EDUCATIONAL TOOL

FOR

STANDARD AND ISOLATION PRECAUTIONS

What are precautions?

Precautions are special behaviors and engineering controls that are used to protect your patients and yourself from coming in contact with potentially harmful germs.

Engineering Controls are one of the steps for hazard control. Engineering controls are a preferred strategy because they can remove the hazard or exposure to the “hazard” at the source. Examples of engineering controls in an assisted living environment are personal protective equipment (PPE) such as masks, gloves and gowns.

The origin of precautions date back as far as the middle ages. They were initially used in the 14th century in the context of quarantine for ships coming to Italy from areas known to be infected. The ships had to anchor for 40 days before docking to protect people from the plague (a disease that affects humans and other mammals caused by a bacteria or virus). In the early 1900's they were used as barrier precautions for patients with infections in acute care settings (hospitals) and later were extended to non-acute care facilities such as long term care facilities and assisted living facilities.

When do I use precautions?

Standard Precautions should be used when working with all patients. They were initially referred to as Universal Precautions and were developed to provide protection in the face of the AIDS epidemic when it was identified that the virus could be transmitted by and now referred to as Standard Precautions are used for protection from coming in contact with a patient/person's blood and body fluid.

There are other types of isolation precautions used depending on the disease that the person has and how it is spread.

Contact Precautions are used when “contact” or touching the area of the person infected can cause transmission or a place where germs have potential to enter someone else’s body, multiply and cause illness. Portals of entry or places where germs can enter the body are mucous membranes such as an eye or mouth and also breaks in skin such as a cut. When a person is placed on contact precautions it is important to prevent direct contact with the area that is infected or could be contaminated because of the patient’s routine activities. An example of an infection requiring contact precautions is an eye infection. The person may rub their eye because it itches and then fold their hands without washing them. They may touch surfaces such as their phone and transfer the germs to that environmental surface. If someone else touches the area of infection or a surface that has been contaminated and the germ is able to enter the body because the care taker rubbed their eye they too may become infected. This could be avoided by the use of PPE and conscientious hand hygiene. Therefore the personal protective equipment used depends on the activity that is being performed. The most common PPE used are gloves, gowns and (eye protection and mask if splashing is likely). The care taker should
assess the situation and decide what PPE is needed to avoid exposure.

**Droplet Precautions** are used when contaminated aerosols or body fluid substance can be released from the person as a spray. Examples of when aerosols can be released is when a person is singing, sneezing and or coughing. This type of precaution requires the caretaker to wear a medical mask to avoid inhaling aerosols or droplets. If the patient is required to be outside their private space and there is a possibility of coming in contact with others, a medical mask should be placed on the patient unless doing so would restrict their breathing.

**Airborne Precautions** are put in place when a person is infected with an infectious disease that is caused by a very small infectious organism or germ. The germ is so small and light when released from the body when breathing or by creating aerosols the germs can stay suspended in the air for a significant distance amount of time and distance. This could pose a risk for others who are breathing in air from the same environment. This type of precaution typically requires the person to be restricted to their room with the door closed. If the patient is required to be outside of their private space and there is a possibility of coming in contact with others, a medical mask should be placed on the patient unless doing so would restrict their breathing. There may be special situations when a facility has a ventilation system that keeps the air in the room and transfers it out without circulating it to other areas. When taking care of someone with an illness transmitted by the airborne route may require the caretaker to wear a more substantial mask called an N95 mask. An N95 mask uses layers of fiber that entrap the small germs preventing them from entering into the caretakers body.

**Please note:**

- As diseases are introduced or have developed as novel or new diseases, precautions and PPE may require specific recommendations as was the case with COVID-19.

- It is very important for the caretaker, patient and others to be conscientious and mindful of precautions that are put into place.

- It is also very important for the caretaker to be aware of the proper way of donning (putting on) PPE and doffing (removing PPE) to achieve the most effective protection and avoid contaminating oneself when removing the PPE. Disposal must be done promptly and into an appropriate receptacle as specified by the facility. Thorough hand hygiene is an important requirement.
STANDARD AND ISOLATION PRECAUTIONS EDUCATIONAL TOOL POST QUESTIONNAIRE

1. What are the four types of precautions discussed in the educational tool?

2. What PPE may be used for someone who has been placed on droplet precautions aside from what is required for Standard Precautions?

3. True or False: All types of precautions require the use of a medical mask.

TRUE OR FALSE

4. When Droplet Precautions are implemented for a patient: (check all that apply)

• An N95 masks is required for the care taker •
• Droplets can be aerosolized into the air by coughing, sneezing and dancing •
• When a patient is on droplet precautions an effective engineering control to be implemented when the patient may be around others is to place a mask on the patient unless it restricts their breathing further •
• Hand hygiene is not necessary to perform after removing PPE •
• If a care taker has to enter a patients room who is on droplet precautions for a brief minute it is acceptable for the care taker to hold their breath instead of wearing a mask since it is for such a short duration •