

# COVID-19 transmission-based isolation precautions for healthcare workers

**Applies to: Inpatient Departments, Emergency Department, Ambulatory Clinics, and Procedural Areas**

**Standard precautions apply for all patient care activities: (1) Perform proper hand hygiene practices, (2) Use appropriate personal protective equipment (PPE) whenever you anticipate contact with blood and bodily fluids, (3) Clean and disinfect patient care equipment and environmental surfaces with an approved disinfectant and using proper contact time, (4) Handle sharps and needles safely, and (5) perform respiratory etiquette.**

<p><b>All Patient Care –</b></p> <p><b>Applicable to all healthcare workers.</b></p>	<p><b>Patient care for patients being tested for, suspected of, or positive for COVID-19.</b></p>	<p><b>During aerosol generating procedures<sup>1</sup> (AGP) on patients suspected of or positive for COVID-19.</b></p>	<p><b>During airway procedures* on all patients.</b></p> <p><small>*Intubation/extubation, placing tracheostomy, bronchoscopy, sinus surgeries, transesophageal echocardiogram, laryngoscopies, bag valve mask ventilation</small></p>
<p><b><u>PPE Required:</u></b></p> <ul style="list-style-type: none"> <li>• Eye protection/face shield</li> <li>• Surgical/ear loop mask</li> </ul> <p><b>Outside of patient care settings:</b> Surgical/ear loop or cloth masks.</p> <p><b>Patient and visitors:</b> See universal face mask guidance in 24/7.</p>	<p><b><u>PPE Required:</u></b></p> <ul style="list-style-type: none"> <li>• Eye protection/face shield</li> <li>• Surgical/ear loop mask</li> <li>• Gown</li> <li>• Gloves</li> </ul> <p><b><u>ISOLATION SIGNAGE/ORDER:</u></b> Contact, Droplet with Eye Protection</p>	<p><b><u>PPE Required:</u></b></p> <ul style="list-style-type: none"> <li>• PAPR <u>OR</u> N95 Respirator + Face Shield/Eye Protection</li> <li>• Gown</li> <li>• Gloves</li> </ul> <p><b><u>ISOLATION SIGNAGE/ORDER:</u></b> Contact, Droplet with Eye Protection Airborne/Contact</p> <ul style="list-style-type: none"> <li>• AGP signage to be posted during/after procedure</li> </ul> <p><b>Negative Airflow/Portable HEPA device not required.</b></p> <ul style="list-style-type: none"> <li>• Maintain airborne PPE precautions for 30 minutes<sup>2</sup> after AGP is complete and minimize opening of the patient’s door. Staff/patients can enter/exit the room as needed ensuring the door is closed behind them. Anyone entering the room during the 30-minute timeframe should follow posted precautions.</li> </ul>	<p><b><u>PPE Required:</u></b></p> <ul style="list-style-type: none"> <li>• PAPR <u>OR</u> N95 Respirator + Face Shield/Eye Protection</li> <li>• Gown</li> <li>• Gloves</li> </ul> <p><b><u>ISOLATION SIGNAGE/ORDER:</u></b> Contact, Droplet with Eye Protection Airborne/Contact</p> <ul style="list-style-type: none"> <li>• AGP signage to be posted during/after procedure</li> </ul>

<sup>1</sup> **Aerosol Generating Procedures Include, but Are Not Limited to:** non-invasive ventilation, CPR, bronchoscopy, open suction, nasotracheal suction, nebulizer treatments (without a filtered tent), high flow oxygen ≥ 15 lpm

<sup>2</sup> **Shorter timeframes after AGP may be recommended in specific OR/Procedural areas. Consult “Perioperative and Procedural Care of the Unknown, Suspected or Positive COVID-19 Patient” policy**

**PPE for Specimen Collection:** Standard/Contact/Droplet + Eye Protection precautions are recommended nasopharyngeal swab collection.

Please see extended and re-use guidelines for N95 respirators.

## Frequently Asked Questions

- Q.** What if my patient refuses an admission screening test? What PPE is required?  
**A.** If the patient is asymptomatic, utilize PPE depicted in Green column. If the patient is symptomatic, escalate to ordering provider and utilize PPE depicted in Yellow.
- Q.** If I want to purchase my own personal eye protection, how do I know it will provide me with adequate protection?  
**A.** Before purchasing your own eye protection, consult the product guide to ensure the safety goggles or eyewear provide droplet protection with a Z87+D3 ANSI rating.
- Q.** When should patients and visitors wear a mask?  
**A.** We ask patients and visitors always wear at least a cloth mask while in our facilities (hallways, waiting areas, cafeteria, in patient room when other persons are within 6 feet, etc.) as they are able.
- Q.** When can isolation be discontinued for a suspected or confirmed COVID-19 patient?  
**A.** Discontinuation of Transmission-Based Precautions is available in the Care of a Patient with COVID-19 Policy:

*This guidance is based on current information about COVID-19 and subject to change as additional information becomes available. Current guidance for discontinuation of isolation precautions applies to COVID-19 positive patients on acute care status. Intensive Care Unit (ICU) status COVID-19 patients will remain in isolation for duration of ICU encounter. Discontinuation of isolation precautions will be made when Attending agrees patient has met recovery criteria in coordination with the Infection Prevention and Control department.*

COVID-19 patients with confirmatory laboratory testing on acute care status are considered recovered and isolation precautions can be discontinued if the following criteria are met:

- At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
- At least 14 days have passed since first diagnostic test.

Patients on acute-care status with high suspicion of having COVID-19 without confirmatory laboratory testing are considered recovered and can be removed from isolation when the following criteria are met:

- At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
- At least 14 days have passed since symptoms first appeared.

<sup>1</sup> **Aerosol Generating Procedures Include, but Are Not Limited to:** non-invasive ventilation, CPR, bronchoscopy, open suction, nasotracheal suction, nebulizer treatments (without a filtered tent), high flow oxygen  $\geq 15$  lpm

<sup>2</sup> **Shorter timeframes after AGP may be recommended in specific OR/Procedural areas. Consult "Perioperative and Procedural Care of the Unknown, Suspected or Positive COVID-19 Patient" policy**

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