AIRBORNE PRECAUTIONS

CLEAN YOUR HANDS WHEN ENTERING AND EXITING ROOM

STOP

STAFF AND VISITORS

PATIENTS UPON LEAVING ROOM

VISITORS:

PLEASE CHECK WITH NURSING STAFF BEFORE ENTERING ROOM.

(SFOR ESSENTIAL PURPOSES ONLY)
(PROCEDURE MASK, CLEAN GOWN/ CLOTHES AND HANDS)

SINGLE ROOM WITH NEGATIVE AIR PRESSURE,
DOOR CLOSED WITH DEDICATED EQUIPMENT

April 2018
Airborne Precautions
Acute Care
Use in Addition to Routine Practices

Additional Information

- Single room with negative pressure required! ENSURE ROOM PRESSURE IS SET TO NEGATIVE
- If negative pressure is activated using a switch, check and document every shift
- Door into anteroom and door into patient room must remain closed
- Anteroom is considered clean space, PPE can be doffed here
- Clean your hands before entering the room and after leaving the room
- Dedicate equipment to the isolated patient or clean and disinfect shared equipment after use
- Patient to leave room only for essential purposes. If patients are leaving their room they should be cognitively intact or supervised, have clean hands and clothing and any drainage and or body fluids contained.

If the patient is not currently in a single/Airborne isolation room:
- If possible remove the roommate from the room or mask the infected patient
- Close the door
- Place appropriate AIRBORNE signage
- Arrange for patient transfer to an AIRBORNE isolation room
- Please see Management of Patients Requiring Airborne Isolation Algorithm for more details

Common Organisms Requiring AIRBORNE Precautions (not all inclusive)

- Suspected or confirmed active pulmonary, laryngeal or miliary Mycobacterium tuberculosis
- Extrapulmonary Mycobacterium tuberculosis until pulmonary disease ruled out
- Rubeola/ Measles/ Red Measles (only immune people should enter the room)

Remember!

Always wear the N95 respirator you’ve been fit tested for when in the room.
Remove N95 respirator when you have exited room and door to patient room is closed.

Individuals with known immunity to measles are not required to wear the N95 respirator when entering the room of a patient with confirmed measles.
Known immunity:
- serological proof of immunity, or
- documentation of 2 appropriately timed doses of vaccine

Refer to the AHS Infection Prevention & Control Manual for additional information