RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER

Infection Prevention and Control

SUBJECT:	ISOLATION GUIDELINES: PROCEDURES FOR ISOLATION	Policy No.: IC103B Last Revised: 07/2012 Reviewed: 03/2014
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An appropriate isolation sign must be secured outside of the patient's room. The isolation sign is a part of the isolation cart supplied by the Central Processing Department and it should be returned to Central Processing with the isolation cart when the isolation is discontinued.

Contact Precautions

- When possible, patient should be placed in a private room. If a private room is not available, patients infected with the same organism may share a room (cohort) provided they are not infected with other potentially transmissible microorganisms. Patients must be physically separated (>3 feet) from each other. Privacy curtains between beds must be drawn to minimize the opportunity for transmission or sharing of items.
- 2. Perform hand hygiene before and after contact with patient and the patient's environment even if gloves were worn.
- 3. In addition to Standard Precautions, *gloves and gown* must be worn when in contact with patient, contaminated articles or patient's environment.
- 4. Disposable items that are visibly contaminated with fluid or semi-fluid blood or body fluids are discarded into the biohazardous trash containers.
- 5. No special precautions with linen are indicated. All soiled linen are placed in a plastic bag, securely closed and placed in soiled linen area.
- 6. Dedicate use of non-critical patient care equipment to a single patient. If use of common equipment or items is unavoidable, equipment or items coming in contact with the patient will be disinfected with a hospital-approved disinfectant or placed in the gray bin located in the dirty utility room and sent to Central Service for decontamination.
- 7. After providing care, staff will:
 - a. Remove gloves and discard them in the waste container
 - b. Remove goggles or face shield
 - c. Unfasten ties (waist and neck bands)
 - d. Remove gown: Pull away from neck and shoulders, touching inside of gown only and turn gown inside out
 - e. Fold or roll gown into a bundle and discard it in the hamper
 - f. If using a mask during procedures that may cause sprays or splatter of infectious material, such as suctioning, remove the mask and discard it in the waste container. Do not touch the front of mask; it is contaminated
 - g. Perform hand hygiene immediately

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Droplet Precautions:

- When possible, patient should be placed in a private room. If a private room is not available, patients infected with the same organism may share a room (cohort) provided they are not infected with other potentially transmissible microorganisms. Patients must be physically separated (>3 feet) from each other. Privacy curtains between beds must be drawn to minimize the opportunity for transmission or sharing of items.
- 2. In addition to Standard Precautions, *gloves, gown and mask* must be put on *before* entering room.
- 3. Disposable items that are visibly contaminated with fluid or semi-fluid blood or body fluids are discarded into the biohazardous trash containers.
- 4. No special precautions with linen are indicated. All soiled linen are placed in plastic bag, securely closed and placed in soiled linen area.
- 5. Dedicate use of non-critical patient care equipment to a single patient. If use of common equipment or items is unavoidable, equipment or items coming in contact with the patient will be disinfected with a hospital-approved disinfectant or placed in the gray bin located in the dirty utility room and sent to Central Service for decontamination.
- 6. Perform hand hygiene before and after contact with patient and the patient's environment even when gloves were worn.
- 7. After providing care, staff will:
 - a. Remove gloves and discard them in the waste container
 - b. Remove goggles or face shield
 - c. Unfasten ties (waist and neck bands)
 - d. Remove gown: Pull away from neck and shoulders, touching inside of gown only and turn gown inside out
 - e. Fold or roll gown into a bundle and discard it in the hamper
 - f. Remove the mask and discard it in the waste container. Do not touch the front of mask; it is contaminated
 - g. Perform hand hygiene immediately
- 8. Before transporting patients to other areas, place a mask on the patient and/or tracheotomy if present. When placing mask on patient, be sure the airway is not obstructed. If patient is using a red plug or Passy-Muir valve, the mask will **not** be required.

NOTE: Patients can be reduced from Droplet Precautions to Contact

Precautions isolation when:

- a. The tracheotomy tube has been removed and incision has healed, or
- b. The tracheotomy tube has been removed and secretions can be contained within the dressing, or
- **c.** The tracheotomy tube can be closed with a Passy-Muir valve or a red plug at <u>all times.</u>

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Airborne Precautions:

- 1. Patient must be placed in a private room with negative air pressure in relation to the surrounding areas. Keep the room door closed when not required for entry and exit.
- 2 In addition to Standard Precautions, <u>NIOSH-approved N-95 respirator or</u> higher must be put on *before* entering room.
- 3. Limit the movement and transport of patient to medically necessary purposes. If transport or movement outside of the room is necessary, place a surgical mask on the patient.
- 4. Disposable items that are visibly contaminated with fluid or semi-fluid blood or body fluids are discarded into the biohazardous trash containers.
- 5. No special precautions with linen are indicated. All soiled linen are placed in plastic bag, securely closed and placed in soiled linen area.
- 6. Dedicate use of non-critical patient care equipment to a single patient. If use of common equipment or items is unavoidable, equipment or items coming in contact with the patient will be disinfected with a hospitalapproved disinfectant or placed in the gray bin located in the dirty utility room and sent to Central Service for decontamination.
- 7. Perform hand hygiene before *and* after contact with patient even when gloves were worn.
- 8. Remove the N-95 respirator **after** you have exited the room **and** the door is closed. Discard the N-95 respirators after each use and perform hand hygiene outside of the room.

PERSONAL PROTECTIVE EQUIPMENT (PPE) WHILE TRANSPORTING PATIENTS IN ISOLATION:

In addition to Standard Precautions, the PPEs, to be worn by healthcare worker while transporting an isolation patient depends on the type of isolation as described above and the type of communicable disease, dressings or drains, etc. Four Key points to keep in mind:

- 1. Follow Standard Precautions and any other designated isolation posted for the patient in selecting PPE
- 2. Don PPE before entering the patient's room
- 3. Prepare the Patient
- 4. Safely remove and discard PPE before leaving the patient's room.

It is important to prepare patients before taking them out of their rooms:

- 1. For Contact Precautions:
 - a. Make sure dressings are dry; if not, ask nursing staff to change the dressing
 - b. Have patients wash their hands
 - c. Have the patient wear a clean patient gown.
- 2. For Droplet Precautions isolation patient: if the patient has an open or unplugged tracheotomy tube, cover the tracheotomy tube opening with a surgical mask; If the patient has an unhealed tracheotomy stoma, cover the stoma with gauze.

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- 3. For Airborne Precautions and/or patients symptomatic with a cough, have patients wear the surgical mask, covering the nose and the mouth.
- 4. When the patient is ready to be transported out of the room, remove PPE and dispose of them inside the patient's room except: In Airborne Precautions cases, remove the mask **after** you have exited the room and closed the door.
- 5. Perform hand hygiene and put on a new pair of gloves to transport the patient.
- 6. Report to the receiving staff about the patient's isolation status.