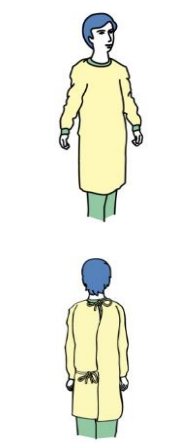


Airborne and Contact Precautions

In addition to [Routine Practices](#)

	Accommodation ➤ Private room with bathroom, negative pressure airborne infection isolation room, anteroom (if possible). ➤ Airborne and Contact Precautions sign visible on entry to room. Notify Infection Prevention and Control (IPAC) before discontinuing Airborne and Contact Precautions. ➤ Room door must remain shut at all times (except when entering and leaving room); if anteroom available, always use for entry and exit. ➤ Facilities without negative pressure airborne infection isolation rooms should consult IPAC for management of patients¹ that require Airborne and Contact Precautions.
	Hand Hygiene ➤ Perform hand hygiene by using alcohol-based hand rub (ABHR) or soap and water as described in Routine Practices. ➤ Use plain soap and water when: • hands are visibly soiled; • caring for patients¹ with diarrhea and/or vomiting. ➤ Perform hand hygiene: • before accessing and putting on a gown, gloves, and N95 respirator; • after taking off gloves and gown; • after leaving room and after removing N95 respirator. ➤ Educate patients and visitors on how and when to use hand hygiene products.
	Personal Protective Equipment: Gown ➤ Put on a new gown before entering patient room or bed space. ➤ Fasten 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 gowns outside of the patient room/bed space unless transporting contaminated items. ➤ Take off gloves and gown, then perform hand hygiene. ➤ Remove soiled gown as soon as possible before leaving patient anteroom/room. ➤ Place used gown in linen hamper if reusable or garbage if disposable. Refer to: VCH Donning (put on) Personal Protective Equipment and Doffing (take off) Personal Protective Equipment posters for details on careful removal and disposal of gowns.

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.



Personal Protective Equipment: N95 Respirator

- All staff and physicians require fit-testing for an N95 respirator.
- All staff, family or visitors must wear and seal-check an N95 respirator.
- Proper wearing of an N95 respirator includes:
 - 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 only the elastic straps;
 - not wearing respirator around the neck.

Refer to: VCH [Donning \(put on\) Personal Protective Equipment](#) and [Doffing \(take off\) Personal Protective Equipment](#) posters for details on careful removal and disposal of respirator.



Personal Protective Equipment: Gloves

- Wear non-sterile gloves to enter patient room or bed space.
- Put on **gown first and gloves after**; 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 (i.e. work from clean to dirty sites; change gloves after working on a contaminated 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 and perform hand hygiene.
- Never wash gloves or use ABHR while wearing gloves.
- Take off gloves and gown, and perform hand hygiene.

Refer to: VCH [Donning \(put on\) Personal Protective Equipment](#) and [Doffing \(take off\) Personal Protective Equipment](#) posters for details on careful removal and disposal of gloves.



Handling Patient Care Items and Equipment

- Use disposable patient equipment when possible.
- Dedicate reusable equipment to a single isolation patient, until discharge (i.e. blood pressure cuff, commode). Clean and disinfect equipment between uses.
- If reusable equipment cannot be dedicated to a single isolation patient, clean and disinfect thoroughly between patients.
- Airborne and Contact Precautions rooms should contain a dedicated soiled linen hamper.
- Do not share any items between patients that cannot be cleaned or disinfected (i.e. electronic gaming devices, magazines).
- On patient discharge, discard single-use supplies that remain and launder unused linens.
- Meal trays and beverage dishes do not require special handling.



Patient Ambulation Outside Room, Bed Space or Transfer

- Notify the receiving area before departure of the need for Airborne and Contact Precautions.
- Patients should leave the airborne infection isolation room for essential purposes only.
- Before patient leaves their room, educate or assist them to:
 - perform hand hygiene;
 - put on a procedure/surgical mask;
 - put on clean clothing or hospital gown/housecoat, or cover with clean blanket.
 - ensure dressings and incontinence products contain drainage.
- Hard surface medical chart covers should be wiped and stored to prevent soiling during transport (in plastic bag under stretcher or in wheelchair pocket).
- Transport staff:
 - Workplace Health guidelines require transport staff wear an N95 mask while transporting a patient on Airborne Precautions.
 - Don N95, gown and gloves in hallway prior to entering patient room. Remove gown/gloves, perform hand hygiene and use a wipe to clean and disinfect the handles of the wheelchair/stretcher on exit from the patient room (keep N95 on).
 - Use a point of care risk assessment to assess the risk of patient contact during transport and choose to carry clean PPE if indicated. If used on transport, gown/gloves are to be removed when patient handling is complete. Gloves must be removed and hand hygiene performed between contact with the patient and contact with the healthcare environment (e.g., elevator buttons)
 - At destination, don gown/gloves on entry to patient room if patient handling is required and remove on exit followed by hand hygiene. Remove the N95 mask outside the room and perform hand hygiene again.
- Clean and disinfect transport wheelchair/stretcher between patients.



Patient Hygiene

- Daily access to or assistance with:
 - Clean gown/clothes (additionally when soiled)
 - Linen change (sheets, pillowcase, towels, face cloth) (additionally when soiled)
 - Oral care
 - Bathing (includes use of cleaning wipes and/or bath basin)



Family and Visitors

- Encourage family members and visitors to perform hand hygiene.
- Instruct family or visitors to:
 - Wear an N95 respirator and perform a seal check.
 - Put on and take off gown and gloves.
 - Keep the visitors to a minimum.
 - Door must remain closed except when entering or leaving the room.



Environmental Cleaning

- Room surfaces and equipment cleaning/disinfection is required on a daily basis or more frequently if directed by Infection Prevention and Control using VCH approved cleaning and disinfection products and procedures for Airborne and Contact Precautions.
- After patient discharge or transfer:
 - Keep the door closed for the minimum time directed by Infection Prevention and Control to allow airborne particles to settle.
 - Consult Infection Prevention and Control as settle time will vary based on room type and air exchanges.
 - The room may be entered for discharge cleaning after settle time has lapsed.
 - If staff must enter the room before minimum settle time, wear an N95 respirator and door must remain closed. Keep Airborne and Contact Precautions sign in place until settle time and cleaning are complete.
 - Replace privacy curtains.