All Healthcare Personnel must:

<table>
<thead>
<tr>
<th>English</th>
<th>Spanish</th>
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<tbody>
<tr>
<td>Clean hands before entering and when leaving room.</td>
<td>Lavarse las manos antes de entrar y al salir de la habitación.</td>
</tr>
<tr>
<td>Wear a gown when entering room and remove before leaving.</td>
<td>Usar una bata al entrar a la habitación y quitársela antes de salir.</td>
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<tr>
<td>Wear N95 or higher level respirator before entering the room and remove after exiting.</td>
<td>Usar un respirador N95 o un respirador de nivel superior antes de entrar a la habitación y quitárselo después de salir.</td>
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<tr>
<td>Wear gloves when entering room and remove before leaving.</td>
<td>Usar guantes al entrar a la habitación y quitárselos antes de salir.</td>
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<tr>
<td>Keep door closed. (Maintain negative pressure)</td>
<td>Mantener la puerta cerrada. (Mantener presión negativa).</td>
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</table>

Additional PPE may be required per Standard Precautions.

*Es posible que se exija utilizar equipo de protección personal adicional según las precauciones estándar.*
Airborne Contact Precautions

Remove sign after room is terminally cleaned upon discharge or discontinuation of precautions.

Common conditions (per CDC guidelines)
- Chicken Pox
- Disseminated Shingles
- Smallpox
- Monkey pox
- Extrapulmonary tuberculosis (draining lesions)

Room Placement:
Preferred placement for patients who require Airborne Precautions is in an airborne infection isolation room (AIIR). An AIIR is a single-patient room that is equipped with special air handling and ventilation capacity that meet the Facility Guidelines Institute (FGI) standards for AIIR. In settings where Airborne Precautions cannot be implemented due to limited engineering resources (e.g., physician offices), masking the patient, placing the patient in a private room (e.g., office examination room) with the door closed, and providing N95 or higher level respirators or masks if respirators are not available for healthcare personnel will reduce the likelihood of airborne transmission until the patient is either transferred to a facility with an AIIR or returned to the home environment, as deemed medically appropriate.

Personal Protective Equipment:
Put on in this order
- Alcohol based handrub or wash with soap and water if visibly soiled
- Gown
- Fit tested NIOSH approved respirator (N95) or higher level respirator
Healthcare worker must be fit tested for respirator and visitors should see nurse for proper use.
- Gloves

Take off and dispose in this order
- Gloves
- Gown- Unfasten gown ties, taking care that sleeves don’t contact your body when reaching for ties. Pull gown away from neck and shoulders, touching inside of gown only.
- N95 respirator- Do NOT grasp front of respirator. Grasp bottom elastics then the ones at the top.
  - Alcohol based handrub or wash hands with soap and water if visibly soiled.

Dishes/Utensils:
No special precautions. Should be managed in accordance with routine procedures.

Room Cleaning:
Follow facility policy for Airborne Contact Precautions

Trash and Linen Management:
Bag linen and trash in patient room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated).

Transport:
Essential transport only. Place patient in a medical grade mask. Clean and disinfect transport equipment. Alert receiving department regarding patient isolation precaution status.

Duration of Precautions:
For guidance for duration of precautions, follow Appendix A- Type and Duration of Precautions Recommended for Selected Infections and Conditions within the CDC’s 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings