

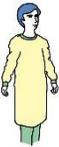
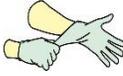
Airborne and Contact Precautions

In addition to [Routine Practices](#)

	<h2>Accommodation</h2> <ul style="list-style-type: none">• Negative pressure single room, anteroom (if possible) and bathroom.• Facilities without negative pressure rooms should consult IPC and the Management of Patients Requiring Airborne Isolation (Algorithm for facilities without Airborne Isolation Rooms) for management of suspected or confirmed cases that require Airborne and Contact Precautions.• Airborne and Contact Precautions sign visible on entry to room.• Room door must remain shut at all times (except when entering and leaving room).
	<h2>Hand hygiene</h2> <ul style="list-style-type: none">• Perform hand hygiene using alcohol-based hand rub (ABHR) or soap and water as described in Routine Practices.• Use plain soap and water when:<ul style="list-style-type: none">○ hands are visibly soiled;○ caring for patients' with diarrhea and/or vomiting.• Perform hand hygiene:<ul style="list-style-type: none">○ before accessing and putting on a gown, gloves, and mask;○ after taking off gloves and after taking off gown;○ after leaving room and after removing N95 respirator.• Educate patients and visitors about how and when to use hand hygiene products.
	<h2>Personal protective equipment: N95 respirators</h2> <ul style="list-style-type: none">• All staff and physicians require fit-testing for an N95 respirator.• All family or visitors must wear and seal-check an N95 respirator.• Proper wearing of an N95 respirator includes:<ul style="list-style-type: none">○ putting on the respirator before entering the patient's room;○ molding the metal bar over the nose;○ ensuring an airtight seal on the face, over top of the nose and under the chin;○ leaving the room and changing the respirator when it becomes moist;○ removing the respirator after leaving the patient's room by touching elastics only;○ not wearing respirator around the neck. <p>Refer to the AHS Donning & Doffing PPE posters for details on careful removal & disposal of N95 respirators.</p>

¹ Patients are all persons who receive or have requested health care or services. The terms "client" or "resident" may also be used, depending on the health care setting.



 	<h3>Personal protective equipment: Gowns</h3> <ul style="list-style-type: none"> • Wear a new gown to enter patient room or bed space. • Fasten the tie strings at the neck and the waist. • Make sure the sleeves cover your wrists. • Put on gown before putting on gloves; gloves should cover the gown cuffs. • Do not wear a gown outside a patient room or bed space unless transporting contaminated items. • Remove soiled gowns as soon as possible. • Take off gloves and perform hand hygiene before taking off gown. • Place used, disposable gowns in regular waste container and perform hand hygiene. • Place washable gowns in linen bag dedicated to room and perform hand hygiene. <p>Refer to the AHS Donning and Doffing PPE posters for details on careful removal and disposal of gowns.</p>
	<h3>Personal protective equipment: Gloves</h3> <ul style="list-style-type: none"> • Wear non-sterile gloves to enter patient room or bed space. • Put on gown first and then gloves <i>after</i>, gloves should cover gown cuffs. • Gloves are single-use. Use only once, then dispose of them immediately after use. • Change gloves between care activities for the same patient (e.g., when moving from a contaminated body site to a clean body site). • Sterile gloves are for sterile procedures. • Never wear gloves outside a patient room or bed space unless transporting contaminated items. • Remove damaged gloves as soon as possible and perform hand hygiene. • Never wash gloves or use ABHR while wearing gloves. • Take off gloves and perform hand hygiene before taking off gown. • Discard used gloves in a waste container. <p>Refer to the AHS Donning and Doffing PPE posters for details on careful removal and disposal of gloves.</p> <p>For more detailed information on glove use see Glove Use and Selection: IPC Best Practice Guidelines or Proper Glove Use as part of Personal Protective Equipment</p>
 	<h3>Handling Patient Care Items and Equipment</h3> <ul style="list-style-type: none"> • Use disposable patient equipment when possible. • Dedicate re-useable equipment for a single patient use only, until discharge (e.g., thermometers, blood pressure equipment). • If reusable equipment cannot be dedicated for a single patient use, clean and disinfect it between patients. <ul style="list-style-type: none"> ○ Refer to manufacturer's instructions for equipment specific cleaning information • Contact Precaution rooms should contain a dedicated linen bag; double bag only if leaking. • Do not share toys, electronic games, and books that cannot be cleaned and disinfected. • Clean and disinfect shared tubs and showers immediately after use as per AHS procedures. • Used meal trays and dishes do not require special handling. Place on the dietary cart or in an area designated for used dishes. Disposable dishes and utensils are not required. • After patients are discharged, transferred or contact precautions are discontinued, clean/disinfect reusable equipment, discard single-use supplies that remain and launder unused linens.



	<h2 style="margin: 0;">Patient ambulation outside room, bed space or transfer</h2> <ul style="list-style-type: none"> • Patients should leave the room or bed space for essential purposes only. Exceptions require IPC consultation. • Before patients leave their room, educate or assist them to: <ul style="list-style-type: none"> ○ perform hand hygiene; ○ put on a procedure/surgical mask; ○ avoid public common areas such as cafeterias. ○ ensure dressings and incontinence products contain drainage. • Notify the receiving area of need for Airborne Precautions before departure. • Transport Staff should assess the risk of spreading infection and choose clean personal protective equipment (PPE) if necessary, to handle the patient during transport and at the transport destination, using Infection Prevention and Control Risk Assessment (IPC RA). PPE is to be removed when patient handling is complete. • Medical charts transported with the patient must be kept clean.
	<h2 style="margin: 0;">Environmental cleaning</h2> <ul style="list-style-type: none"> • Room surfaces and equipment cleaning/disinfection is required on a daily basis or more frequently if directed by IPC using AHS approved products and procedures. • After patient discharge: <ul style="list-style-type: none"> ○ keep door closed for the minimum time to allow airborne particles to settle; ○ consult Infection Prevention and Control as settle time will vary based on facility air exchanges; ○ room may be entered for discharge or transfer cleaning without N95 respirator after settle time has lapsed. ○ If staff must enter the room before minimum settle time, wear an N95 respirator and door must remain closed. • Replace privacy curtains. • Additional precaution signs should not be removed until both patient's personal hygiene and environmental cleaning have been completed.
	<h2 style="margin: 0;">Visitors</h2> <ul style="list-style-type: none"> • Encourage visitors to perform hand hygiene. • Instruct family or visitors to: <ul style="list-style-type: none"> ○ wear a seal-check an N95 respirator. ○ put on and take off gown and gloves, IF they are assisting with care (e.g., feeding, turning). • Airborne and Contact Precautions Family/Visitor information is an additional resource for visitors. • Keep the number of visitors to a minimum. • Door must remain closed except when entering or leaving the room.

