SUBJECT: POLICY #: 1115

XIII-117 ISOLATION PRECAUTIONS IN THE ASC VERSION: 1

APPROVED BY:

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PURPOSE: To minimize the risk of transmission of suspected or identified communicable

diseases within the Ambulatory Surgical Center (ASC).

POLICY: The facility will implement preventive strategies within the ASC per the Centers

for Disease Control & Prevention (CDC) guidelines.

PROCEDURE:

I. Waiting Room

- A. A respiratory hygiene station will be made available in the waiting area.
- B. Respiratory hygiene/cough etiquette signs will be posted.
- C. Patient's visitors may be advised or assessed for symptoms of communicable disease.

II. Patient Scheduling

- A. Patients will be advised that if they are ill with a communicable disease at the time of the scheduled procedure they are to notify the ASC, prior to day of procedure if at all possible. Per the determination of the physician or provider the procedure may need to be rescheduled.
- B. Patients known to have fever, communicable rash or other symptoms of communicable infection will be rescheduled for the procedure.
- C. Patients with an acute infection and/or infection requiring Transmission Based Precautions shall be rescheduled for the surgery or procedure.

III. Triage of Patients

- A. Patients will be evaluated for infection or communicable diseases during the preop call or visit. See Preoperative Infection Screening Tool below.
- B. Intake nursing staff will be educated to triage patients and be alert to patients presenting with symptoms of infection.
- C. Intake nursing staff will notify clinical staff of their observations to enable rapid assessment and placement in a cubicle/room or referral for an appropriate

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evaluation by a physician and determination of cancellation of surgery or procedure.

- D. Patients with or suspected of having any of the following diseases, or other communicable disease deemed in need of precautions, will be given a mask (as indicated for respiratory infection) and placed in a room, with the door closed (for respiratory infection), until transfer for additional treatment can be done.
 - 1. Tuberculosis
 - 2. Varicella Chickenpox/Zoster
 - 3. Measles
 - 4. Mumps
 - 5. Bacterial Meningitis
 - 6. Influenza
 - 7. Pertussis
 - 8. Scabies
 - 9. Pediculosis/Body Lice
 - 10. Cold
 - **11. MDRO**
 - 12. Clostridium difficile
- E. For patients requiring Transmission-based Precautions the ASC will delay these procedures until the patient is no longer infectious and transfer/refer the patient to a facility that has the appropriate isolation facilities for evaluation and treatment.

IV. Transfer of Patients

- A. Patients with a communicable disease will be referred to their physician or transferred to another facility for care and treatment.
- B. The staff will notify the receiving facility of the potential infectious disease so appropriate precautions may be implemented.
- C. The staff will implement appropriate barriers specific to the situation prior to transport, e.g., mask on patient, wound covered, and advise the persons performing the transport of these precautions.

V. Special Situations

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- A. When performing a biopsy or excising a lymph node or lesion if TB is in the differential diagnosis. There should be no force irrigation of the wound and the node or lesion must be removed whole.
- B. If infection is identified after the patient has been taken to the OR and the procedure has begun, precautions are to be followed as indicated until the patient can be transferred or discharged.
- VI. Transmission-Based / Isolation Precautions
 - A. Transmission Based Isolation Precautions, *in addition* to Standard Precautions, are to be followed, to the extent possible, for any patient diagnosed with or suspected of having a contagious disease requiring these precautions until a transfer can occur.
 - B. There are three categories of isolation precautions:

DROPLET	Pathogens transmitted by large respiratory droplets that travel short distances (<3 ft.) and are generated by a patient who is coughing, sneezing or talking, such as: Influenza, Colds, Bacterial Meningitis, Mumps, Scarlet Fever, Pertussis, and Rubella.	
	PPE Needed: Surgical/ barrier mask, gloves and gown	
AIRBORNE	Microorganisms transmitted by small respiratory droplets from person to person by the airborne route, which may also travel over long distances such as, Measles, Tuberculosis, Severe Acute Respiratory Syndrome (SARS), Smallpox and Chickenpox. Place patients in a negative pressure room with door kept closed (if not available, place patient in a private room with the door closed and transfer to appropriate setting or send home as appropriate <u>as soon as possible</u>).	
	PPE Needed: N95 or P APR respirator is required when entering the room.	
CONTACT	Transmitted by direct or indirect contact with the patient or patient care items. Infections such as MRSA, VRE, and C. difficile, Scabies require the use of gown and gloves.	
	PPE Needed: Patient: gown or contain secretions when indicated	
	Employee - Gown and gloves, and face shields, caps, boots, as needed.	

C. Mask coughing patients who need Droplet or Airborne Precautions with Surgical/Barrier Mask when in a room or enclosed area.

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- D. Notify High Desert Health System (HDHS) departments (or other agency) patient is sent to, e.g., Lab, Radiology, EKG, etc. Patient should be escorted to other departments by a healthcare worker.
- E. Isolation Sign should be posted at the door of room/cubicle until prompt transfer can occur.
- F. When patient requiring Airborne Isolation leaves the room, keep door closed for the indicated amount of time calculated for the room by HDHS Facilities.
- G. Environmental Services staff is to clean cubicle/room after patient leaves, and after indicated time if an Airborne Isolation. ASC Staff are to ensure that other equipment or contaminated surfaces, linens, cubicle curtains, etc., are cleaned, removed, etc. after the patient leaves.
- H. Report suspected exposure or outbreak of communicable diseases to patients or staff to the supervisor. Supervisors are to report these exposures or outbreaks to Infection Prevention & Control and Employee Health.

REFERENCES:

- Friedman, C and Petersen, KH. Infection Control in Ambulatory Care (APIC). MA: Jones and Bartlett Publishers, Inc., 2004.
- CDC, Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings 2007 (HICPAC), 200 7; 1-219.

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