits of using indwelling catheters, so it can be seen that there are more than half the patient felt that the hospital's nurses' humanistic care was doing very well. Twenty-eight patients agreed that the nurses asked them about their feelings after they had indwelling catheterization, and that there were problems, but half of them did not agree, so it indicated that some of the nurses in the hospital did not have enough humanistic care to improve. All nurses should be educated to raise their awareness of patient care. At the same time, in the interview, some patients may have hematuria, pus around the catheter, and swelling of the male scrotum. It can be seen that the patient develops an infection after indwelling catheterization, so the nurse should pay attention to strict hand washing operation and aseptic technique to prevent infection when the patient is catheterized. (Ndomba et al. 2008.)

# 3 Aim, purpose and research questions

The aim of the thesis is to describe the various patients' experiences of infection precautions used in their care.

The purpose of the thesis is to produce information that can be used developing the nursing care of patients with infectious diseases.

The research question is "how can nurses support patients who need infection precautions?"

# 4 Methodology

#### 4.1 Literature review

Literature review is a systematic review and analysis of various documents related to the problem to understand the process of research in this field. Literature review needs to be organized. It is not only a series of summaries of the content of our research, but also a synthesis of the ideas of previous related research. The organization's approach can vary, but it requires organization for effective communication. Literature review refers to a kind of academic papers that collects a large amount of relevant data for a research topic, analyzes, reads, organizes, makes academic opinions or suggestions, and makes a comprehensive introduction and elaboration. From the literature review, we can identify, summarize, and evaluate the ideas and information of other authors from our perspective. The purpose of the literature review is not to duplicate the views and opinions of other authors (Bruce 2005).

When the researchers started writing the paper, they proposed an outline. Researchers established a topic on the impact of patient infection prevention measures on patients and determined our purpose. The second step was to search for papers that isolate patients and have relevant experiences, and then integrate them. The third step was to collect the papers that are searched together for research and comprehensive analysis, extract the parts we need, and write them in our papers in our own words. The fourth step will judge the articles found, and finally have empirical evidence. Arranging a short summary at the end of the literature review is also a fruitful addition to the literature review, which brings together all the comments and leaves the reader with a clear conclusion.

## 4.2 Scientific article selection process

We searched one database, CINAHL (Ebsco) following inclusion criteria (Table 1).

Table 1: Inclusion criteria

Inclusion criteria	English, Chinese	
	research published 2015-2020	
	peer reviewed	
	full text available for Jamk students	
	original research articles (no literature	
	reviews)	

Then we searched the literature with following keywords: patient or patients or client or clients and isolation or infection control or infection prevention or infection control and prevention and experiences or perceptions or attitudes or views or feelings (Table 2).

Table 2: searching results

Infection precautions of patient influence	Key terms	Result	Chosen based on the title and/or abstract	Chosen based on the full text
CINAHL plus with full Text	patient or patients or client or clients isolation or infection control or infection prevention or infection control and prevention experiences or perceptions or attitudes or views or feelings	937	9	5

In the second step, we searched the selected documents according to the topic, and must meet the two points of infection prevention and patient experience, and then record the number of papers. The third step was to read the abstract of the document that matches the title, see if it matches the title of the paper, and then record the

number of papers that meet the literature. Last, we read the whole article to see if it answers the research questions.

#### 4.3 Data analysis

The method used to analysis data is content analysis. Content analysis is one of the contents and methods of academic research. It means explaining the meaning from the content of the text data. Summative content analysis includes counting and comparing key terms and content, then explaining the underlying context. (Ifeoma 2016.)

There are two types of content analysis, one is deductive analysis and the other is inductive analysis. Deductive reasoning is 'top down' approach where the investigator works from more general information to something more specific. Inductive reasoning is 'bottom up' works the opposite way, moving from the specific to the general, ending up with general conclusions or theories. (Fereday & Muir-Cochrane 2006.)

In the analysis of data, two analysis methods that people often use, namely inductive content analysis and deductive content analysis, are used. These two analysis methods are mainly divided into three stages: preparation, organization, and reporting. Deductive content analysis is a process from generalization to specification of information, and a large amount of deductive content analysis methods are used in analyzing data. (Elo et al. 2008.)

The articles (N=5) chosen in this study, were published in years 2008 (n=1), 2009 (n=1), 2010 (n=1), 2014 (n=1), 2017 (n=1). The countries where the articles were published are America, Canada, Sweden (n=2), England. The data collection methods used in the chosen articles were qualitative (n=2) and quantitative (n=3).

We read the articles searched through the database, carefully read the main contents of the article, and made notes to about answers we found to our research questions. According to the content of the article, we made different classifications and divided the answers to our research questions found in articles into several categories according the themes. The requirements for data analysis in research reviews are derived from the ordering, coding, and classification of data, and finally a unified and comprehensive conclusion on research questions. Encoding means emphasizing the

main findings in the reviewed article and coding it according to the content. The code is the word that summarizes the main points of each discovery. Forming subcategories and primary categories means putting similar tags into subcategories and then subcategory into the main categories. (Dixonwood et al. 2008.) Figure 1 illustrates the main categories and their subcategories.

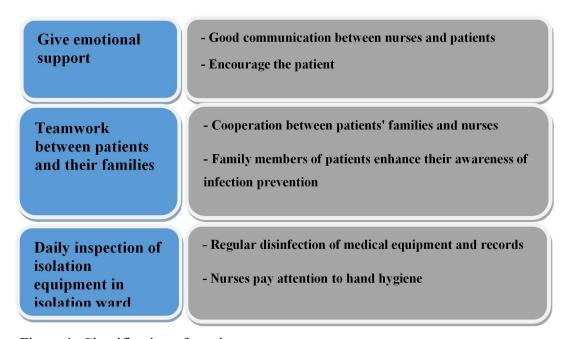


Figure 1: Classification of nursing measures

#### 5 Results

Through the thematic analysis of the data determined in the five articles, the following three categories are obtained:1. Give emotional support 2. Teamwork between patients and their families 3. Daily inspection of isolation equipment in isolation ward.

#### Give emotional support

The results show that patients will have negative emotional impact and certain emotional changes during isolation. For example, loneliness, depression, loneliness, inner anxiety. (Gammon & Hunt 2020.)

In addition, some nurses lack measures on how to take care of the patients who are isolated from the drum to prevent infection, so that the patients and their families have

emotional changes, such as the infection of blood vessel pathway in hemodialysis after kidney transplantation. (See et al. 2014.)

When nurses have a good understanding of the psychological and emotional changes of isolated patients, they can understand the personal experience of patients. This can improve the communication between nurses and isolated patients and give them better emotional support and encouragement. (Skyman & Hellstrom 2010.)

Because the nursing environment of isolated patients seriously affects the health, interests, and freedom of patients, and also affects the doctor-patient relationship. At the same time, the nursing environment also affects the health and mood of patients. (See et al. 2014.)

When patients are isolated, they should be provided with social and emotional support, for example, timely observation of patients' emotional changes, and care and sympathy. (Gammon & Hunt 2020.)

In order to reduce the loneliness of patients as much as possible, provide emotional support for patients' families and patients in daily life. (Skyman & Hellstrom 2010.)

#### Teamwork between patients and their families

Due to the large number of patients in the isolation room, it is difficult for nurses to take good care of each patient. When family members visit patients, they should pay attention to their precautions, such as wearing protective gloves and protective clothing. In this way, secondary infections can be avoided, and the burden and unnecessary trouble for our nurses can be reduced. Therefore, we need the cooperation of the patient's family members, who can only be allowed to visit within the specified time. The patient's family members also need to take corresponding measures to prevent infection. (Pacheco & Spyropoulos 2010.)

#### Daily inspection of isolation equipment in isolation ward

In clinical experiments, nurses have good comprehensive quality to solve the personal problems of patients, such as frequent hand washing, wearing disinfection gloves, protective masks, to prevent the invasion of some bacteria. (Ndomba et al. 2008). It is

the basic duty of nurses to check the disinfection and sanitation of medical equipment (See et al. 2014).

## 6 Discussion and Conclusion

## 6.1 Discussion of key findings

According to the results of this study, it is very important for nurses to provide corresponding nursing support to the isolated patients when they care for them. (Gammon & Hunt 2020.)

Nurses can give nursing intervention by observing the emotional changes of the isolated patients, but the lack of nursing intervention knowledge for the isolated patients is also a serious problem, which is also the main reason for the isolated patients to have loneliness. In order to reduce the occurrence of this problem, and to help better care for the isolated patients, nurses should receive relevant emotional training on caring for the isolated patients. (Pacheco & Spyropoulos 2010.)

The results also show that the emotional changes of the isolated patients and the support and help of their families are also very important, which can be achieved through the teamwork of nurses and their families. (Pacheco & Spyropoulos 2010.)

Due to the large number of patients in the isolation room, it is difficult for nurses to take good care of each patient. Therefore, we need the cooperation of the patient's family members, who can only be allowed to visit within the specified time. The patient's family members also need to take corresponding measures to prevent infection.

The results further showed that the isolation measures to prevent infection were particularly important to isolate patients. Check and disinfect medical equipment regularly to reduce the incidence of infection. Prophylactic isolation is a common method of isolation, such as prevention of vascular access infection in hemodialysis after kidney transplantation (See et al. 2014). Therefore, it is very important to enhance nurses' awareness of infection prevention in the treatment of isolated patients.

## 6.2 Ethical issues, reliability, and validity

Most of the articles in this paper have corresponding ethical issues, and the researchers only conduct the research with the participants' knowledge. When the research discusses the privacy issues of the participants, the researchers guarantee that they will protect the participants in the research process and will not disclose their privacy.

At the same time, the results of these studies are relatively reliable. Some participants in the study discussion are all patients who have suffered from isolation. In addition, patients who participated in the study discussions had different levels of education. The research articles used in this study are also comprehensively studied and analyzed in different countries. At the same time, some studies have a large number of samples. For example, one study reviewed the personal experience of 93 patients. However, there are some articles with a small number of samples, so there are certain limitations, resulting in the results of these articles affected by a small number of samples.

This study proposes some reliable measures to prevent infection, and different research results can help to provide better nursing measures and emotional support for isolated patients. At the same time, this research is effective because it uses the reliable database in the article to get effective results.

Since we are beginner researchers and English is not our mother tongue, language is also a weakness for us, and accessing the database is also a challenge for us. We believe that the literature referenced in our paper is relatively reliable, and most of the references are also close to the present year, so it is in line with current medical standards.

#### 6.3 Conclusion and recommendations for further studies

According to the results of this study, according to the experience and feelings of the isolated patients, it is very important to provide different interventions to improve the mental care of the isolated patients. Through training, nurses can acquire enough basic nursing knowledge and humanistic care knowledge. The isolated patients can also reduce the negative emotions of patients through the emotional support of their

families and the care from their relatives, and at the same time reduce the negative emotions of patients on the adverse effects of the disease. In addition, regular inspection of the health and disinfection of medical equipment can prevent the risk of infection.

We can further study the mental and physical health problems of isolated patients. The nursing of isolated patients with psychological problems is one of the social problems we need to focus on. In addition, the quarantined patients have a high risk of infection, so we should strengthen the protection of nursing staff to the quarantined patients.

#### Reference

Annibali, O. 2017. Protective Isolation for Patients with Haematological Malignancies: A Pilot Study Investigating Patients' Distress and Use of Time. *International Journal of Hematology-Oncology and Stem Cell Research*, 11(4), 13–318. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5767293/

Amoran, OE., & Onwube, OO. 2013. Infection Control and Practice of Standard Precautions Among Healthcare Workers in Northern. *Journal of Global Infectious Diseases*, 5, 4, 156–163.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3958986/

Bruce, A. 2005. A Review of the Empirical Literature on FDI Determinants, Atlantic Economic Journal. *The career site for economists*, 383–403. https://link.springer.com/article/10.1007/s11293-005-2868-9

Chapman K., & Rush K. 2003. Patient and family satisfaction with cancer-related information: A review of the literature. *Quality Review Bulletin*, *13*, 122-130. <a href="http://www.canadianoncologynursingjournal.com/index.php/conj/article/view/397">http://www.canadianoncologynursingjournal.com/index.php/conj/article/view/397</a>

Martha AQ curley, 1998. Patient-Nurse Synergy: Optimizing Patients' outcomes. *American Journal of Critical Care*, 64-72. <a href="http://search.proquest.com/openview/8cc1291bb51d2786d1dcbfbdd5154309/1?pq-origsite=gscholar&cbl=33078">http://search.proquest.com/openview/8cc1291bb51d2786d1dcbfbdd5154309/1?pq-origsite=gscholar&cbl=33078</a>

Dale, W. & David, R. 2006. The Surgical Infection Prevention and Surgical Care Improvement Projects: National Initiatives to Improve Outcomes for Patients Having Surgery. *Clinical infectious Diseases*, 322-333. <a href="https://academic.oup.com/cid/article/43/3/322/332844">https://academic.oup.com/cid/article/43/3/322/332844</a>

Dixon-Woods, M., Agarwal, S., Jones, D.R., Young, B., Sutton, A. J. & Noyes, J. 2008. Synthesising qualitative and quantitative evidence within a systematic review. *In Nursing research: Designs and methods, 12, 4,* 122-127.

Elo S, & Kyngäs H. (2008). The qualitative content analysis process. Journal of Advanced Nursing, 62(1), 107–115.

Fajemilehin, BR., Dare, AO., & Oluseyi, AO. 2010. Knowledge and Practice of Airborne and Droplet Precautions within the Emergency Departments of Selected Hospitals in Osun State, Nigeria. *International Journal of Caring Sciences*, 8, 56-70.

Fereday J. & Muir-Cochrane E. 2006. Demonstrating Rigor Using Thematic Analysis: A Hybrid Approach of Inductive and Deductive Coding and Theme Development. *International Journal of Qualitative Methods*, *13*, 122-130. <a href="https://doi.org/10.1177/160940690600500107">https://doi.org/10.1177/160940690600500107</a>

Gammon J. 2007. Review of standard precautions and sharps management in the community. *American Journal of Critical Care*, *2*, 64-72. <a href="https://janet.finna.fi">https://janet.finna.fi</a>, EBSCO

Gammon, J., & Hunt, J. 2018. Source isolation and patient wellbeing in healthcare settings. *British Journal of Nursing*, 2,88-91.

Gawad, A. 2017. Assessment of Knowledge about Standard Precautions and Nosocomial Infection among Nurses Working in Hospitals of Sana'a City, Yemen. *International Journal of Caring Sciences*, *3*,74-80.

Harold, H. 2007. Content Analysis in Consumer Research, Journal of Consumer Research. *The highly cited collection from JCR*, 4,8-11. https://academic.oup.com/jcr/article-abstract/4/1/8/1829368

Hegerle N, Choi M, Sinclair J, Amin M, Ollivault-Shiflett M, Curtis B, Laufer RS, Shridhar S, Brammer J, Toapanta FR, Holder IA, Pasetti MF, Lees A, Tennant SM, Cross AS, Simon R. 2018. Evelopment of a broad spectrum glycoconjugate vaccine to prevent wound and disseminated infections with Klebsiella pneumoniae and Pseudomonas aeruginosa. *International Journal of Hematology-Oncology and Stem Cell Research*, *14(1)*, 13–318.

Ifeoma, O. 2016. Perception of patients and healthcare workers (hcw) of contact precautions (cp) for multidrug resistant organisms (mdro). *Master of Public Health*, *I*.83-90. http://d-scholarship.pitt.edu/27504/1/Okafor I thesis 4 2016.pdf

Johansson K., Nuutila L., & Virtanen H. 2005. Preoperative education for orthopaedic patients. *JAN Leading Global Nursing Research*, 212-223. https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1365-2648.2005.03381.x

Nazarko, L. 2008. Standard Precautions: How to Help Prevent Infection. *American Journal of Critical Care*, 52-61.

Ndomba, A., Smide ,B., & Aarts ,C. 2008. Preventing IUC infections in Tanzanian patients; nurses' knowledge, clinical practice, and patients' views. *International Journal of Urological Nursing*, *2*(*1*), 33–41.

Pacheco, M., & Spyropoulos V. 2010. The experience of source isolation for Clostridium difficile in adult patients and their families. *Canadian Journal of Infection Control*, 25(3), 166–174.

Park, J., & Seale, H. 2017. Examining the online approaches used by hospitals in Sydney, Australia to inform patients about healthcare associated infections and infection prevention strategies. *BMC Infectious Diseases*, 1, 10-20.

Picalau, E. 2012. Infection Control in hospitals. *Double Degree Program in Building Ser-vices Engineering*, 32-41.

See, I., Shugart, A., Lamb, C., Kallen, A. J., Patel, P. R., & Sinkowitz-Cochran, R. L. (2014). Infection Control and Bloodstream Infection Prevention: the perspective of patients receiving hemodialysis. *Nephrology Nursing Journal*, 41(1), 37–50.

Skyman, E., Sjöström, HT., & Hellström, L. 2010. Patients' experiences of being infected with MRSA at a hospital and subsequently source isolated. *Scandinavian Journal of Caring Sciences*, 24(1), 101–107.

# Appendix1:Data on the patient's experience in taking infection precautions

	Author, (year), country	Title	Purpose and aim of study	Researc h methods	Samp le(n)	Main results	Points from evaluation
1	John Gammon and Julian Hunt (2017) England	Source isolation and patient wellbeing in healthcare settings	In a large number of clinical experience for patients isolation guidance, in the hospital to prevent isolation source more healthy and improve well- being.	Classific ation survey	n=41	The nursing environment of the isolated patients has a serious impact on the health, interests and freedom of the patients, and also affects the nurse-patient relationship. The nursing environment has an impact on the patient's body, society and the patient's mood. Therefore, social and emotional support should be provided to the patients when they are isolated.	The article gives us a basic definition.
2	Skyman E, Sjöström HT & Hellström L (2014) America	Infection Control and Bloodstream Infection Prevention: The Perspective Of Patients Receiving Hemodialysis	Understand the patients who were infected with MRSA in the hospital and isolate them at the infectious disease clinic.	Question aire	n=27	Patients with MRSA feel guilty and shameful in addition to feeling lack of treatment and have a responsibility not to further spread the infectious disease, they feel exposed to the surrounding environment and feel that some people stifle their daily lives, and lack information about MRSA and A carrier.	The conclusions and opinions of the article are very clear.
3	Monica Pacheco & Vanessa Spyropoulos. (2010)Canada	The experience of source isolation for Clostridium difficile in adult patients and their families	Study on Clostridium isolation experience and difficult positive patients and their the family relationship of the inpatient unit.	A qualitati ve, descripti ve design with semistructure d intervie ws.	n=10	The patient believes that loneliness is related to preventive measures, therefore, nurses need the psychological influence of some patients to provide isolation measures and give certain emotional support.	This article is very easy to understand.

4	Eva Skyman, Harrieth Thunberg Sjostrom & Lisbeth Hellstrom (2009)Sweden	Patients' experiences of being infected with MRSA at a hospital and subsequently source isolated	By understanding the patient's experience in the hospital about MRSA and becoming the original ISO Infectious disease clinic.	Group sampling survey	n=93	Patients infected with MRSA feel deprived of their rights, they feel violated, they have little access to care and treatment, and patients in isolation are restricted and alienated, so try to minimize isolation and support relatives and staff in their daily lives.	This article provides a different approach to publicity than ither articles.
5	Asteria LM Ndomba, Bibbe Smide & Clara Aarts(2008) Sweden	Preventing IUC infections in  Tanzanian patients; nurses' knowledge, clinical practice and patients' views	Through understanding the knowledge and clinical practice of nurses on the nursing of IUC patients, to understand the views of patients on nursing.	In-depth Intervie ws	n=60	Good comprehensive quality of nurses can be used in clinical practice to solve certain private problems for patients, but in some countries, there is also a lack of resources. So washing your hands frequently and wearing disinfectant gloves is also a way to prevent some bacteria from invading and to protect the health care workers in the process of nursing the patients, which is also what some people expect.	I like the data search in this article.