

STANDARD PRECAUTIONS+

NOVEL RESPIRATORY ISOLATION

*SEE NURSE BEFORE ENTERING

Rev. 12/8/23



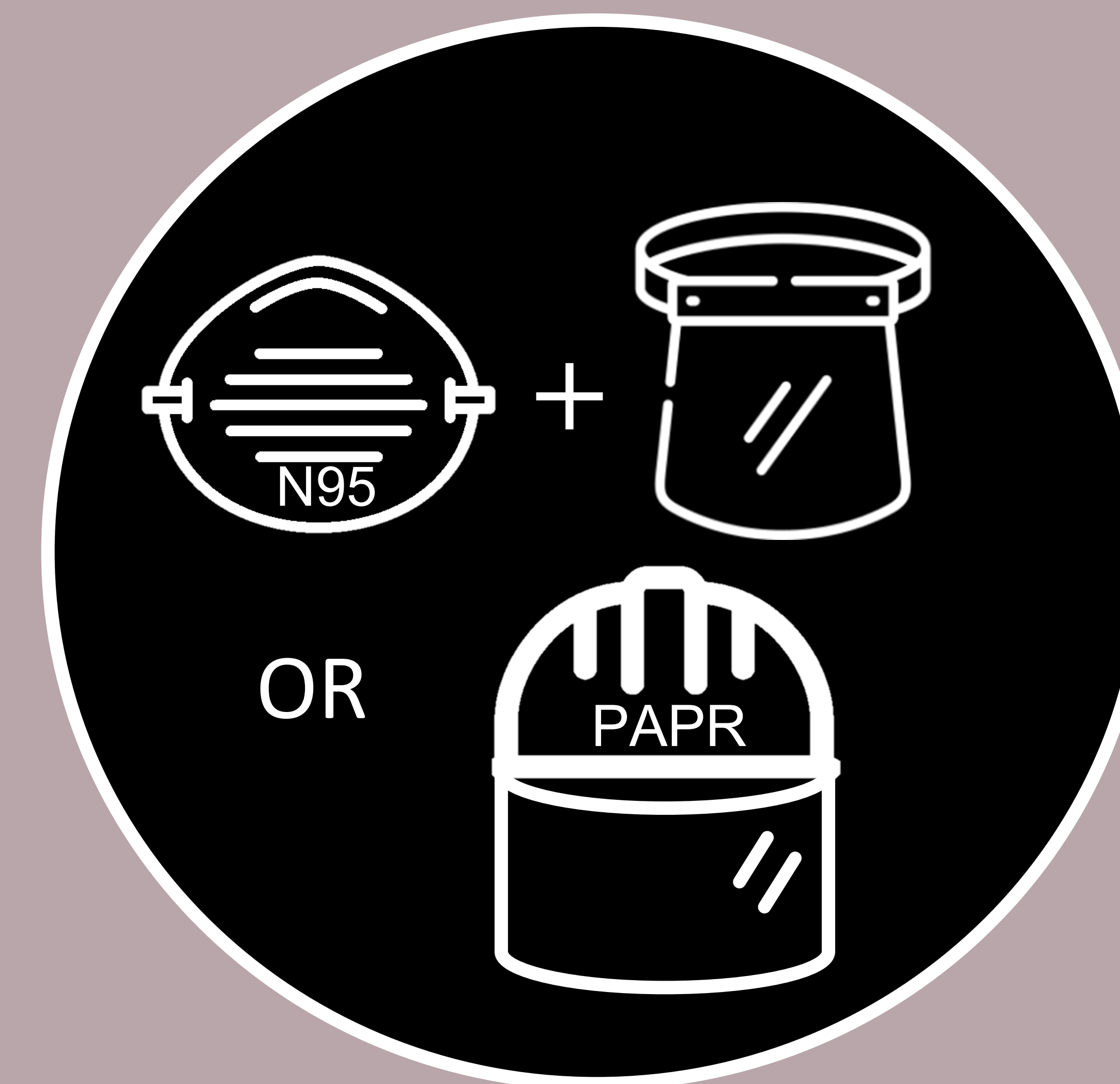
- Private Room with Door Closed Required¹



CLEAN HANDS



GOWN

N95 + EYE
PROTECTION
OR PAPR

GLOVES

¹ For Aerosol-Generating Procedures (AGPs),
negative pressure room preferred, when available

NOVEL RESPIRATORY ISOLATION

PATIENTS in NOVEL RESPIRATORY ISOLATION (NRI)

- Place patient in a PRIVATE ROOM with DOOR CLOSED.
 - Do not place pt in a positive pressure/protective environment room.
 - For patients receiving aerosol generating procedures (AGP), placement into a negative pressure room is preferred, if available.
 - Create work order for Facilities to change and monitor room pressurization daily—see ATD Standard (EOC Policy 3.1.2)
- Patient must REMAIN IN THE ROOM except for essential purposes (off-unit testing, surgical procedures, etc.)
- Patient must wear a MASK that fits over the mouth and nose when outside the room

STAFF Caring for Patients in NOVEL RESPIRATORY ISOLATION

ISOLATION CADDY	Place caddy outside patient room containing: • THIS SIGN • EYE PROTECTION (face shields or goggles)	• N95 RESPIRATORS (various sizes) • POWERED AIR PURIFYING RESPIRATORS (PAPR)	• GOWNS • GLOVES
WORKFLOW	• Use dedicated disposable equipment (e.g., stethoscope, blood pressure cuff, thermometer) when possible • Clean non-disposable equipment with hospital-approved disinfecting wipe after each use • Clean hands prior to donning personal protective equipment (PPE) • Wear a gown, a fit-tested N95 and eye protection (or PAPR), and gloves upon entry and while inside patient room or care area. Wear N95 or PAPR when entering room during and 1 hour after AGP* <i>*See “Guidance for Use of Personal Protective Equipment for High Risk Aerosol Generating Procedures”</i> https://infectioncontrol.ucsfmedicalcenter.org/sites/g/files/tkssra4681/f/Guidance for PPE use for High Risk Aerosol Generating Procedures.pdf • PPE Removal- Exiting patient room or care area, remove gown and gloves <i>inside</i>, N95 and eye protection or PAPR <i>outside</i> - Grasp PPE in a manner that avoids contamination (Outside of PPE is contaminated) - Clean hands prior to removing N95 and eye protection or PAPR - Remove and discard disposable PPE (clean eye protection or PAPR helmet with hospital-approved disinfecting wipe) - Clean hands again after removal of PPE		
TRANSPORT	• Notify receiving department of isolation status prior to transport • Patient wears mask (Not N95; pediatric patients unable to mask- cover crib with clean sheet), a clean hospital gown, covers body with clean sheet, and cleans hands prior to exiting patient room or care area • Transporter wears fit-tested N95 and eye protection (or PAPR). If direct pt. contact is expected, add gown and gloves		
ROOM CLEANING	• For occupied NRI rooms, don and doff PPE as above and clean per standard cleaning procedures • On discharge, keep room closed and vacant for 1 hour**, then enter using standard precautions plus gown, gloves, mask, and eye protection. <i>Note: If room entry required before 1 hour has elapsed, fit-tested N95 and eye protection or PAPR must be worn.</i> <i>**Wait times may be shorter depending upon air changes/hour (ACH)</i> • On discharge, <i>Hospitality</i> removes isolation sign when cleaning complete • On discontinuation of isolation or patient discharge, <i>Nursing</i> removes and cleans isolation caddy		
VISITORS	• Follow current visitor guidelines: https://infectioncontrol.ucsfmedicalcenter.org/sites/g/files/tkssra4681/f/UCSF Health COVID Visitor Guidance.pdf • Approved visitors must adhere to the NRI personal protective guidance during their visit • Instruct visitors to clean hands and don and doff PPE before entering and exiting patient room or care area		

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.