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Airborne precautions are used for patients known or suspected to be infected with a pathogen that is very small and can be spread over long distances when suspected in the air. Examples of infections that require airborne precautions are tuberculosis, measles, varicella (chickenpox), or disseminated herpes zoster (shingles).

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## **Infection Prevention Checklist**

- 1. Source control: Put a surgical mask on the resident, if appropriate.
- Resident placement: Place resident in an airborne infection isolation room (AIIR, sometimes called a "negative pressure room") and keep the door closed. Monitor room daily to ensure that negative pressure remains in place.
  - a. If the facility does not have an AIIR, place the resident in a private room with the door closed.
- Door signage: Place a sign outside the resident's door indicating the personal protective equipment to be used. Example of airborne precautions sign from CDC: <u>https://www.cdc.gov/infectioncontrol/pdf/airborne-precautions-sign-P.pdf</u>
- 4. **Personal protective equipment (PPE)**: Healthcare workers should don a fit-tested N95 or higher level respirator prior to entering the resident's room. Wear eye protection if resident care activities may generate splashes or sprays of body fluids, secretions, or excretions.
- 5. **Staff assignments:** Restrict susceptible healthcare staff from entering the room with the infected resident if there are vaccinated staff available to perform care.
- 6. **Resident transport**: Limit movement of resident except for instances in which it is medically necessary. If movement outside the room is necessary, instruct the resident to wear a surgical mask if it can be tolerated.
- 7. **Immunization**: Immunize susceptible persons as soon as possible following unprotected contact with vaccine-preventable conditions (e.g., measles, varicella).
- 8. **Duration of precautions**: Consult CDC's Guideline for Isolation Precautions (<u>https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html</u>) to determine duration of precautions and verify type of precautions needed.



# Airborne Precautions: How to Share the News



 To the resident and those authorized to receive health information: You (or your loved one) [may have / is confirmed to have] a germ that is spread in the air. We will be taking extra precautions like wearing N95 respirators and eye protection, and giving you care in your room whenever possible. When you come out of your room, we will have you wear a mask. We will also be washing our hands a lot and encourage you to do the same.

<Add information to instruct visitors about any facility policy regarding what PPE they need to wear when visiting a resident on airborne precautions.>

2. To healthcare workers: This resident is [suspected/confirmed] to have [disseminated shingles, tuberculosis, etc.]. You must wear a fit-tested N95 respirator when entering the resident's room. Add other personal protective equipment like eye protection as needed per standard precautions. Please also make sure we have the resident in an airborne infection isolation room (or "negative pressure" room). It's important that we have an Airborne Precautions sign on the door and keep the door closed. Thanks for being consistent with these infection prevention measures!

# **Additional Resources**

VDH Transmission-Based Precautions webpage: <a href="https://www.vdh.virginia.gov/haiar/ip/transmission-based-precautions/">https://www.vdh.virginia.gov/haiar/ip/transmission-based-precautions/</a>