



AEROSOL CONTACT PRECAUTIONS

Visitors check in with staff before entering.

APPROVED VISITORS ONLY

For source control, ask resident to don mask if tolerated when healthcare workers/visitors are present.

PRIOR TO ENTERING:



Wash or gel hands



Wear gown and gloves



Use a NIOSH respirator (N95/PAPR/CAPR)



Wear eye protection face shield or goggles

OTHER REQUIREMENTS:



Use an Airborne-Infection Isolation Room (AIIR) per facility guidelines if available.

Resident's door should remain closed when possible until precautions are discontinued unless it impacts resident's safety (e.g., fall risk). Follow appropriate air exchange times per facility guidelines after Aerosol Generating Procedures (AGP).



Use resident dedicated or disposable equipment. Clean and disinfect shared equipment per manufacturer instructions.

Sign to be removed by Environmental Services after precaution discontinuation and room cleaned.

AEROSOL CONTACT PRECAUTIONS

RESTRICTED VISITATION DEPENDING ON CONDITION: Staff should provide visitors with appropriate education and PPE per facility policy.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Steps below are reflective for all PPE, gather only PPE as listed on first page, in addition to other PPE per Standard Precautions.

If wearing a Controlled Air Purifying Respirator (CAPR) or Powered Air Purifying Respirator (PAPR), follow manufacturer's instructions to don and doff correctly.

Putting on PPE (Donning)	Taking off PPE (Doffing)
<ol style="list-style-type: none">1. Perform hand hygiene.2. Put on an isolation gown, secure ties/straps.3. Put on respirator or face mask, ensure appropriate and well fitting.4. Put on a face shield or goggles.5. Put on gloves.	<ol style="list-style-type: none">1. While in the resident's room, remove gloves without contaminating hands.2. Remove gown - Untie/unsnap ties, break ties if applicable for disposable gowns. Remove by grabbing one shoulder at a time to remove each arm, continue to pull gown down and away from the body. Roll gown as it is removed and place in the proper receptacle. You may now exit the room.3. Upon exit, perform hand hygiene (use soap & water if visibly soiled, encountered stool or were in Contact Enteric Precautions).4. Remove face shield/goggles - avoid touching the front of eye protection that may be contaminated.5. Remove and properly handle respirator/face mask – avoid touching the front that may be contaminated and dispose or decontaminate as appropriate.6. Repeat hand hygiene.

FOR USE WITH CONDITIONS SUCH AS (refer to facility policy):

- Novel respiratory viruses, including COVID-19
- Mpox Virus

RESIDENT PLACEMENT

- Place resident in private room. If not available, follow facility guidelines for cohorting.

DISHES & UTENSILS

- No special precautions. Kitchenware sanitized in dishwasher.

LINEN & WASTE MANAGEMENT

- Bag linen in resident's room. Avoid excessive handling and do not shake linen. For biohazard waste, follow Category B Medical Waste guidelines.

ROOM CLEANING

- Before cleaning resident's room, keep door closed for two hours or *as per facility guidelines for AIIRs*.
- Use routine cleaning procedures with addition of privacy curtain changes per facility procedure.

EQUIPMENT & SUPPLIES

- Only essential equipment and supplies in the room.
- Use dedicated or disposable equipment when available.
- Clean and disinfect reusable equipment/resident's room with disinfectant per facility policy.

TRANSPORT

- Alert receiving unit, medical transport or hospital about resident's isolation precaution status.
- Resident's hands, clothes and equipment should be clean.
- Have resident wear a surgical mask.
- Transporter: Remove PPE and clean hands prior to exiting resident's room. If direct contact is likely during transport, appropriate PPE should be worn.
- Clean and disinfect transport vehicle per policy.

Discontinue isolation per Facility Policy