AIRBORNE CONTACT PRECAUTIONS

Visitors check in with staff before entering.

ALL PPE REQUIRED REGARDLESS OF VACCINATION STATUS OR NATURAL IMMUNITY

PRIOR TO ENTERING:

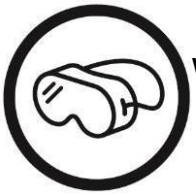
Wash or gel hands

Wear gown and gloves

Use a NIOSH respirator (N95/PAPR/CAPR)

OTHER REQUIREMENTS:

High priority for Airborne-Infection Isolation Room (AIIR), if available. Keep door closed.



Wear eye protection/face shield/goggles if contact with secretions are likely.

Use resident dedicated or disposable equipment. Clean and disinfect shared equipment.

Display outside door. Sign to be removed by Environmental Services after precaution discontinuation and room cleaned.

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After resident discharge, leave sign posted and door closed for one hour (AIIR) or 2 hours (non-AIIR) to allow room air to circulate.

Airborne Contact Precautions

RESTRICTED VISITATION DEPENDING ON CONDITION: Staff must provide visitors with appropriate education and PPE per facility policy.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Steps below are reflective for all PPE, gather only PPE as listed on first page, in addition to other PPE per Standard Precautions.

Putting on PPE (Donning)

- Perform hand hygiene.
- Put on isolation gown, secure ties/straps.
- Put on a respirator or face mask. Ensure it is appropriate and well fitting.
- Put on a face shield or goggles.
- Put on gloves.

Taking off PPE (Doffing)

If wearing a CAPR/PAPR, follow manufacturer's instructions for use to remove correctly.

1. While in the residents's room, remove gloves without contaminating hands.
2. Remove gown - Untie/unsnap ties, break ties if applicable for disposable gowns. Remove by grabbing one shoulder at a time to remove each arm, continue to pull gown down and away from the body. Roll gown as it is removed and place in the proper receptacle. You may now exit the room.
3. Upon exit, perform hand hygiene (use soap & water if visibly soiled or if you encountered stool or were in Contact Enteric Precautions).
4. Remove face shield/goggles - avoid touching the front of eye protection that may be contaminated.
5. Remove and properly handle respirator/face mask – avoid touching the front that may be contaminated and dispose or decontaminate as appropriate.
6. Repeat hand hygiene.

FOR USE WITH CONDITIONS SUCH AS:

(Refer to facility policy)

- Emerging diseases or as directed by facility policy
- Varicella zoster (chicken pox and shingles)
- Herpes zoster, disseminated disease

RESIDENT PLACEMENT

- Place resident in private room. Preferably an Airborne Infection Isolation Room (AIIR). If not available, follow facility guidelines.

DISHES & UTENSILS

- No special precautions.
- Kitchenware sanitized in dishwasher.

LINEN & WASTE MANAGEMENT

- Bag linen in resident's room. Avoid excessive
- handling and do not shake linen.
- For biohazard waste, follow Category B Medical Waste guidelines.

ROOM CLEANING

- Before cleaning resident's room, keep door closed for two hours for non-AIIR, 1 hour for AIIR, or per facility guideline for AIIRs.
- Staff entering room prior to air clearance time wear PPE.
- After room closure time, routine cleaning procedures with addition of privacy curtain change per facility procedure.

EQUIPMENT AND SUPPLIES

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

TRANSPORT

- Alert receiving unit, medical transport, or facility regarding resident's isolation precaution status.
- Resident's hands, clothes, and equipment should be clean.
- Have resident wear a procedure mask, if able.
- Transporter wear respiratory protection.
- Transporter removes PPE and clean hands prior to exiting resident's room. If direct contact is anticipated during transport, wear appropriate PPE.
- Clean and disinfect transport vehicle.

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Discontinue isolation per Facility Policy. Sign to be removed by Environmental Services after precaution discontinuation and room cleaned

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