

Recommendations for Cohorting for Viral Respiratory Illness (VRI) in Emergency Departments/Urgent Care Centers AHS Facilities

Note: If you have any questions or comments regarding this Information Sheet contact Infection Prevention & Control at ipcsurvstdadmin@ahs.ca.

Symptom-based cohorting may be required in Emergency Departments (ED) and Urgent Care Centers (UCC) when the need for private rooms exceeds capacity. Facilities should identify their capacity for isolation and potential cohorting spaces. Follow [Cohorting Principles](#). Contact local Infection Prevention and Control (IPC) personnel for guidance as required.

Patients exhibiting influenza-like illness (ILI), or respiratory viral illness (VRI) symptoms should immediately perform hand hygiene and don a procedure mask. As soon as possible, direct patients to a dedicated space. Patients should be separated based on exposure-risk or confirmed epidemiological link to confirmed pathogens.

Communicable disease screening embedded in routine triage protocols should occur for all presenting patients. Patients requiring [Airborne Precautions](#) are not candidates for cohorting.

Recommendations for cohorting spaces

- Ensure [Infection Prevention and Control Risk Assessment \(IPC RA\)](#), [Hand Hygiene](#), appropriate use of personal protective equipment ([PPE page](#)), Use signage to identify the area, restrict entry and inform about additional [contact & droplet precautions](#) required.
- Remove all non-essential equipment and furniture. Ensure all remaining items are cleanable. Any physical barriers in use should be cleanable. Refer to Environmental Services cleaning guidelines (available on Insite) and [RTU disinfectant wipes](#).
- Use disposable patient equipment when possible. Dedicate re-usable equipment for single patient use or clean and disinfect between patients.
- Provide alcohol-based hand rub (ABHR) and masks for patient use.
- Evaluate the continued need for designated cohorting spaces on a daily basis and discontinue as soon as capacity allows.

Recommendations for cohorting patients

- Separate patients by at least two meters or with a physical barrier.
- Instruct patients to perform hand hygiene and keep mask on, refer to [Patients: When & How to Wear a Mask](#).
- Do not perform [Aerosol-generating Medical Procedures](#) (AGMP) in shared locations.

Resources

For information on communicable diseases, see the [AHS IPC Acute Care Diseases and Conditions table](#) on the [IPC Resource Manuals](#) page.

For more information contact: ipcsurvstdadmin@ahs.ca

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References

1. Guidelines for Cohorting Isolation Patients in AHS Facilities: <http://www.ahsweb.ca/ipc/cohorting-isoln-pts-z0-res-topics-cohorting-principles>
2. Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings: http://publications.gc.ca/collections/collection_2013/aspc-phac/HP40-83-2013-eng.pdf
3. Resource: IPC Cohorting Recommendations for Viral Respiratory Illness (VRI) in Acute Care. <https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-covid-desgnd-unit.pdf>

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