Isolation Precautions

Take proper precautions to prevent the spread of infection in the health care setting.

Standard Precautions

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions except sweat, non-intact skin, and mucous membranes may contain transmissible infectious agents. Standard precautions are the minimal protection that should be used to care for all patients at all times to protect health care workers and to prevent spread from health care worker to patient. They apply to all patients, regardless of suspected or confirmed infection status in all health care settings.

Hand Hygiene

- After touching blood, body fluids, secretions, excretions, and contaminated items
- Immediately after removing gloves and before and after patient contact

Personal Protective Equipment (PPE)

- Gloves: for touching blood, body fluids, secretions, excretions, contaminated items, mucous membranes, and non-intact skin
- Gown: during procedures and patient care activities with anticipated exposure of skin/clothes to body fluids, secretions, excretions
- Mask/eye protection: during procedures and patient care activities with anticipated splashes or sprays of blood, body fluids, or secretions

Safe Injection

- Needles and syringes are single-use devices
- Limit use of multi-dose vials, and dedicate to a single patient, when possible

Safe Handling

- Potentially contaminated equipment or surfaces in the patient environment
- Environmental cleaning and disinfection, per facility policy

Respiratory Hygiene

- Tissue disposal in no-touch receptacles
- Hand hygiene after soiling hands with respiratory secretions
- Use mask or maintain spatial separation (> 3 feet) if possible

Transmission-based Precautions

Transmission based precautions provide additional infection control measures based on disease specific recommendations and should always be used in addition to standard precautions.
Contact Precautions
Contact precautions are used to prevent transmission of infectious organisms spread by direct or indirect contact with the patient or the patient’s environment. They are recommended when the presence of excessive wound drainage, fecal incontinence, or other discharges from the body suggest an increased risk for environmental contamination and transmission of infection. Contact precautions include:

- Private room or cohort
- Clean, nonsterile gloves when entering the room, remove before exiting
- Clean, nonsterile gown when entering the room if substantial contact with the patient or potentially contaminated areas in the patient’s environment is anticipated; remove before exiting
- Limit transport to essential purposes and ensure precautions are taken to minimize contamination of environmental surfaces and equipment
- When possible, dedicate the use of noncritical patient care equipment to a single patient and avoid sharing between patients

Droplet Precautions
The goal of droplet precautions is to prevent transmission of infectious organisms spread by droplets (> 5 microns) through close respiratory or mucous membrane contact with respiratory secretions via coughing, sneezing, talking, or droplet-inducing procedures. Droplet precautions include:

- Private room or cohort
- Special air flow is not needed, and door may remain open
- Wear mask (surgical or isolation) if working within 3 feet of the patient (note: some facilities require mask for all entries into the room)
- Droplet mask on patient when leaving room, if tolerated
- Limit transport to essential purposes only
- Follow respiratory hygiene/cough etiquette
- Gown and gloves as per standard precautions and facility policy

Airborne Precautions
Airborne precautions prevent transmission of infectious disease that are spread by airborne droplets (≤ 5 microns) that remain infectious and suspended in air for long periods of time over long distances and can be widely dispersed by air currents. Airborne precautions include:

- Private room with monitored negative pressure ventilation of 6-12 air exchanges per hour; airborne infection isolation room (AIIR) preferred
- Discharge of air to the outside or HEPA-filtered before recirculation
- Door and windows must be kept closed at all times
• Respiratory protection (usually an N-95 mask) for susceptible persons must be worn prior to entering room and removed after leaving room
• Droplet mask on patient when leaving room if tolerated; follow respiratory hygiene/cough etiquette
• Limit transport to essential purposes only
• If possible, non-immune healthcare workers should not care for patients with vaccine-preventable airborne diseases

Reference: