HIGH-LEVEL CONTAINMENT PRECAUTIONS

(In addition to Standard Precautions)

If you have questions, please ask the nursing staff.

NO VISITORS ALLOWED

Trained observer must be present for donning and doffing of PPE.

1) ***Create a room entry log*** *for contact tracing exposure follow-up.*
2) ***Utilize trained observers*****:** individuals who observe the healthcare worker (HCW) caring for the patient(s), for any visible contamination, cuts, or tears before and during removal of PPE and may help instruct HCW on donning/doffing steps. If observer is assisting with PPE removal/active doffing partner, they will also require PPE.
3) ***Prior to Entering, Everyone Must:***

Wash or gel hands.
Use alcohol-based hand rub (ABHR) on gloved hands before and after patient or equipment contact.

Wear fluid-resistant or impermeable full gown at doorway or anteroom following appropriate donning and doffing guidelines. No skin should be showing.

Wear eye protection, face shield or goggles.

Use a NIOSH-approved respirator (N95/PAPR/CAPR)

Use patient-dedicated or disposable equipment. Clean and disinfect equipment with approved disinfectant.

Wear fluid-resistant or impermeable boot covers that extend to at least mid-calf.

Wear gloves with extended cuffs. Two pairs of gloves should be worn. Outer gloves should have extended cuffs.

PERSONAL PROTECTIVE EQUIPMENT (PPE)
Follow CDC's Guidelines for donning and doffing PPE.

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Display outside door. ***ONLY DISCONTINUE PRECAUTIONS AFTER CONSULTATION WITH INFECTION PREVENTION.*** ***Sign to be removed by Environmental Services after precaution discontinuation and room terminally cleaned.***

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Follow detailed CDC Guidelines for Donning and Doffing PPE during HLC patient care.

CDC VERBIAGE:

"In the PPE removal area, provide supplies for disinfection of PPE and for performing hand hygiene and space to remove PPE, including a place for sitting that can be easily cleaned and disinfected, where staff can remove boot covers. Provide leak-proof infectious waste containers for discarding used PPE. Perform frequent environmental cleaning and disinfection of the PPE removal area, including upon completion of doffing procedure by healthcare workers."

If a facility must use the hallway outside the patient room as the PPE removal area, construct physical barriers to close the hallway to through traffic and thereby create an anteroom (ensure space complies with fire-codes). Restrict access to this hallway to essential personnel who are properly trained on recommended infection prevention practices for the care of patients requiring HLC Precautions.

HIGHLY INFECTIOUS PATHOGENS WHICH CAN CAUSE FATAL DISEASE SUCH AS:

- Viral hemorrhagic fever such as Ebola virus
- Emerging pathogens and high consequence infectious diseases

DISHES & UTENSILS

- Utilize **disposable** meal trays and dishes.

LINEN & WASTE MANAGEMENT

- Bag linen in the patient's room in biohazard bag, place in a leak-proof container and discard following ***Category A*** or Category B Medical Waste guidelines for pathogen of concern.

ROOM CLEANING

- Surfaces should be disinfected using a U.S. Environmental Protection Agency disinfectant with a label claim for pathogen of concern. Perform daily cleaning of patient care area surfaces and all high touch items. This should be performed only by care team as part of patient care activities in order to limit the number of additional healthcare workers who enter the room.

PATIENT PLACEMENT

- ***Private room required***, preferably with private bathroom and anteroom. Prioritize Airborne Infection Isolation Room (AIIR) if required for pathogen of concern.

EQUIPMENT & SUPPLIES

- Only essential equipment and supplies in room.
- Use dedicated or disposable equipment when available.
- Clean and disinfect reusable equipment/patient's room with EPA approved disinfectant per facility policy.

TRANSPORT

- Consult with infection prevention or public health prior to transport.

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