Infection-Related Assistance to Health (IRAH) are those acquired after admission of the patient in hospitalare environment that manifests itself during hospitalization or 72 hours after discharge, it can be correlated with hospitalization. Patients in critical condition in a hospital intensive care unit (ICU) are more likely to acquire IRAH, compared to other units. The ICU deserves special attention in relation to the physical aspect, by not entail direct transmission, the hands of health professionals and equipment that may have contact with such contaminadas surfaces are the main focus of the spread of pathogens, especially if professionals do not use techniques aseptic. Enterobacteria Escherichia coli, Proteus sp, Klebsiella sp, are the most common microorganisms in an ICU, may cause infections. Major pathogens found, the presence of Pseudomonas aeruginosa, Staphylococcus aureus and other Gram-negative rods, have increased significantly in recent years. The study aimed to research pathogenic bacteria on the surfaces of ICU setting the beds of a public hospital in the city of Juiz de Fora, MG. The surfaces of 20 beds in the ICU were analyzed. The samples were collected with a sterile swab, introduced amid Stuart, they were subsequently inoculated into BHI broth at 35 °C ± 1 °C for 24 / 48h after incubation was carried peal 5% sheep blood Agar, mannitol salt Agar and MacConkey Agar, incubated at 35 ± 1 °C for 24 / 48h under aerobic conditions. The isolated colonies were carried out biochemical and physiological proof of identification. Of the 20 beds where they underwent their collection, 14 (70%) had bacterial growth, totaling 18 strains. We identified 8 (44.44%) strains of Acinetobacter sp, 4 (22.22%) Enterococcus sp, 2 (11.11%) Morganella morganii, 1 (5.55%) Klebsiella pneumoniae 1 (5, 55%) of Providencia stuartii, 1 (5.55%) Escherichia coli and 1 (5.55%) of Staphylococcus aureus. It is of great importance to research of pathogenic bacteria present on the surfaces of beds in the ICU to assess the risks of contamination and A transmission of IRAH. Thus we can conclude that the aseptic technique of professionals in a ICU should be followed more closely, as well as the cleaning of beds during and after hospitalization of patients.

Keywords: Infection-related assistance to health Bacteria, Intensive care unit, Beds.