MODIFIED Contact/Droplet Isolation

Place patient in private room/space with door closed

The following Personal Protective Equipment (PPE) is required to enter the room:

Gloves

Isolation Gown

N95 respirator or equivalent and Eye Protection







In Addition to Standard Precautions:

- Patient Source Control: Patient should don a mask when anyone enters the room if possible
- Clean Hands before entering the room, when leaving the room, and after doffing PPE
- **Don** gloves, disposable yellow gown or reusable, and N95 respirator or equivalent and eye protection
- Remove all supplies from the room
- Dedicate non-critical items
- Clean and Disinfect All Equipment before it leaves room with an EPA approved disinfectant
- Restrict Movement of Patient: Transport only if absolutely necessary
- Restrict Visitors

If aerosol generating procedure will be performed (refer to back for list of AGP):

- Don gloves, disposable yellow gown or reusable, and N95 respirator or equivalent and eye protection
- Remove all supplies from the room
- Place patient in private room/space with door closed
 - o Priority 1: Negative-pressure room preferred
 - o Priority 2: Portable HEPA filtration device (air scrubber)
 - o Priority 3: Private room without HEPA device (if priority 1 & 2 are not available)
 - o Priority 4: If negative pressure/private room/HEPA not available, see cohort tool on the intranet

DO NOT REMOVE SIGN UNTIL ROOM HAS BEEN CLEANED

POTENTIAL AEROSOL-GENERATING PROCEDURES LIST

Aerosol Generating Procedures (AGPs) have the potential to generate small particles into the air that can be inhaled by anyone in the room during the procedure and for a period of time following the procedure. These particles may contain respiratory viruses, including influenza and COVID-19, from an infected patient.

Procedures that may be performed on Med/Surg Units:

- Manual ventilation before intubation
- Endotracheal intubation
- CPR
- Extubation
- Nebulized medication administration
- Non-invasive ventilation (BIPAP & CPAP)
- High-flow oxygen (\geq 6 liters)
- High-frequency oscillating ventilation
- Open deep (not oral) suctioning
- Sputum induction
- Bronchoscopy
- Chest tube for pneumothorax or hydropneumothorax
- Nasogastric / orogastric tube placement

Procedures that may be performed in procedure areas or in the or:

- PFT (pulmonary function test)
- Dental procedures with high-speed drilling
- Thoracentesis / pleural catheter placement
- Any procedure where an urgent/emergent NG/OG tube placement may be needed
- Gastrostomy / gastro-jejunostomy tube placement
- Jejunostomy
- Nasal and sinus surgery
- Transsphenoidal pituitary surgery
- Laryngectomy
- Tracheostomy
- Transesophageal echocardiography (TEE)
- Upper/lower GI and ENT endoscopy
- Lung biopsy / ablation
- Other biopsy / procedure where operators would be in close proximity to the patient's face, with risk for coughing
- Other solid organ ablation
- Bronchial artery embolization
- Cough-assist devices (metaneb, aerobika, etc.) and procedures used to induce coughing
- Autopsy involving high-speed devices
- Hydrogen Breath Tests
- Other procedures that may require active suctioning of a non-intubated patient (generally procedures with less stable patients requiring conscious sedation)