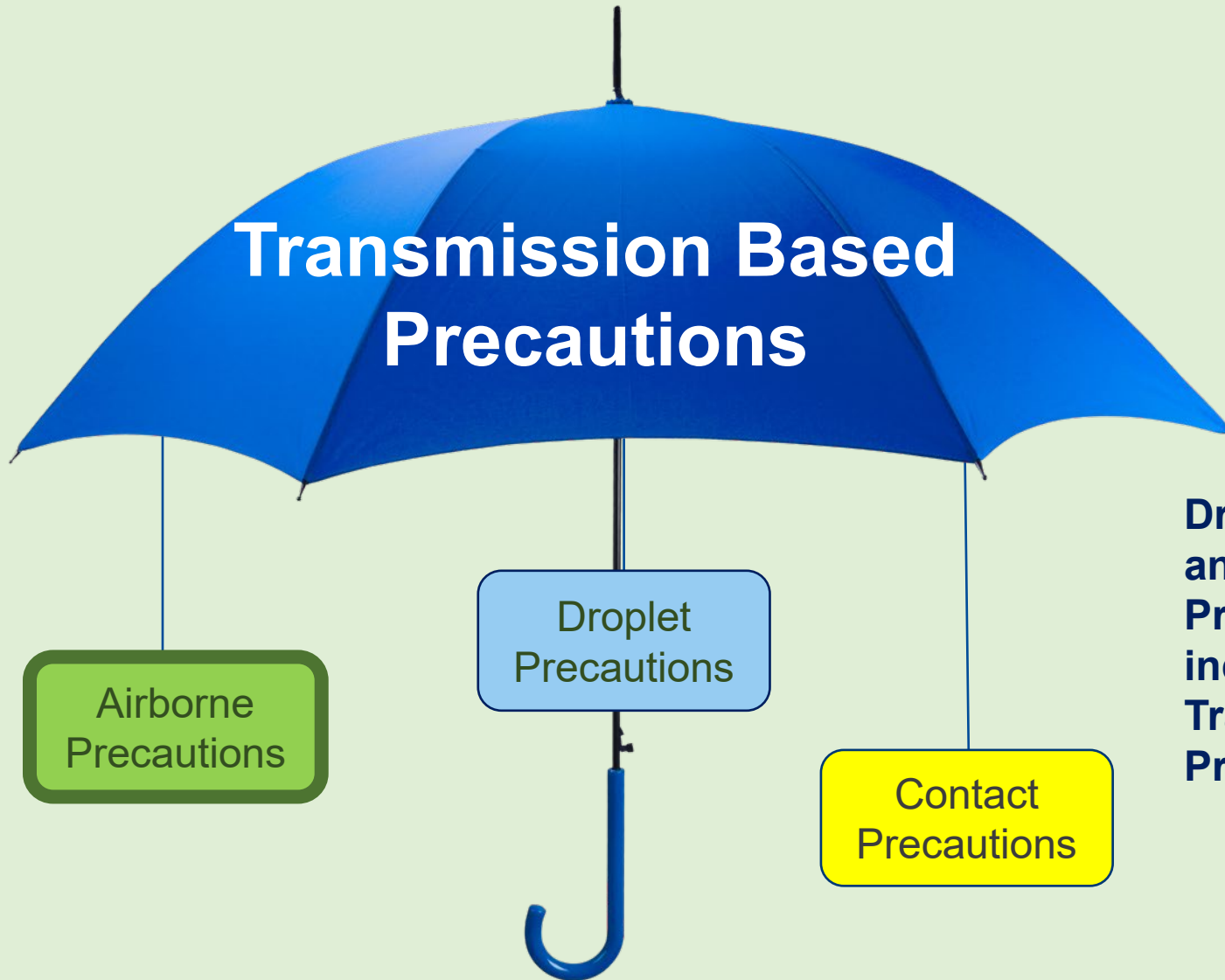


Airborne Precautions



Transmission-Based Precautions are the second tier of basic infection control.

They should be used **in addition to Standard Precautions** for patients who may be infected or colonized with certain infectious agents.



Droplet, Contact and Airborne Precautions are all included in Transmission Based Precautions.

www.cdc.gov/infection-control/hcp/basics/transmission-based-precautions.html#:~:text=Transmission-Based%20Precautions%20are%20the,needed%20to%20prevent%20infection%20transmission.



Airborne transmission

occurs when infectious agents are carried by dust or droplet nuclei suspended in air.

Airborne dust includes:

- material that has settled on surfaces and become resuspended by air currents
- infectious particles blown from the soil by the wind.

www.cdc.gov/infection-control/media/pdfs/Guideline-Isolation-H.pdf



AIRBORNE PRECAUTIONS



Everyone Must:

- Clean their hands often, including before entering and when leaving the room.
- Put on a mask to cover nose and mouth before entering, and remove when leaving.

Providers & Staff Must:

BEFORE ENTERING ROOM



Perform hand hygiene



Put on N95 or higher-grade respirator



Perform a fit check of the mask



Door should remain closed

UPON LEAVING ROOM



Dispose of mask



Perform hand hygiene

Gloves, gown, and eye protection per standard precautions.



Use **Airborne Precautions** for patients known or suspected to be infected with pathogens transmitted by the airborne route.

Examples include:

tuberculosis
measles
chickenpox
disseminated herpes zoster

Personal Protective Equipment

A particulate respirator **must** be worn by anyone entering the patient's room that is on airborne precautions. A particulate respirator (e.g. N95) should be donned prior to entry into a room with Airborne Precautions.

An N95 respirator requires appropriate fit-testing done by trained personnel.

With a particulate respirator, perform a fit-check before entering an area where there may be airborne infectious disease.



N-95 User Seal Check

A user seal check (sometimes referred to as a fit check) is a procedure conducted by the respirator wearer to determine if the respirator is being properly worn. The user seal check can either be a positive pressure or negative pressure check.

A user seal check should be completed each time the respirator is donned (put on). It is only applicable when a respirator has already been successfully fit tested on the individual.



Helpful Strategies and Recommendations

Source Control

Put a mask on the patient.



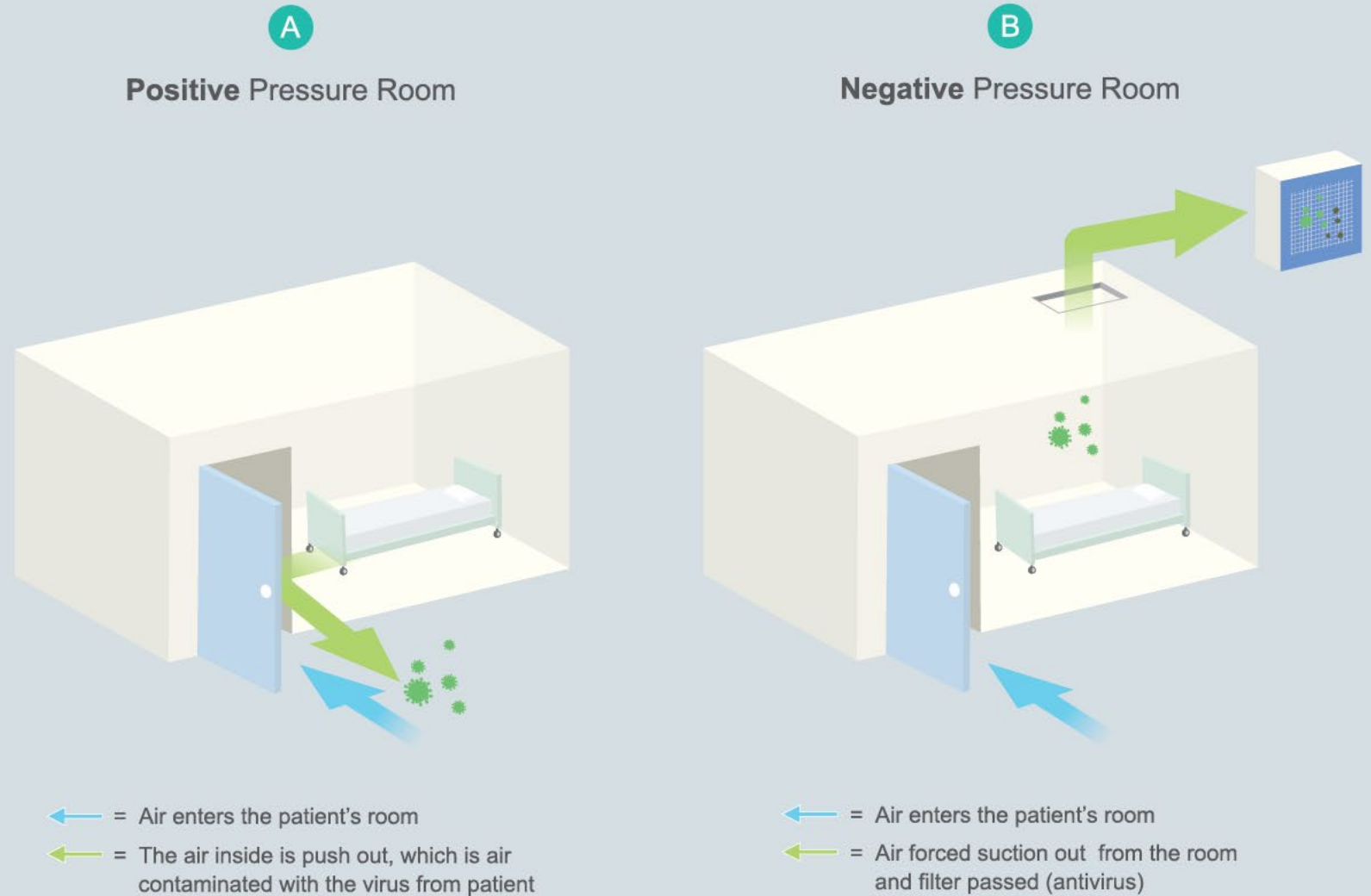
Staffing

- **Restrict susceptible healthcare personnel from entering the room** of patients known or suspected to have measles, chickenpox, disseminated zoster, or smallpox if other immune healthcare personnel are available.
- **Use personal protective equipment (PPE) appropriately**, including a fit-tested NIOSH-approved N95 or higher-level respirator for healthcare personnel.



Airborne Infection Isolation Rooms

Ensure appropriate patient placement in an airborne infection isolation room (AIIR) constructed according to the Guideline for Isolation Precautions.



Limit transport and movement of patients outside of the room to medically-necessary purposes.

If transport or movement outside an AIIR is necessary, instruct patients to wear a surgical mask, if possible, and observe Respiratory Hygiene/Cough Etiquette.



Immunize susceptible persons as soon as possible following unprotected contact with vaccine-preventable infections (e.g., measles, varicella or smallpox)



QUESTIONS?



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