Ambulatory

UCSF Health

STANDARD PRECAUTIONS+

AIRBORNE ISOLATION

Patients:

MASK

EXAM ROOM DOOR CLOSED

Staff, prior to entering room:

CLEAN HANDS

N95 OR PAPR

FIT TESTING AND TRAINING REQUIRED

After discharge:

KEEP ROOM CLOSED + VACANT*

DISINFECT USED SURFACES

*DURATION ROOM MUST STAY CLOSED + VACANT TO ALLOW AIR EXCHANGE:

Keep room closed for one (1) hour if Air Exchange Rate is unknown

TIME OF PATIENT DISCHARGE:

TIME ROOM IS SAFE TO ENTER FOR ROOM CLEANING:

AIRBORNE ISOLATION

Ambulatory – AIRBORNE ISOLATION

Use for patients exhibiting rash with fever, symptoms of tuberculosis (e.g. cough, night sweats, hemoptysis, unexplained weight loss), or other conditions per ISOLATION TABLE: https://infectioncontrol.ucsfmedicalcenter.org/isolation-table

PROCEDURE

SUPPLIES NEEDED

- THIS SIGN- hang at entryway to patient care area
- MASK
- N95 RESPIRATOR or POWERED AIR PURIFYING RESPIRATOR (PAPR)

PATIENT

- Wear mask (Not N95) over mouth and nose at all times while in clinic or patient care area (unless instructed to remove by provider)
- Place in exam room with DOOR CLOSED for length of visit
- Family members/caregivers accompanying patients may choose to wear mask or N95

STAFF

- Clean hands prior to donning personal protective equipment (PPE)
- Wear N95 or PAPR upon entry and while inside patient care area *even if immune to patient's condition*
- PPE Removal- Remove PPE *outside* patient care area
  - Clean hands prior to removing N95 or PAPR
  - Grasp PPE in a manner that avoids contamination, remove and discard disposable PPE (Clean PAPR helmet with facility-approved disinfecting wipe)
  - Clean hands again after removal of PPE

Aerosol-Generating Procedures (AGP)

- Must wear N95 or PAPR when entering room during and 1 hour after AGP

AGPs include:	Non-invasive ventilation (BIPAP/CPAP)	Nebulized medications	Laryngoscopy	PFTs
Bronchoscopy/BAL	High Flow Nasal Cannula	Chest physiotherapy	Tracheostomy	CPR
Manual ventilation	High frequency ventilation	Intubation/Extubation	Open suction	Autopsy
NOT an AGP: *Non-rebreather mask, Oropharyngeal or In-line suctioning, NG/OG placement, Coughing patient*				

See "Guidance for Use of Personal Protective Equipment for Aerosol Generating Procedures" https://ehs.ucsf.edu/respiratory-protection-program-0

ROOM CLEANING

- On discharge, keep room closed and vacant for appropriate duration to allow complete air exchange (1 hour if air exchange rate unknown), then follow standard precautions- no need for N95 or PAPR. *Note: If room entry required before specified time has elapsed, N95 or PAPR must be worn.*
- Clean used surfaces and equipment with facility-approved disinfectant per standard cleaning procedures
- Change curtains when visibly soiled
- "High Clean" not required
- Remove isolation sign when cleaning complete, after discharge

For additional information, indications for, and discontinuation of isolation, refer to "Standard and Transmission-based Isolation Policy" and "Isolation Table" at http://infectioncontrol.ucsfmedicalcenter.org or contact Infection Prevention at 415-353-4343.

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