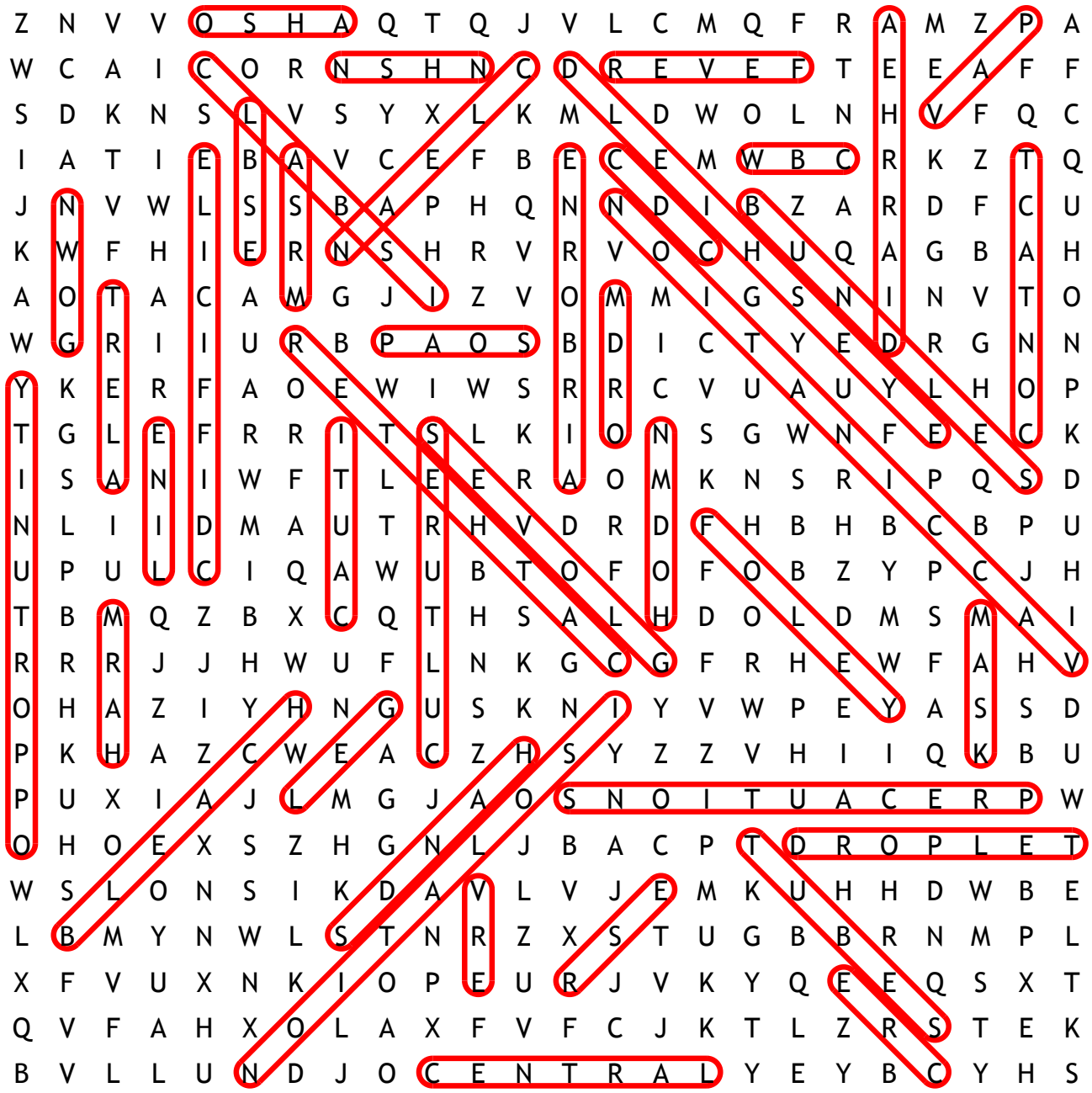
Name: _____ Date: _____

Infection Prevention



Precautions	Opportunity	Vaccination	Cdifficile	Isolation	Eyeshield
Airborne	Catheter	Cultures	Diarrhea	Bundles	Central
Contact	Droplet	Bleach	CLABSI	Gloves	Alert
CAUTI	Clean	Fever	Foley	Hands	NMDOH
Tubes	ESBL	Gown	Harm	Line	Mask
MDRO	MRSA	NHSN	OSHA	Soap	CDC
CRE	ESR	Gel	VAP	VRE	WBC