

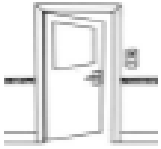
Airborne -Contact Precautions



Hand Hygiene as per Routine Practice

Hand hygiene is performed:

- ✓ Before and after each patient contact
- ✓ Before performing invasive procedures
- ✓ Before preparing, handling, serving, or eating food
- ✓ After care involving body fluids and before moving to another activity
- ✓ Before putting on and after taking of gloves and other PPE
- ✓ After personal bodily functions (ex: blowing nose)
- ✓ Whenever hands come in contact with blood, body fluids, secretions, and excretions
- ✓ After contact with the items in the patient's environment
- ✓ Whenever there is doubt about the necessity for doing so



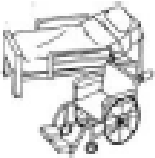
Patient Placement

- ✓ Single room with own toileting facilities
- ✓ Room must have negative pressure ventilation with room air exhausted outside or through a HEPA filter
- ✓ Monitor negative pressure daily while in use
- ✓ Door, including anteroom door must remained closed



Personal Protective Equipment

- ✓ Gown
- ✓ Gloves
- ✓ Wear a fit-tested, seal-checked N95 respirator



Environment & Equipment

- ✓ Equipment that is being used by more than one patient must be cleaned between patients
- ✓ All high-touch surfaces in the patient's room must be cleaned at least daily



Transport of the Patient

- ✓ Patient to wear a mask during transport
- ✓ Transport staff to wear a N95 respirator during transport



Visitors

- ✓ Visitors must be kept to a minimum
- ✓ Must perform hand hygiene before entry and on leaving the room
- ✓ For TB, household members do not require an N95 respirator
- ✓ For TB, non-household visitors require an N95 respirator
- ✓ For measles/varicella, visitors should be counselled before entering the room