



UPDATES: TO UNIFIED SPICE ISOLATION SIGNAGE

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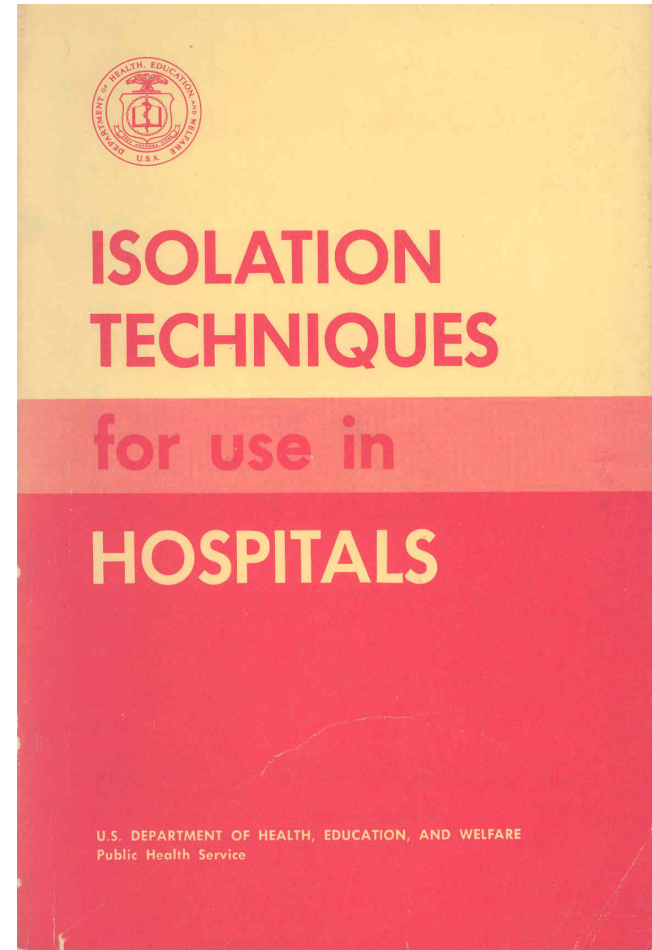


OBJECTIVES

- Understand the history of isolation precautions guidelines.
- Identify the updates to the SPICE isolation precaution signage.

HISTORY OF INFECTION CONTROL PRECAUTIONS IN THE UNITED STATES

- 1970 CDC “Isolation Techniques for use in Hospitals”, 1st Edition
- Six Categories of Isolation
- 1975 CDC “Isolation Techniques in Hospitals”, 2ND Edition, color-coded category door signs



CDC 1975

Strict Isolation

Visitors—Report to Nurses' Station Before Entering Room

1. Private Room—*necessary*; door must be kept closed.
2. Gowns—must be worn by all persons entering room.
3. Masks—must be worn by all persons entering room.
4. Hands—must be washed on entering and leaving room.
5. Gloves—must be worn by all persons entering room.
6. Articles—must be discarded, or wrapped before being sent to Central Supply for disinfection or sterilization.

Respiratory Isolation

Visitors—Report to Nurses' Station Before Entering Room

1. Private Room—*necessary*; door must be kept closed.
2. Gowns—not necessary.
3. Masks—must be worn by any person entering room unless that person is not susceptible to the disease.
4. Hands—must be washed on entering and leaving room.
5. Gloves—not necessary.
6. Articles—those contaminated with secretions must be disinfected.

Protective Isolation

Visitors—Report to Nurses' Station Before Entering Room

1. Private Room—*necessary*; door must be kept closed.
2. Gowns—must be worn by all persons entering room.
3. Masks—must be worn by all persons entering room.
4. Hands—must be washed on entering and leaving room.
5. Gloves—must be worn by all persons having direct contact with patient.
6. Articles—*see* manual text.

Enteric Precautions

Visitors—Report to Nurses' Station Before Entering Room

1. Private Room—*necessary for children only*.
2. Gowns—must be worn by all persons having direct contact with patient.
3. Masks—not necessary.
4. Hands—must be washed on entering and leaving room.
5. Gloves—must be worn by all persons having direct contact with patient or with articles contaminated with fecal material.
6. Articles—special precautions necessary for articles contaminated with urine and feces. Articles must be disinfected or discarded.

Wound & Skin Precautions

Visitors—Report to Nurses' Station Before Entering Room

1. Private Room—desirable.
2. Gowns—must be worn by all persons having direct contact with infected wound.
3. Masks—not necessary except during dressing changes.
4. Hands—must be washed on entering and leaving room.
5. Gloves—must be worn by all persons having direct contact with infected area.
6. Articles—special precautions necessary for instruments, dressings, and linen.

NOTE: *See* manual for Special Dressing Techniques to be used when changing dressings.

HISTORY OF ISOLATION PRECAUTIONS

- 1983 CDC Isolation Precautions in Hospital

Category-based precautions (Airborne Isolation, Droplet and Contact) plus blood and body fluids precautions

- 1985 Introduced Universal Precautions all patients considered infectious all the time regardless of testing

HISTORY OF ISOLATION PRECAUTIONS

- 1987 Body Substance Isolation
 - (Mostly focused on worker protection)
- 1996 CDC HICPAC Revised Isolation Guidelines
 - Introduced Standard Precautions and kept 3 categories of transmission-based precautions
- 2006 CDC Guidelines for MDROs
- 2007 CDC HICPAC Revised Guideline for Isolation Precautions
 - Broaden to include all healthcare settings

HISTORY OF NC SPICE STANDARDIZED SIGNAGE

In 2008, NC SPICE in collaboration with NC APIC to create a uniform color-coded signage for:

- Airborne Isolation Precautions
- Contact Precautions
- Contact Enteric Precautions
- Droplet Precautions

WHY STANDARDIZE ISOLATION PRECAUTIONS SIGNAGE?

- Transmission based precautions prevents the spread of infections between patients and to staff
- Supports healthcare facilities to implement CDC guidelines
- Variation in signage makes care more difficult and puts patients and residents at risk.
- Increase compliance and consistency by healthcare providers and visitors.
- Use of SPICE signage is voluntary.

UPDATED AND NEW NC SPICE ISOLATION PRECAUTIONS SIGNAGE

- Signage to have simple, big easy to see pictures
- Signage to minimize reading
- Signage to not send family and visitors looking for nursing staff
- Provides family education and directions for protection
- Provides easy access to information for staff

NC STANDARDIZED ISOLATION SIGNAGE (PUBLISHED JANUARY 2022)

10 isolation precaution categories

- Standard Precautions (coral) **NEW**
- Contact precautions (orange)
- Enteric Precautions (orange with brown)
- Droplet Precautions (green)
- Airborne Precautions (blue)
- Neutropenic Precautions (purple) **New**
- Contact Droplet Precautions (green/orange) **New**
- Special Droplet Contact Precautions (red/green orange)
- Protective Precautions (gray)
- Enhanced Barrier Precautions (teal) **New**

<p>Remember to always use STANDARD PRECAUTIONS for all patient care.</p> <p>Standard precautions make use of common sense practices, including use of personal protective equipment, to protect healthcare providers from infection and prevent the spread of infection from patient to patient.</p>
<p>CONTACT PRECAUTIONS</p> <p>Common conditions for using contact precautions are: Methicillin-resistant <i>Staphylococcus aureus</i> (MRSA) Vancomycin-resistant <i>Enterococcus</i> (VRE) Carbapenem-resistant <i>Enterobacteriaceae</i> (CRE), Extended spectrum beta lactamase producers Gram Negative Rods (ESBL-GNR) <i>Candida auris</i>, RSV Other multidrug resistant organisms Scabies Uncontained draining wounds or abscesses.</p> <p>Personal Protective Equipment includes: Gloves and gown</p>
<p>ENTERIC PRECAUTIONS</p> <p>Common conditions for using enteric precautions are: <i>Clostridioides difficile</i> and Norovirus.</p> <p>Personal Protective Equipment includes: Gloves and gown</p>
<p>DROPLET PRECAUTIONS</p> <p>Common conditions for using droplet precautions are: <i>B. pertussis</i> (Whooping cough) Influenza virus Rhinovirus Known or suspected <i>Neisseria meningitidis</i> (meningococcal) and <i>H. influenzae meningitis</i> Mumps Rubella Parvovirus B19</p> <p>Personal Protective Equipment includes: Surgical/procedure mask</p>
<p>AIRBORNE PRECAUTIONS</p> <p>Common conditions for using airborne precautions are: <i>Mycobacteria tuberculosis</i> (TB) Measles</p> <p>Personal Protective Equipment includes: Respirator (N95 or higher)</p>
<p>NEUTROPENIC PRECAUTIONS</p> <p>The definition of neutropenia varies from institution to institution, but neutropenia is usually defined as an absolute neutrophil count (ANC) <500 or 1000 cells/microl, and severe neutropenia as an ANC <500 cells/microl, or an ANC that is expected to decrease to <500 cells/microl over the next 48 hours. Profound neutropenia is defined as an ANC <100 cells/microl. The risk of clinically important infection rises as the neutrophil count falls below 500 cells/microl, and is higher in those with a prolonged duration of neutropenia (>7 days).</p> <p>Personal Protective Equipment includes: Dependent on activity per standard precautions</p>
<p>DROPLET CONTACT PRECAUTIONS</p> <p>Common conditions for using contact/droplet precautions are: Rhinovirus if associated with copious secretions Invasive group A streptococcal infection associated with soft tissue involvement Adenovirus pneumonia</p> <p>Personal Protective Equipment includes: Gloves, gown, surgical/procedure mask</p>
<p>AIRBORNE CONTACT PRECAUTIONS</p> <p>Common conditions for using contact/airborne precautions are: Chicken Pox, Disseminated Shingles, Smallpox, Monkey pox, Extrapulmonary tuberculosis (draining lesions)</p> <p>Personal Protective Equipment includes: Gloves, gown, respirator (N95 or higher)</p>
<p>SPECIAL DROPLET CONTACT PRECAUTIONS</p> <p>Common conditions for using contact/airborne precautions are: COVID-19 SARS</p> <p>Personal Protective Equipment includes: Gloves, gown, respirator (N95 or higher), protective eyewear</p>
<p>PROTECTIVE PRECAUTIONS</p> <p>Designed for allogeneic hematopoietic stem cell transplant (HSCT) patients to minimize fungal spore counts in the air and reduce the risk of invasive environmental fungal infections. Reference signage for specifics.</p> <p>Personal Protective Equipment includes: Dependent on activity per standard precautions</p>
<p>ENHANCED BARRIER PRECAUTIONS</p> <p>LONG TERM CARE FACILITIES ONLY USE THIS (WEAR GOWN AND GLOVES) FOR RESIDENTS WHO HAVE:</p> <p>Infection or colonization with a novel or targeted MDRO when Contact Precautions don't apply.</p> <p>Wounds and/or indwelling medical devices regardless of MDRO colonization status who reside on a unit/wing where a resident known to be infected or colonized with a novel or targeted MDRO resides.</p>

<https://spice.unc.edu/resources/nc-standardized-isolation-signage-published-january-2022/>

STANDARD PRECAUTIONS

- Hand hygiene
- Gown and glove if soiling likely
- Wear face covering if splashing is likely
- Clean and disinfecting medical equipment and devices between patients/residents
- Follow safe injection practices



STANDARD PRECAUTIONS

PRECAUCIONES ESTÁNDAR

Standard Precautions must always be used in any healthcare setting for all patient/resident care.
Las precauciones estándar siempre deben usarse en cualquier entorno de atención médica para los cuidados de todos los pacientes/residentes.

Everyone must:
Todos deben:

-  Clean hands before entering and when leaving room.
Lavarse las manos antes de entrar y al salir de la habitación.
-  Cover your mouth and nose with elbow or tissue when coughing or sneezing.
Cubrirse la boca y la nariz con el codo o con un pañuelo de papel al toser o estornudar.
-  Wear appropriate mask, gown, and/or gloves, if contact with blood or body fluids is expected.
Usar mascarilla, bata y guantes adecuados si hay posibilidad de tener contacto con sangre y líquidos corporales.
-  **All Healthcare Personnel must:**
Properly handle, clean, and disinfect medical equipment and devices. Handle laundry and textiles carefully.
Todo el personal de atención médica debe:
Utilizar, limpiar y desinfectar de manera adecuada el equipo y dispositivos médicos. Manejar con cuidado la ropa y los textiles sucios.
-  **Follow safe injection practices.**
Siga las prácticas seguras de inyección.

REVISÉ DATE: 12/1/2021

Translated by UNC Health Interpreter Services

STANDARD PRECAUTIONS

- Preferred use of ABHR

Follow safe infection practices:

- Prepare injections in a clean area,
- Disinfect the rubber septum on medication vial with alcohol before piecing,
- Use needles or syringes for only one patient/resident this includes manufactured prefilled syringes such as insulin pens
- Single dose vials accessed one time

Standard Precautions

Standard Precautions are used for all patient care. They're based on a risk assessment and make use of common sense practices, including use of personal protective equipment to protect healthcare providers from infection and prevent the spread of infection from patient to patient.

Perform Hand Hygiene

- Alcohol based handrub or wash with soap and water if visibly soiled before and after leaving the room.

Respiratory Hygiene/Cough Etiquette

The following measures to contain respiratory secretions are recommended for all individuals with signs and symptoms of a respiratory infection:

- Cover your mouth and nose with a tissue when coughing or sneezing;
- Use the nearest waste receptacle to dispose of the tissue after use;
- Perform hand hygiene (e.g., hand washing with non-antimicrobial soap and water, alcohol-based handrub, or antiseptic handwash) after having contact with respiratory secretions and contaminated objects/materials.

Personal Protective Equipment

Personal Protective Equipment must be worn if exposure to infectious material (i.e. blood and body fluids) is anticipated.

- Masks- select appropriate mask
- Gown- secure ties and tie in back (bow should not be tied in front of the gown)
- Gloves- pull over the cuffs of gown

Take off and dispose in this order

(Do NOT wear same gown and gloves for multiple patients/residents)

- Gloves- Carefully remove to prevent contamination of hands upon removal
- Gown- Carefully remove to prevent contamination on clothing or skin
- Remove mask -or ear loop masks stretch the ear loops, remove and handle only ear loops.
- Alcohol based handrub or wash with soap and water if visibly soiled

Appropriate Use, Cleaning, and Disinfection of medical equipment and devices

Follow facility policies and procedures for cleaning and disinfection of medical equipment and devices. All shared equipment must be cleaned between patients.

Linen and Textile Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated). Handle linen and textiles carefully.

Follow safe injection practices:

- Prepare injections using aseptic technique in a clean area.
- Disinfect the rubber septum on a medication vial with alcohol before piercing.
- Do not use needles or syringes for more than one patient (this includes manufactured prefilled syringes and other devices such as insulin pens).
- Single dose vials should be accessed one time only and for one patient only. Any remaining contents should be discarded.

Family/Visitors are not to enter the room if infectious with fever, cough, rash or diarrhea. Children should not visit if unable to comply with requirements.

UNIVERSAL RECOMMENDATIONS FOR ISOLATION PRECAUTIONS

- Hand Hygiene- ABHR preferred
- Dishes and Utensils: No special precautions
- Trash and Linen Management: No special trash or linen handling unless outside of bag visibly contaminated
- Personnel protective equipment: single use only.
- Duration of Precautions: Follow Appendix A-CDC 2007 Isolation Guidelines
- Visitation: Should not enter if feeling ill. Visitation also based on facility's policy.



AIRBORNE PRECAUTIONS PRECAUCIONES DE TRANSMISION AÉREA



Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.
Antes de entrar a la habitación, siga las instrucciones a continuación.

Everyone must:



Clean hands before entering and when leaving room.

Todos deben:

Lavarse las manos antes de entrar y antes de salir de la habitación.

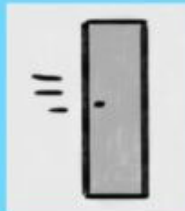


Wear a respirator (N95) or higher level respirator prior to entering the room. Remove after exiting the room.

Visitors-See nurse for instruction on mask or respirator selection and use.

Usar un respirador (N95) o un respirador de nivel superior antes de entrar a la habitación. Quitárselo después de salir de la habitación.

Visitantes- consulte con la enfermera para obtener instrucciones sobre la selección y el uso de



**Keep door closed.
(Maintain negative pressure)**

*Mantenga la puerta cerrada.
(Mantener presión negativa)*

Additional PPE may be required per Standard Precautions.

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

Translated by UNC Health Interpreter Services

REVISED DATE: 1/20/2022

Airborne Precautions

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

Common conditions (per CDC guidelines)

Mycobacteria tuberculosis (TB)

Measles

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
- 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.

Take off and dispose in this order

- N95 respirator- Do NOT grasp front of the 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 Precautions. When in doubt keep sign on door and room closed for one hour to allow room air to circulate and filter.

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/resident 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

AIRBORNE PRECAUTIONS

- Common conditions: tuberculosis, measles
- N95 or higher respirator
- Direct visitors to nurse's station before entering
- Private room required
- Preferred Airborne Isolation Room (AIIR)
- Keep door closed to maintain negative pressure
- Upon discharge allow at least one hour for air to circulate



CONTACT PRECAUTIONS PRECAUCIONES DE TRANSMISIÓN POR CONTACTO



Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.

Antes de entrar a la habitación, siga las instrucciones a continuación.

Everyone must:



Clean hands before entering and when leaving room.

Todos deben:

Lavarse las manos antes de entrar y antes de salir de la habitación.



All Healthcare Personnel must:

Todo el personal de atención médica debe:



Wear gloves when entering room and remove before leaving room.

Usar guantes al entrar a la habitación y quitárselos antes de salir de la habitación.



Wear a gown when entering room and remove before leaving.

Usar una bata al entrar a la habitación y quitársela antes de salir.



Use patient-dedicated or single-use disposable equipment. If shared equipment is used clean and disinfect between patients.

Usar equipo desechable de un solo uso o designado al paciente. Si se utiliza equipo compartido, limpiar y desinfectar entre pacientes.

Additional PPE may be required per Standard Precautions.

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

Translated by UNC Health Interpreter Services

REVISED DATE: 1/20/22

Contact Precautions

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

Common conditions (per CDC guidelines)

Methicillin-resistant *Staphylococcus aureus* (MRSA)
Vancomycin-resistant *Enterococcus* (VRE)
Carbapenem-resistant *Enterobacterales* (CRE)
Extended spectrum beta lactamase producers Gram Negative Rods (ESBL-GNR)
Candida auris (C. auris)
Other multidrug resistant organisms
Scabies
Uncontained draining wounds or abscesses
RSV

Room Placement:

Use private room when available. When private rooms are unavailable, place together in the same room persons who are colonized or infected with the same pathogen.

Personal Protective Equipment

Put on in this order

- Alcohol based handrub or wash with soap and water if visibly soiled
- Gown- secure ties and tie in back (bow should not be tied in front of the gown)
- Gloves- pull over the cuffs of gown

Take off and dispose in this order

- (Do NOT wear same gown and gloves for multiple patients/residents)
- Gloves- Carefully remove to prevent contamination of hands upon removal
- Gown- Carefully remove to prevent contamination on clothing or skin
- Alcohol based hand rub 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 Contact Precautions

Trash and Linen Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated).

Transport:

Essential transport only. Place patient/resident in a clean gown. Clean and disinfect transport equipment. Alert receiving department regarding patient/resident isolation precaution status.

Duration of Precautions:

For all multidrug resistant organisms, follow guidance and recommendations from CDC (Management of Multidrug-Resistant Organisms in Healthcare Settings) and SHEA (Duration of Contact Precautions for Acute-Care Settings).

For other 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

CONTACT PRECAUTIONS

- Common conditions:
MRSA, VRE, CRE, ESBL-GNR, Candida auris, Scabies, uncontained draining wounds or abscesses
- Private room if available
- Don gown and gloves
- Disposable or dedicated equipment
- Transport patients in a fresh gown



DROPLET PRECAUTIONS PRECAUCIONES DE TRANSMISIÓN POR GOTAS



Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.

Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.

Antes de entrar a la habitación, siga las instrucciones a continuación.

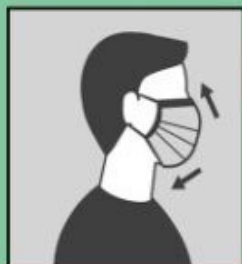


Everyone must:

Clean hands before entering and when leaving room.

Todos deben:

Lavarse las manos antes de entrar y al salir de la habitación.



Wear surgical/procedure mask when entering the room and remove after exiting the room.

Usar una mascarilla quirúrgica o para procedimientos al entrar a la habitación y quitársela después de salir de la habitación.

Additional PPE may be required per Standard Precautions.

Es posible que se exija equipo de protección personal adicional según las precauciones estándar.

Translated by UNC Health Interpreter Services

REVISED DATE: 1/20/2022

Droplet Precautions

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

Common conditions (per CDC guidelines)

B. pertussis (Whooping cough)

Influenza virus

Rhinovirus

Known or suspected *Neisseria meningitidis* (meningococcal) and *H. influenza* meningitis

Mumps

Rubella

Parvovirus B19

Room Placement:

Use private room when available. When private rooms are unavailable, place together in the same room persons who are colonized or infected with the same pathogen.

Spatial separation of ≥3 feet and drawing the curtain between patient beds is especially important for patients in multi-bed rooms with infections transmitted by the droplet route.

Personal Protective Equipment

Put on in this order

- Alcohol based handrub or wash with soap and water if visibly soiled
- Mask- Cover nose, mouth, and chin. If wearing a mask with ties, all ties must be secured.

Take off and dispose in this order

- Mask- Do NOT grasp front of the mask when removing. Grasp bottom ties then the ties at top and pull away from face. For ear loop masks stretch the ear loops, remove, and handle only ear loops.
- 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 Droplet Precautions

Trash and Linen Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated).

Transport:

Essential transport only. Place patient/resident in a medical grade mask. Clean and disinfect transport equipment. Alert receiving department regarding patient/resident 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

DROPLET PRECAUTIONS

- Common conditions: pertussis, Influenza, Rhinovirus, Neisseria meningitides, Mumps, Rubella, Parvovirus B19
- Surgical or procedure mask upon entering the room
- Private room when available
- Transport patient in a medical grade mask.

STOP ENTERIC PRECAUTIONS PRECAUCIONES DE TRANSMISIÓN POR ALTO ENTÉRICA

Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
 Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.
Antes de entrar a la habitación, siga las instrucciones a continuación.



Everyone must:
Clean hands before entering and when leaving room.

Todos deben:

Lavarse las manos antes de entrar Y antes de salir de la habitación.



All Healthcare Personnel must:

Todo el personal de atención médica debe:



Wear gloves when entering room and remove before leaving room.

Usar guantes al entrar a la habitación y quitárselos antes de salir de la habitación.



Wear a gown when entering room and remove before leaving.

Usar una bata al entrar a la habitación y quitársela antes de salir.



Use patient-dedicated or single-use disposable equipment. If shared equipment is used, clean with an EPA K list disinfectant.

Usar equipo desechable de un solo uso o designado al paciente. Si se usa equipo compartido, limpiarlo con un desinfectante de la lista K de la EPA.

Additional PPE may be required per Standard Precautions.

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

Enteric Precautions

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

Common conditions:

Clostridioides difficile

Norovirus

Room Placement:

Use private room when available. When private rooms are unavailable, place together in the same room persons who are colonized or infected with the same pathogen.

Personal Protective Equipment

Put on in this order

- Alcohol based handrub or wash with soap and water if visibly soiled
- During an outbreak, consider using soap & water instead of alcohol-based hand sanitizers after removing gloves.
- Gown- secure ties and tie in back (bow should not be tied in front of the gown)
- Gloves- pull over the cuffs of gown

Take off and dispose in this order

- (Do NOT wear same gown and gloves for multiple patients/residents)
- Gloves- Carefully remove to prevent contamination of hands upon removal
- Gown- Carefully remove to prevent contamination on clothing or skin
- Alcohol based handrub or wash hands with soap and water if visibly soiled. If your institution experiences an outbreak, consider using soap and water instead of alcohol-based hand sanitizers for hand hygiene after removing gloves while caring for patients with CDI.

Diarrhea/Utteralls:

No special precautions. Should be managed in accordance with routine procedures.

Room Cleaning:

Follow facility policy. Use a disinfectant included on the EPA LIST K. Examples of these include: Bleach wipes, bleach and other sporicidal disinfectants.

Trash and Linen Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated).

Transport:

Essential transport only. Place patient/resident in a clean gown. Clean and disinfect transport equipment. Alert receiving department regarding patient/resident isolation precaution status.

ENTERIC PRECAUTIONS

- Common conditions: Clostridioides difficile, Norovirus, Rotavirus
- USE ABHR for routine care. During an outbreak, HCP should consider using soap & water routinely
- Private room if possible
- Gown and gloves
- Disposable or dedicated equipment
- Use EPA agent from the K list of disinfectants: Dilute Bleach , sporicidal disinfectants.



DROPLET CONTACT PRECAUTIONS



PRECAUCIONES DE TRANSMISIÓN POR GOTAS Y POR CONTACTO

Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
 Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.
Antes de entrar a la habitación, siga las instrucciones a continuación.

Everyone must:

Todos deben:



Clean hands before entering and when leaving room.

Lavarse las manos antes de entrar y antes de salir de la habitación.



Wear a gown when entering room and remove before leaving.

Usar una bata al entrar a la habitación y quitársela antes de salir.



Wear surgical/procedure mask when entering the room. Remove immediately before leaving room.

Usar una mascarilla quirúrgica o para procedimientos al entrar a la habitación. Quitársela justo antes de salir de la habitación.



Wear gloves when entering room. Perform hand hygiene after removing gloves.

Usar guantes al entrar a la habitación. Llevar a cabo la higiene de manos después de quitarse los guantes.

Additional PPE may be required per Standard Precautions.

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

Translated by UNC Health Interpreter Services

REVISED DATE: 1/20/2022

Droplet Contact Precautions

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

Common conditions (per CDC guidelines)

Rhinovirus if associated with copious secretions

Invasive group A streptococcal infection associated with soft tissue involvement

Adenovirus pneumonia

Room Placement

Use private room when available. When private rooms are unavailable, place together in the same room persons who are colonized or infected with the same pathogen.

Spatial separation of ≥ 3 feet and drawing the curtain between patient/resident beds is especially important for patients/residents in multi-bed rooms with infections transmitted by the droplet route.

Personal Protective Equipment

Put on in this order

- Alcohol based handrub or wash with soap and water if visibly soiled
 - Gown
- Surgical/procedure mask– Cover nose, mouth, and chin. If wearing a mask with ties, all ties must be secured.
 - Gloves

Take off and dispose in this order

- Gloves– perform hand hygiene after removing 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.
- Surgical/procedure mask– Do NOT grasp front of the mask when removing. Grasp bottom ties then the ties at top and pull away from face. For ear loop masks stretch the ear loops, remove, and handle only ear loops.
 - Alcohol based handrub or wash hands with soap and water if visibly soiled.

Diagnosis/Utensils:

No special precautions. Should be managed in accordance with routine procedures.

Room and Equipment Cleaning:

Follow facility policy for Droplet Contact Precautions for room cleaning. Use patient-dedicated or single-use disposable equipment. If shared equipment is used, clean and disinfect between patients.

Trash and Linen Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated).

Transport:

Essential transport only. Place patient/resident in a medical grade mask. Clean and disinfect transport equipment. Alert receiving department regarding patient/resident 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

DROPLET CONTACT PRECAUTIONS

- Common conditions:
Rhinovirus if associated with copious secretions,
Invasive group A streptococcal infection associated with soft tissue involvement
Certain coronaviruses
RSV (infants and young children)
- Private room when available or keep >3 spatial separation
- Surgical or procedure mask when entering room
- Gown and gloves on room entry and remove when leaving room
- Essential transport with patient/resident in a medical grade mask and clean gown



SPECIAL DROPLET CONTACT PRECAUTIONS



PRECAUCIONES ESPECIALES PARA LA TRANSMISIÓN POR CONTACTO Y POR GOTAS

Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.
Antes de entrar a la habitación, siga las instrucciones a continuación.



All Healthcare Personnel must:

Todo el personal de atención médica debe:

Clean hands before entering and when leaving room.

Lavarse las manos antes de entrar y antes de salir de la habitación.



Wear a gown when entering room and remove before leaving.

Usar una bata al entrar y quitársela antes de salir.



Wear N95 or higher level respirator before entering the room and remove after exiting.

Usar un respirador N95 o un respirador de nivel superior antes de entrar a la habitación y quitárselo después de salir.



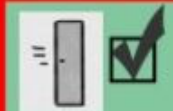
Protective eyewear (face shield or goggles)

Protección para los ojos (careta o gafas protectoras)



Wear gloves when entering room and remove before leaving.

Usar guantes al entrar a la habitación y quitárselos antes de salir.



Place in private room. Keep door closed (if safe to do so).

Colocar en habitación privada. Mantenga la puerta cerrada (si es seguro hacerlo).

Additional PPE may be required per Standard Precautions.

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

Special Droplet Contact Precautions

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

Common conditions (per CDC guidelines)

SARs, COVID-19

Room Placement:

Place patient in a single-person room. Keep the door closed UNLESS it poses a safety risk (i.e., fall, memory care units). Dedicated bathroom should be in the room. When private rooms are unavailable, place together in the same room persons who are colonized or infected with the same pathogen.

Aerosol Generating Procedures (AGPs) should be performed in an Airborne Infection Isolation Room (AIIR) if available.

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.

- Put on eye protection (face shield or goggles)
- Gloves

Take off and dispose in this order

- Gloves
- Eye Protection- Remove goggles or face shield from the back by lifting head band or ear pieces
- 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 the respirator. Grasp bottom elastics then the ones at the top.
 - Alcohol based handrub or wash hands with soap and water if visibly soiled.

Dishee/Utenelle:

No special precautions. Should be managed in accordance with routine procedures.

Room Cleaning:

Follow facility policy for Special Droplet Contact Precautions

Trash and Linen Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated).

Transport:

Essential transport only. Place patient/resident in a medical grade mask. Clean and disinfect transport equipment. Alert receiving department regarding patient/resident 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

SPECIAL DROPLET CONTACT PRECAUTIONS

- Common conditions: SARS, SAR-CoV-2 (COVID-19)
- ~~• AllR single patient room with special air handling and ventilation capacity that meet the Facility Guidelines Institute (FGI) standards. Exception is for AGPS~~
- Private room with door closed unless fall risk.
- Fit tested N95 or higher respirator
- Protective eyewear
- Essential transport only with patient-resident wearing a medical grade mask
- ~~• Upon discharge allow at least one hour for air to circulate~~



AIRBORNE CONTACT PRECAUTIONS



PRECAUCIONES PARA LA TRANSMISION POR CONTACTO Y POR VIA AÉREA

Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.
Antes de entrar a la habitación, siga las instrucciones a continuación.

All Healthcare Personnel must:

Todo el personal de atención médica debe:



Clean hands before entering and when leaving room.

Lavarse las manos antes de entrar y al salir de la habitación.



Wear a gown when entering room and remove before leaving.

Usar una bata al entrar a la habitación y quitársela antes de salir.



Wear N95 or higher level respirator before entering the room and remove after exiting.

Usar un respirador N95 o un respirador de nivel superior antes de entrar a la habitación y quitárselo después de salir.



Wear gloves when entering room and remove before leaving.

Usar guantes al entrar a la habitación y quitárselos antes de salir.



**Keep door closed.
(Maintain negative pressure)**

Mantener la puerta cerrada. (Mantener presión negativa).

Additional PPE may be required per Standard Precautions.

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

Translated by UNC Health Interpreter Services

REVISED DATE: 1/20/2022

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



AIRBORNE CONTACT PRECAUTIONS

- Common conditions:
Chicken Pox
Disseminated Shingles
Smallpox Monkey pox
Extrapulmonary tuberculosis (draining lesions)
- AIIR- single-patient room with special air handling and ventilation capacity that meet the Facility Guidelines Institute (FGI) standards.
- N95 or higher respirator
- Essential transport only with patient-resident wearing a medical grade mask
- Upon discharge allow at least one hour for air to circulate



ENHANCED BARRIER PRECAUTIONS (LTCFs)



PRECAUCIONES CON BARRERAS REFORZADAS (CENTROS DE LARGA ESTANCIA)

Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.
Antes de entrar a la habitación, siga las instrucciones a continuación.



Everyone must:

Todos deben:

Clean hands before entering and after leaving room.

Lavarse las manos antes de entrar y antes de salir de la habitación.



All Healthcare Personnel must:

Todo el personal de atención médica debe:

Wear gloves and gown for the following High-Contact Resident Care Activities:

- Dressing Bathing/Showering
- Transferring
- Changing Linens
- Providing Hygiene
- Changing briefs or assisting with toileting
- Device care or use: central line, urinary catheter, feeding tube, tracheostomy
- Wound Care: any skin opening requiring a dressing

Usar guantes y bata para las siguientes actividades de alto contacto durante el cuidado de residentes:

- Vestir, bañar, duchar, trasladar, cambiar la ropa de cama.
- Proporcionar higiene, cambiar la ropa interior o ayudar a usar el baño.
- Cuidado o uso de dispositivos: vía central, sonda urinaria, sonda de alimentación, traqueostomía.

Additional PPE may be required per Standard Precautions.
Es posible que se exija utilizar equipo de protección personal adicional según las precauciones estándar.

Translated by UNC Health Interpreter Services

REVISED DATE: 1/20/2022

Enhanced Barrier Precautions

Not intended for acute care or long-term acute care (LTACs)

All residents with any of the following:

- Infection or colonization with a novel or targeted MDRO when Contact Precautions do not apply. (includes: Pan-resistant organisms; Carbapenemase producing *Enterobacterales*, *Pseudomonas spp.*, or *Acinetobacter baumannii* and/or *Candida auris*)
- Wounds and/or indwelling medical devices (e.g., central line, urinary catheter, feeding tube, tracheostomy/ventilator) regardless of MDRO colonization status who reside on a unit or wing where a resident known to be infected or colonized with a novel or targeted MDRO resides.

Facilities may consider applying Enhanced Barrier Precautions to residents infected or colonized with other epidemiologically-important MDROs based on facility policy.

Perform Hand Hygiene

- Alcohol based handrub or wash with soap and water if visibly soiled before and after leaving the room.

Personal Protective Equipment

Wear gloves and a gown for the following High-Contact Resident Care Activities.

Do not wear the same gown and gloves for the care of more than one person.

High-Contact Resident Care Activities include:

- Dressing
- Bathing/Showering
- Transferring
- Changing Linens
- Providing Hygiene
- Changing briefs or assisting with toileting
- Device care or use: central line, urinary catheter, feeding tube, tracheostomy
- Wound Care: any skin opening requiring a dressing

Take off and dispose in this order

(Do NOT wear same gown and gloves for multiple patients/residents)

- Gloves- Carefully remove to prevent contamination of hands upon removal
- Gown- Carefully remove to prevent contamination on clothing or skin
- Alcohol based handrub or wash with soap and water if visibly soiled

Dishes/Utensils:

No special precautions. Should be managed in accordance with routine procedures.

Appropriate Use, Cleaning, and Disinfection of medical equipment and devices

Follow facility policies and procedures for cleaning and disinfection of medical equipment and devices. All shared equipment must be cleaned between patients.

Linen and Textile Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated). Handle linen and textiles carefully.

ENHANCED BARRIER PRECAUTIONS (LCTFS)

- Infection or colonization with a novel or targeted MDRO when Contact Precautions don't apply.
- Wounds and/or indwelling medical devices regardless of MDRO colonization status who reside on a unit/wing where a resident known to be infected or colonized with a novel or targeted MDRO resides.
- Wear gloves and gown for **High Contact Resident Care Activities**: Dressing
Bathing/Showering
Transferring
Changing Linens
Providing Hygiene
Changing briefs or assisting with toileting
Device care or use: central line, urinary catheter, feeding tube, tracheostomy
Wound Care: any skin opening requiring a dressing



NEUTROPENIC PRECAUTIONS

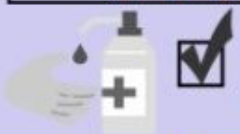


Not included in CDC's Guidelines for Isolation Precautions

PRECAUCIONES NEUTROPÉNICAS

Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.
Antes de entrar a la habitación, siga las instrucciones a continuación.



Everyone must:

Todos deben:

Clean hands before entering and when leaving room.

Lavarse las manos antes de entrar y antes de salir de la habitación.



Avoid raw or under cooked fruits or vegetables; raw or undercooked eggs or shellfish

Evitar las frutas y verduras crudas o poco cocidas; los huevos o mariscos crudos o poco cocidos.



No live flowers or plants.

No se permiten flores ni plantas vivas.



Do not enter if feeling unwell.

No entre si está enfermo.

Additional PPE may be required per Standard Precautions.

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

Translated by UNC Health Interpreter Services

REVISED DATE: 1/20/2022

Neutropenic Precautions

Neutropenia — The definition of neutropenia varies from institution to institution, but neutropenia is usually defined as an absolute neutrophil count (ANC) <1500 or 1000 cells/microL and severe neutropenia as an ANC <500 cells/microL or an ANC that is expected to decrease to <500 cells/microL over the next 48 hours [2,3]. Profound neutropenia is defined as an ANC <100 cells/microL. The risk of clinically important infection rises as the neutrophil count falls below 500 cells/microL and is higher in those with a prolonged duration of neutropenia (>7 days).

Room Placement:

Use private room when available.

Personal Protective Equipment

Per Standard Precautions

Diarrhea/Utensils:

No special precautions. Should be managed in accordance with routine procedures.

Room Cleaning:

Follow facility policy for Neutropenic Precautions

Trash and Linen Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated).

Transport:

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

Other Special Precautions:

- No live flowers or plants.
- Do not enter if feeling unwell.
- Avoid fresh uncooked fruits and vegetables (cooked fruits and vegetables are okay), raw or undercooked eggs or shellfish. Only use desiccated pepper.

NEUTROPENIC PRECAUTIONS

- Absolute neutrophil count (ANC) < 1500 or AMC expected to decrease to < 500 over next 48 hours
- Private room if available
- Routine room cleaning
- Avoid raw or undercooked fruits, eggs, vegetables, or shellfish or cracked pepper
- No live flowers or plants
- No entry if ill
- Surgical mask if leaving room



PROTECTIVE PRECAUTIONS



PRECAUCIONES PROTECTORAS

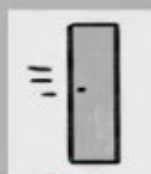
Family/Visitors should not visit if having signs or symptoms of an infection or a communicable disease. Visitation also based on facility's policy.
Los familiares y visitantes no deben visitar si tienen señales o síntomas de infección o de una enfermedad contagiosa. Las visitas también dependen de la política de la instalación.

Follow instructions below before entering room.
Antes de entrar a la habitación, siga las instrucciones a continuación.

Everyone must: ***Todos deben:***



**Clean hands before entering
and when leaving room.**
*Lavarse las manos antes de entrar y antes
de salir de la habitación.*



**Well sealed private room with
filtering, air flow, air pressure,
and ventilation requirements
(specified on back of sign)**
*Habitación privada bien sellada con requisitos
de filtración, flujo de aire, presión de aire y
ventilación (especificados en la parte posterior
del letrero)*



**No dried or fresh flowers or
potted plants.**
*No se permiten flores frescas o secas ni
plantas vivas.*



Do not enter if feeling unwell.
No entre si está enfermo.

**Personal protective equipment may be required per Standard
Precautions.**

*Es posible que se exija utilizar el equipo de protección personal según las precauciones
estándar.*

Translated by UNC Health Interpreter Services

REVISED DATE: 1/20/2022

Protective Precautions

Remove sign after discontinuation of precautions.
A Protective Environment is designed for allogeneic hematopoietic stem cell transplant (HSCT) patients to minimize fungal spore counts in the air and reduce the risk of invasive environmental fungal infections.

Room Placement:

- Filter incoming air using central or point-of-use high efficiency particulate (HEPA) filters capable of removing 99.7% of particles.
 - Ensure at least 12 air changes per hour (ACH).
- Direct room airflow with the air supply on one side or the room that moves air across the patient bed and exhausted on opposite side.
- Ensure positive air pressure in room and monitor daily with visual indicators (smoke tubes or flutter strips).
- Ensure room is well-sealed to prevent infiltration of outside air (including sealed walls, floors, ceilings, windows, electrical outlets-if leakage detected, locate source and repair).
 - Use self-closing doors on all room exits.

Personal Protective Equipment

- Alcohol based handrub or wash with soap and water if visibly soiled.
 - PPE indicated per standard precautions.
- After PPE removal, 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:

- Daily wet-dusting of horizontal surfaces using cloths moistened with EPA-registered hospital disinfectant/detergent (includes sprinkler heads). Avoid dusting methods that disperse dust.
- No carpeting in hallways and patient rooms. No upholstered furniture and furnishings. Use vacuum cleaner with HEPA filters when vacuum cleaning is necessary.

Trash and Linen Management:

Bag linen and trash in patient/resident room (double bagging of trash or linen is not necessary unless outside of bag visibly contaminated).

Transport:

Essential transport only. To prevent inhalation of fungal spores during periods when construction, renovation, or other dust-generating activities that may be ongoing in and around the health-care facility, it has been advised that severely immunocompromised patients wear a high-efficiency respiratory-protection device (e.g., an N95 respirator- if medically fit to tolerate) when they leave the Protective Environment. Clean and disinfect transport equipment. Alert receiving department regarding patient/resident isolation precaution status.

Other Special Precautions:

- Prohibit dried and fresh flowers and potted plants
- For patients requiring both a Protective Environment (PE) and Airborne Infection Isolation (AIIR), use an anteroom to ensure proper air balance relationships and provide independent exhaust of contaminated air to the outside **or** place a HEPA filter in the exhaust duct. If an anteroom is not available, place patient in an AIIR and use portable ventilation units, industrial-grade HEPA filters to enhance filtration of spores.

For additional guidance on protective environments, please see guidance:

<https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/environment.html>

PROTECTIVE PRECAUTIONS

- Designed for (HSCT)
- Private room
- HEPA filters (99.7%)
- ≥ 12 AER
- Positive air pressure with monitoring
- Self-sealing room exits.
- Dust reduction cleaning
- No dried or fresh flowers or potted plants
- Do not enter if feeling unwell.
- Essential transport only wearing N95 respirator

SIGN ADDITIONS AND REVISIONS SUMMARY

PRECAUTIONS TAGS	SIGN ADDITIONS AND REVISIONS SUMMARY
Standard Precautions	Standard Precautions include: wearing proper information, note about standard precautions, updated pictures and language, and details on back of sign which includes recommendations for room placement, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and duration of precautions as well as most common conditions per the CDC guidelines.
Standard Precautions - Aerosol-Generating Procedures	AGP sign: Superseded from contact and initial signage from CDC April 2020. Guidelines for hand hygiene, recommendations, Contact, visitor information, precautions to take, notes about standard precautions, updated pictures and language, and details on back of sign which includes recommendations for room placement, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and duration of precautions as well as most common conditions per the CDC guidelines.
Standard Precautions - Spinal Procedures	Spinal sign: Replaces include: wearing proper information, precautions to take, note about standard precautions, updated pictures and language, and details on back of sign which includes recommendations for room placement, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and duration of precautions as well as most common conditions per the CDC guidelines.
Standard Precautions - Isolation	Isolation sign: Replaces include: wearing proper information, note about standard precautions, precautions to take, updated pictures and language, and details on back of sign which includes recommendations for room placement, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and duration of precautions as well as most common conditions per the CDC guidelines.
Standard Precautions - Contact Isolation	AGP sign: Intended for use when both contact and droplet are recommended in lieu of having two signs on the door. Contains visitor information, precautions to take, note about standard precautions, updated pictures and language, and details on back of sign which includes recommendations for room placement, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and duration of precautions as well as most common conditions per the CDC guidelines.
Standard Precautions - Droplet Isolation	AGP sign: Created for patients/residents that have an infectious agent without conditions that results in droplet sign. Use a CDC category tag provides information for visiting care to individuals with respiratory. Precaution information on front of sign and details on back which includes common definition of respiratory and recommendations for room placement, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and other special precautions.
Standard Precautions - Airborne Isolation	AGP sign: Intended for use when both contact and airborne precautions are recommended in lieu of having two signs on the door. Contains visitor information, precautions to take, note about standard precautions, updated pictures and language, and details on back of sign which includes recommendations for room placement, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and duration of precautions as well as most common conditions per the CDC guidelines.
Standard Precautions - Airborne Isolation - Aerosol-Generating Procedures	AGP sign: Specific to when care requires only. Intended for patients/residents that require airborne precautions and AGP sign. The reason for this precaution is to minimize airborne spread in the air and on surfaces to reduce the risk of disease being contracted. Precaution information on front of sign and details on back which includes recommendations for room placement, updated pictures, details about the room, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and other special precautions.
Standard Precautions - Airborne Isolation - Spinal Procedures	AGP sign: Created for spinal procedures (AGP) tag. Replaces standard (AGP) category standard (AGP) guidelines for room placement and changed sign name to AGP tag. SIGNIFY AGP tag to reflect the guidelines change. Because SIGNIFY tag for this category should be discontinued. Contains visitor information, precautions to take, note about standard precautions, updated pictures and language, and details on back of sign which includes recommendations for room placement, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, traffic flow management, transport, and duration of precautions as well as most common conditions per the CDC guidelines.
Standard Precautions - Airborne Isolation - Contact Isolation	AGP sign: Specific to when care requires both facilities and equipment because of patients about sign systems role in reducing contact exposures. Different from standard precautions in different from traditional contact precautions or any other category of precaution and is only intended for respiratory care. Precaution information on the front and details on back of sign which includes visitor information, hand hygiene, PPE use and staff instructions, disinfectants, room cleaning, and traffic flow management.
Standard Precautions - Airborne Isolation - Droplet Isolation	AGP sign: Standard precautions is the most level of precautions to be used for all patients, not residents in all facilities and settings. Basic information on front and details on the back of sign. Standard precautions includes recommendations for hand hygiene, PPE use and standard hand or body fluid exposures, cough and sneeze etiquette, handling, cleaning, and disinfecting medical equipment and devices, and safe injection practices. Standard precautions and AGP tag used with combination based precautions.

FRONT/BACK POCKET CARD: (PRINTS A 2-PAGE DOCUMENT TO BE TRIMMED/LAMINATED)

[HTTPS://SPICE.UNC.EDU/RESOURCES/NC-STANDARDIZED-ISOLATION-SIGNAGE/](https://spice.unc.edu/resources/nc-standardized-isolation-signage/)

Remember to always use STANDARD PRECAUTIONS for all patient care.

Standard precautions make use of common sense practices, including use of personal protective equipment, to protect healthcare providers from infection and prevent the spread of infection from patient to patient.

CONTACT PRECAUTIONS	ENTERIC PRECAUTIONS	DROPLET PRECAUTIONS	AIRBORNE PRECAUTIONS	RESPIRATORY PRECAUTIONS
<p>Common conditions for using contact precautions are:</p> <ul style="list-style-type: none"> Methicillin-resistant <i>Staphylococcus aureus</i> (MRSA) Vancomycin-resistant <i>Enterococcus</i> (VRE) Carbapenem-resistant <i>Enterobacteriaceae</i> (CRE) Extended-spectrum beta-lactamase producers (ESBL-ESBR) Candida <i>aurea</i> Other multidrug-resistant organisms Scabies Uncolimated draining wounds or abscesses HSV 	<p>Common conditions for using enteric precautions are:</p> <ul style="list-style-type: none"> Clostridioides difficile Shigella Neisseria 	<p>Common conditions for using droplet precautions are:</p> <ul style="list-style-type: none"> <i>S. pneumoniae</i> (Pneumococcal) Influenza virus Rhinovirus Known or suspected <i>Streptococcus pneumoniae</i> (pneumococcal) and <i>H. influenzae</i> meningitis Mumps Rubella Parvovirus B19 	<p>Common conditions for using airborne precautions are:</p> <ul style="list-style-type: none"> <i>Mycobacterium tuberculosis</i> (TB) Measles 	<p>The definition of <i>Acute respiratory virus</i> (ARV) is a virus that is newly defined as an ARV. <i>Neisseria meningitidis</i> (meningococcal) and <i>Streptococcus pneumoniae</i> (pneumococcal) are not ARVs. An ARV is a virus that is newly defined as an ARV. The risk of ARV is highest in those with a prolonged duration of respiratory illness (>7 days).</p>

Remember to always use STANDARD PRECAUTIONS for all patient care.

Standard precautions make use of common sense practices, including use of personal protective equipment, to protect healthcare providers from infection and prevent the spread of infection from patient to patient.

DROPLET CONTACT PRECAUTIONS	AIRBORNE CONTACT PRECAUTIONS	SPECIAL AIRBORNE CONTACT PRECAUTIONS	ENVELOPED VIRUSES PRECAUTIONS
<p>Common conditions for using contact droplet precautions are:</p> <ul style="list-style-type: none"> Rhinovirus if associated with copious secretions Invasive group A streptococcal infection associated with soft tissue involvement Adenovirus pneumonia 	<p>Common conditions for using airborne contact precautions are:</p> <ul style="list-style-type: none"> Chickenpox Disseminated Shingles Smallpox Monkeypox Extrapulmonary tuberculosis (draining lesions) 	<p>Common conditions for using special airborne contact precautions are:</p> <ul style="list-style-type: none"> COVID-19 SARs 	<p>LONG-TERM CARE FACILITIES ONLY USE THIS FOR RESIDENTS WHO HAVE:</p> <ul style="list-style-type: none"> Infection or colonization with a novel or targeted MDRD when Contact Precautions don't apply. Wounds and/or indwelling medical devices regardless of MDRD colonization status who reside on a unit where a resident known to be infected or colonized with a novel or targeted MDRD reside.

PROJECT FIRSTLINE VIDEOS

- CDC Project Firstline Videos - COVID-19 focused
“Respiratory Droplets Basics for Ventilation in Healthcare”

<https://www.cdc.gov/infectioncontrol/projectfirstline/resources/videos.html>

SUMMARY

- NC SPICE revised the standardized isolation precautions signage and pocket cards for all healthcare settings
- New signs but not required to be used
- Available to download from SPICE website for free

<https://spice.unc.edu/resources/nc-standardized-isolation-signage/>