
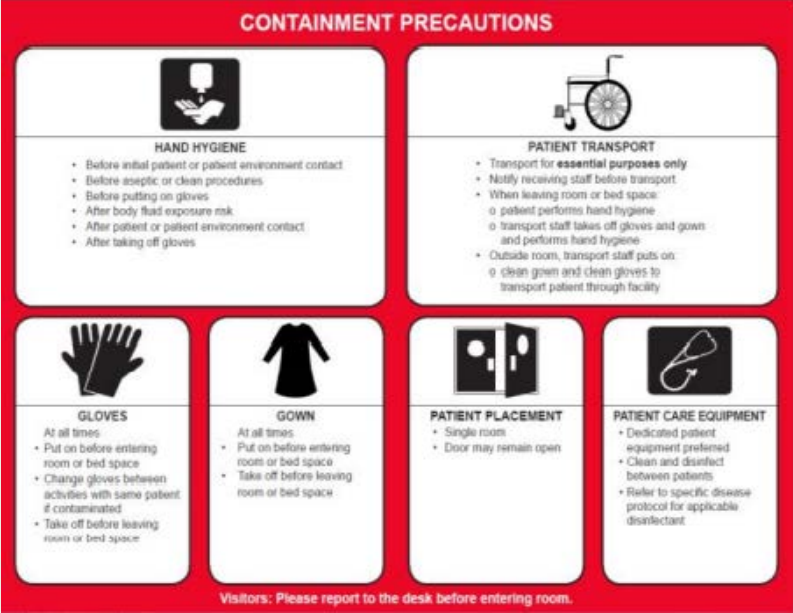



## Antimicrobial Resistant Gram Negative Bacilli (AMR GNB) SPECIFIC DISEASE PROTOCOL

*Gram-negative bacilli commonly encountered in healthcare settings include species such as *Pseudomonas aeruginosa*, *Acinetobacter spp.* and *Stenotrophomonas maltophilia*, and species belonging to the Enterobacterales family, such as *Escherichia coli*, *Klebsiella pneumoniae*, and *Enterobacter cloacae*. There is an increasing occurrence of antimicrobial resistance in Gram-negative bacilli across all continuums of care.*

### Infection Prevention & Control Measures

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
<b>ROUTINE PRACTICES</b>	AMR GNB transmission may be prevented by following good <a href="#">hand hygiene</a> , and other <a href="#">Routine Practices</a> at all times. Refer to the Routine Practices section of the <a href="#">Infection Prevention and Control Manual</a> and/or the Routine Practices Policy for specific information.			
<b>CONTAINMENT</b>	  and <b>notify</b> site Infection Control Professional (ICP)	The need for <a href="#">Containment Precautions</a> to be determined in consultation with the Infection Control Professional (ICP) based on a risk/benefit assessment. Infection Control Support Associate (ICSA) should be notified of decision.	<b>CLINIC SETTING</b>  Perform a Point of Care Risk Assessment (PCRA) for routine care. See <a href="#">Appendix B for more details</a>  Implement Contact Precautions where invasive procedures performed (e.g.'s wound clinics, vascular clinics)	<b>HOME SETTING</b>  N/A

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY		
SIGNAGE	 <p>The signage is a red-bordered poster titled "CONTAINMENT PRECAUTIONS". It is divided into six sections with icons and text:</p> <ul style="list-style-type: none"> <li><b>HAND HYGIENE:</b> Icon of hands being washed. Text: Before initial patient or patient environment contact; Before aseptic or clean procedures; Before putting on gloves; After body fluid exposure risk; After patient or patient environment contact; After taking off gloves.</li> <li><b>PATIENT TRANSPORT:</b> Icon of a wheelchair. Text: Transport for essential purposes only; Notify receiving staff before transport; When leaving room or bed space: patient performs hand hygiene; transport staff takes off gloves and gown and performs hand hygiene; Outside room, transport staff puts on: clean gown and clean gloves to transport patient through facility.</li> <li><b>GLOVES:</b> Icon of gloves. Text: At all times; Put on before entering room or bed space; Change gloves between activities with same patient if contaminated; Take off before leaving room or bed space.</li> <li><b>GOWN:</b> Icon of a gown. Text: At all times; Put on before entering room or bed space; Take off before leaving room or bed space.</li> <li><b>PATIENT PLACEMENT:</b> Icon of a door. Text: Single room; Door may remain open.</li> <li><b>PATIENT CARE EQUIPMENT:</b> Icon of a stethoscope. Text: Dedicated patient equipment preferred; Clean and disinfect between patients; Refer to specific disease protocol for applicable disinfectant.</li> </ul> <p>Visitors: Please report to the desk before entering room.</p>			CLINIC SETTING  optional	HOME SETTING  n/a
HAND HYGIENE	<p><b>CLEAN YOUR HANDS</b> according to the <a href="#">4 moments of Hand Hygiene</a>:</p> <p><b>Moment 1: BEFORE</b> initial patient/resident/client (PRC) or PRC environment contact</p> <p><b>Moment 2: BEFORE</b> aseptic/clean procedure</p> <p><b>Moment 3: AFTER</b> body fluid exposure risk</p> <p><b>Moment 4: AFTER</b> PRC or PRC environment contact</p>				

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY
<p><b>PERSONAL PROTECTIVE EQUIPMENT (PPE)</b></p>	<p>Store PPE outside the room or in anteroom if available.</p> <p>Perform <a href="#">hand hygiene</a> before putting on PPE.</p> <p><b><u>PPE for Containment Precautions includes:</u></b></p> <ol style="list-style-type: none"> <li> <p><b><u>Gloves – at all times</u></b></p> <ul style="list-style-type: none"> <li>✓ <b>Wear gloves</b> to enter the room even if no contact with the person on Containment Precautions or their environment is anticipated</li> <li>✓ <b>Remove gloves; dispose and perform <a href="#">hand hygiene</a></b> on exit from room</li> <li>✓ <b>Change gloves and perform</b> hand hygiene between care activities and procedures with the same person (e.g. after handling an indwelling urinary catheter or suctioning an endotracheal tube). This prevents contamination of clean body sites and the environment.</li> <li>✓ <b>Perform</b> hand hygiene after glove removal</li> </ul> </li> <li> <p><b><u>Long-Sleeved Gowns – at all times</u></b></p> <ul style="list-style-type: none"> <li>✓ <b>Wear a long sleeved gown</b> to enter the room even if no contact with the person on <a href="#">Containment Precautions</a> or their environment is anticipated</li> <li>✓ <b>Do not</b> wear the same gown on repeated occasions (e.g., do not remove then reapply the same gown)</li> <li>✓ <b>Do not</b> wear the same gown for more than one patient</li> <li>✓ <b>Remove and replace</b> the gown if it becomes wet or visibly soiled</li> <li>✓ <b>Remove the gown, dispose after use and perform <a href="#">hand hygiene</a></b> before leaving the room</li> <li>✓ <b>Do not</b> carry any PPE in pocket(s)</li> </ul> </li> </ol> <div style="text-align: right; margin-top: 20px;">  <p><b>Faith or cultural head covering do not require covering or removing</b></p> </div>		

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
<p><b>Accommodation</b></p>	<p>Put patient in a single room with a private toilet (or designated commode chair).</p> <p>Door may remain open.</p>	<p>Where possible, accommodate resident in a single occupancy room with dedicated toileting.</p> <p>If a single occupancy room is not available, with consultation with IP&amp;C select roommate:</p> <ul style="list-style-type: none"> <li>Who does not have a urinary catheter or requires frequent catheterization. Either the resident with AMR GNB or the roommate should not be ambulating and/or sharing the washroom.</li> </ul> <p>See <a href="#">Appendix A- Table 1</a> for more detail</p> <p>Door can remain open.</p> <p>Resident may leave room if managed with Routine Practices and PCRA. Ensure they have clean hands, clean clothes and contained drainage/body fluids.</p> <p>See <a href="#">Appendix A – table 2</a> for more detail</p> <p>Assist with <a href="#">hand hygiene</a> as necessary.</p> <p>If the resident is managed with Containment Precautions for an extended period of time may have restrictions individualized based on assessment of the risk of transmission.</p> <p>See Appendix A – <a href="#">Table 1</a> and <a href="#">Table 2</a> for more details</p> <p>AMR GNB positive residents should only use their own dedicated toileting facilities. Public bathrooms may be dedicated for urgent resident use if required. Immediately after use, the staff member should secure the bathroom until an isolation discharge clean is performed.</p>	<p><b>CLINIC SETTING</b></p> <p>Escort person with AMR GNB to a private clinic room as soon as possible.</p> <p>Ensure regular cleaning of high touch surfaces between all clinic appointments occurring</p>	<p><b>HOME SETTING</b></p> <p>N/A</p>

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY
<p><b>ENVIRONMENT/ EQUIPMENT CLEANING</b></p>	<p><b>Clean and disinfect</b> all horizontal and frequently touched surfaces daily, and immediately when soiled. When more than one AMR GNB positive patient resides on a unit or if transmission of AMR GNB is a concern, arrange for a minimum of twice daily cleaning on frequently touched surfaces.</p> <p>Resistance to antibiotics is not an indication for using more concentrated solutions of disinfectants. Current disinfection protocols will be effective if they are properly carried out and performed using friction (scrubbing) and thorough cleaning and disinfection of frequently touch surfaces, daily and immediately when visibly soiled.</p> <p><b>Do not take</b> cleaning equipment/supplies from room to room.</p> <p>When cleaning a <a href="#">Containment Precautions</a> room, ensure equipment are either discarded or reprocessed as appropriate.</p> <p>Pay particular attention to sink cleaning and disinfection.</p> <p>Dedicate PRC care equipment.</p> <p>PRC and family/visitors are <b>not</b> to access common/shared patient care areas (kitchen, cafeteria).</p> <p>The Outbreak Management Team may recommend more extensive and frequent cleaning during an outbreak.</p>		
<p><b>ADMISSION SCREENING</b></p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY
<p><b>PATIENT TRANSPORT</b></p> <p><b>I. Transport within facilities</b></p> <p><b>II. Transport between facilities</b></p> <p><b>III. Discharge</b></p>	<p>I. <b>Patient must remain</b> in room unless medically indicated.  <i>Resident</i> may leave room. See <a href="#">Appendix A-Table 2</a> for more details  <b>Notify</b> receiving unit/clinic/site in advance of required <a href="#">Containment Precautions</a>.  <b>Perform tests and procedures</b> in the patient/resident room whenever possible.</p> <p>If the patient/resident's bed or personal wheelchair is used for transport, wipe the steering handles and side rails with disinfectant and allow required wet contact time before removing it from the room.</p> <p>After preparing the patient for transport, <b>remove gown and gloves before leaving the room</b> and <b>perform <a href="#">hand hygiene</a></b>.</p> <p>Disinfected handles of the transport chair or stretcher or the patient bed are considered clean until gloves have direct contact with the patient or patient equipment.</p> <p>During procedures, a healthcare worker in contact with the patient <b>must maintain</b> Containment Precautions. A dedicated clean person may be used to minimize environmental contamination.</p> <p>II. <b>Notify receiving facility in advance of need for containment precautions.</b></p> <p><b>Document</b> the status of an AMR GNB Positive patient on the patient/resident's <a href="#">Inter-Facility Transfer Referral Form</a></p> <p>III. Tell the patient/resident it is important for them to <b>inform</b> any health care worker of their AMR GNB status. <b>Follow <a href="#">Containment Precautions</a></b> inside the patient room and after leaving the room.</p>		<p>Follow the <a href="#">Four Moments of Hand Hygiene</a> and Perform a <a href="#">PCRA</a></p>

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY
<p><b>PATIENT TRANSPORT</b> (cont'd)</p> <p><b>IV. Day Pass</b></p>	<p><b>IV. Precautions <b>required</b> for Patients</b></p> <ul style="list-style-type: none"> <li>• Cover all wounds</li> <li>• Patient performs <a href="#">hand hygiene</a> on leaving room</li> <li>• Patient is not required to wear gloves following hand hygiene</li> <li>• The patient wears clean clothes</li> </ul> <p><b>Precautions for Health Care Worker and Visitors Accompanying Patient</b></p> <ul style="list-style-type: none"> <li>• A separate HCW transports the patient to the door of the facility they are leaving.</li> <li>• The HCW accompanying the patient on the home visit meets the patient at the door of the facility they are leaving.</li> <li>• HCWs and visitors wear a gown and gloves</li> <li>• Alcohol-based hand rub must be available for hand hygiene of patient and HCW during visit</li> <li>• Bag, clean, and disinfect any equipment taken on the visit according to facility policy after return to the facility and before use by another patient.</li> </ul>		

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
<p><b>EQUIPMENT AND SUPPLIES</b></p>	<p><b>Dedicate</b> patient care equipment to patients on <a href="#">Containment Precautions</a>.</p> <p>If reusable equipment must be used, <b>clean and disinfect</b> with <a href="#">Facility-Approved Disinfectant</a> before removal from room.</p> <p>Keep minimal supplies in patient/resident room. <b>Do not overstock.</b></p> <p><b>Use</b> dedicated personal supplies (e.g., combs, razors, lotions, creams, and soaps).</p> <p><b>Discard</b> supplies that cannot be disinfected or sterilized when patient is discharged, deceased, or Containment Precautions are discontinued.</p> <p><b>Upon discharge</b>, bag personal articles that cannot be disinfected (e.g., books, magazines, toys, playing cards) and give to the patient or discard.</p>		<p><b>Clinic Setting</b></p> <p>Keep minimal supplies in the clinic room.</p> <p><b><u>Do not overstock</u></b></p>	<p><b>Home Setting</b></p> <p>Keep minimal supplies in the home.</p> <p><b><u>Do not overstock</u></b></p>
<p><b>HANDLING THE PATIENT CARE RECORD</b></p>	<p><b>Use</b> <a href="#">Facility-Approved Disinfectant</a> to clean and disinfect the cover if it is contaminated.</p> <p>If the health record must accompany the patient for tests or treatments, place in a protective cover (i.e., plastic bag) to prevent contamination. Otherwise, have a dedicated staff person carry the chart.</p> <p>If the Medication Administration Record (MAR) enters in the patient's room, wipe the external surface of the MAR binder with facility approved disinfectant when it leaves the patient room.</p>			



ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY
<b>CONTACT FOLLOW-UP</b>	<p>Screening of contacts is not recommended.</p> <p>Screening may be considered during an outbreak as directed by IP&amp;C in discussion with the laboratory.</p>		
<b>TEACHING Fact sheets</b>	<p style="text-align: center;"><b>AMR GNB Fact Sheet</b></p>		
<b>HANDLING OF DECEASED BODIES</b>	<p>Follow <a href="#">Containment Precautions</a>.</p> <p><b>Place clean sheet</b> on transfer stretcher before entering deceased patient's room.</p> <p><b>Put on PPE</b> while attending the body.</p> <p><b>Wrap the body</b> in a shroud and transfer to stretcher.</p> <p><b>Remove PPE</b> and <b>perform <a href="#">hand hygiene</a></b> upon leaving the room.</p> <p><b>Transport</b> body to the morgue.</p> <p><b>Perform</b> hand hygiene upon leaving the morgue.</p> <p><b>Clean</b> stretcher with <a href="#">Facility Approved Disinfectants</a>.</p>		

Element	Acute Care	Long Term Care	Community
<p><b>VISITORS/VISITING OTHER PATIENT</b></p>	<p>Visitors should be kept to a minimum.</p> <p><b>Perform <a href="#">hand hygiene</a> on entering and leaving the patient room.</b></p> <p>Visitors wear the same PPE as staff.</p> <p>Visitors who choose not to wear PPE <b>shall not be permitted</b> to visit:</p> <ul style="list-style-type: none"> <li>• other patients</li> <li>• common areas such as unit kitchen, linen room, play room</li> </ul> <p>Visitors who choose not to follow these restrictions <b>shall wear PPE.</b></p> <p>Direct visitors to <b>ask for assistance</b> in obtaining patient care supplies/items from shared spaces on the unit.</p>		
<p><b>DISCONTINUATION OF PRECAUTIONS</b></p>	<p><b>Maintain <a href="#">Containment Precautions</a></b> for duration of hospital stay, unless otherwise directed by IP&amp;C.</p> <p>Given the high probability for prolonged gastrointestinal, respiratory and/or skin carriage of AMR GNB and risk of transmission of these microorganisms, <b>caution must be exercised</b> when making decisions regarding discontinuation of Containment Precautions.</p> <p><b>Consult site ICP.</b> After hours, consult:</p> <ul style="list-style-type: none"> <li>• <b>Dr. Evelyn Lo</b> @ pager: 204-932-6538 for St. Boniface Hospital concerns</li> <li>• <b>Dr. John Embil</b> at HSC Switchboard 204-787-2071 for all other hospitals' concerns</li> <li>• <b>Attending Pediatric ID Physician</b> @ 204-787-2071 for pediatric concerns</li> </ul>		

## 1. EPIDEMIOLOGY / CAUSE

The increasing prevalence of antibiotic resistance is a threat to human health, particularly within vulnerable populations in healthcare settings.

Multidrug-resistance in gram-negative bacilli is generally defined as resistance to several classes of antimicrobial agents.

These bacteria are commonly found in the gut, where they do no harm; however, they can cause infection at other body sites, mainly in individuals who are vulnerable due to other underlying diseases, injury or hospitalization. Infection often happens when the bacteria enter the body through an open wound or via a medical device such as a catheter. Infections caused by multi drug resistant gram-negative bacilli are difficult to treat, and can cause additional pain to patients with slow wound healing and other complications such as pneumonia or infection in the blood. This can prolong the length of stay in hospital and, in some cases, can cause death.

Some types of resistant Gram-negative bacilli can be carried on the skin rather than the gut, again with no obvious signs or symptoms. Colonization describes this carriage of bacteria in the gut, on the skin or in the nose, throat or elsewhere on the body. Although the patients lack symptoms of infection, additional precautions are necessary in order to stop their resistant bacteria spreading to others.

## 2. SPECIAL CONSIDERATIONS

### Child Health/Neonatal Intensive Care Unit/Mother baby Unit

- [Containment Precautions](#) are required for all patients with suspected AMR GNB admitted to the neonatal intensive care unit (NICU).
- [Containment Precautions](#) are required for all NICU patients whose mother has suspected AMR GNB.
- [Containment Precautions](#) are required for all patients with confirmed AMR GNB or with a household/family member with confirmed AMR GNB.
- Family members, other than guardians, with AMR GNB should not visit.
- If the patient's guardian has AMR GNB, they should limit visits to their child only and go directly in and out of the nursery. Family requires a dedicated washroom in NICU.

### **Infant has AMR GNB:**

- [Containment Precautions](#) for infant
- [Containment Precautions](#) for mother
- Mother infant contact, breast feeding, and rooming-in permitted

### **Mother has AMR GNB:**

- Mother infant contact, breast feeding, and rooming-in permitted
- Mother uses [Routine Practices](#) for infant, mother may choose to use gown/blanket and perform diligent [hand hygiene](#), cover wounds if any present

### **Pediatrics Inpatient**

- If the patient or a household member has ever had a AMR GNB, move the patient immediately into a single room and implement [Containment Precautions](#).

### **Mental Health Unit**

- Follow [Routine Practices](#); [Containment Precautions](#) are not required
- AMR GNB Positive patients must perform [hand hygiene](#) regularly and before leaving the unit. This must be emphasized as compliance is sometimes not optimal due to the nature of the illness

## **3. ROUTE OF TRANSMISSION**

1. **Direct Contact** – e.g. healthcare worker hands
2. **Indirect Contact** – e.g. contaminated equipment, drains

#### **4. INCUBATION PERIOD**

The incubation period for exposure to illness onset is undefined. Individuals colonized with AMR GNB may remain asymptomatic if they are in good health and do not require medical interventions but can still act as a reservoir for transmission to others.

#### **5. PERIOD OF COMMUNICABILITY**

The period of communicability of AMR GNB persists as long as the organism is present in the gastrointestinal tract of the patient. Patients may be intermittently positive on repeat screening and may be colonized for months to years.

#### **6. SCREENING/SPECIMEN COLLECTION**

- Routine admission screening is not required
  - Screening of patients who are flagged as AMR GNB positive may be required, as directed by IP&C
- Screening for persistent carriage is not recommended. This may be considered on a case by case basis, as directed by IP&C in discussion with the laboratory
- Screening of contacts is not recommended. Screening may be considered during an outbreak as directed by IP&C in discussion with the laboratory
- If an outbreak occurs, screening may be appropriate, as directed by Infection Prevention and Control in discussion with the laboratory

#### **7. Occupational & Environmental Safety and Health (OESH)**

Contact OESH for staff assessment and/or concerns

## 8. REFERENCES

Centers for Disease Control and Prevention (2017). Management of Multidrug-Resistant Organisms in Healthcare Settings. Retrieved August 30, 2022 from the World Wide Web: <https://www.cdc.gov/infectioncontrol/pdf/guidelines/mdro-guidelines.pdf>

Provincial Infectious Diseases Advisory Committee (PIDAC). Annex A: Screening, Testing and Surveillance for Antibiotic-Resistant Organisms (AROs). (2013). Retrieved August 30, 2022 from the World Wide Web: <https://www.publichealthontario.ca/-/media/documents/a/2013/aros-screening-testing-surveillance.pdf>

Public Health Agency of Canada (2010). Guidance: Infection Prevention and Control Measures for Healthcare Workers in All Healthcare Settings. Carbapenem-resistant Gram-negative Bacilli Retrieved August 30, 2022 from the World Wide Web: <https://www.canada.ca/content/dam/phac-aspc/migration/phac-aspc/nois-sinp/guide/ipcm-mpci/pdf/guide-eng.pdf>

Tacconelli E, et al. ECSMID guidelines for the management of the infection control measures to reduce transmission of multidrug-resistant Gram-negative bacteria in hospitalized patients. Retrieved August 30, 2022 from the World Wide Web: [https://www.clinicalmicrobiologyandinfection.com/article/S1198-743X\(14\)60007-0/fulltext](https://www.clinicalmicrobiologyandinfection.com/article/S1198-743X(14)60007-0/fulltext)

## Appendix A

### Additional Precautions for Antimicrobial Resistant Gram Negative Bacilli (AMR GNB) in Long Term Care

**ARO status (Infection or Colonization) SHALL NOT prevent admission, a return to, or continued residence in a continuing care setting.**

- Consult your site specific or WRHA Infection Control Professional (ICP) or designate for assistance with challenging ARO positive resident placement.
- **ROUTINE admission testing or ROUTINE clearance testing for AMR GNB is NOT recommended.**

**NOTE:** The following recommendations are intended for non-outbreak situations. In an outbreak or situations of suspected and/or confirmed increased transmission, additional precautions should be considered in consultation with Infection Prevention and Control or designate, the site Medical Lead and Public Health.

#### **In addition to Routine Practices, determine Additional Precautions for AMR GNB Positive Residents:**

- Use Risk of Transmission of Microorganisms including AMR GNB ([Table 1](#))
- Additional precautions that may be required in acute care are generally not appropriate in continuing care.
- Use [Routine Practices](#) and the [Point of Care Risk Assessment \(PCRA\)](#) for all AMR GNB positive residents including those with AMR GNB colonization or infection of any body site or system when:
  - Wound drainage and body fluids (e.g. sputum, feces, urine, blood, etc.) are contained.
  - The resident is cooperative with practicing good personal hygiene and hand hygiene, unless there is an assessed higher risk of transmission of the microorganism.
- Assessment of the AMR GNB positive resident to determine the need for Additional Precautions will be performed by the person(s) designated by the site/facility. The long term care facility is the resident's home and precautions must be balanced with maintaining quality of life. Each AMR GNB positive resident must be assessed individually, balancing the risk of transmission of AMR GNB and the potential harm additional precautions may have on the resident.
  - Risks can change over time and individuals must be reassessed regularly, and as conditions behaviours and situations change.

**Table 1: Risk of Transmission of Microorganisms, Including AMR GNB**

RISK OF TRANSMISSION	ASSESSMENT OF RESIDENT	PLACEMENT AND PRECAUTIONS
<b>LOWER</b>	<ul style="list-style-type: none"> <li>• <b>Cooperative</b> (cognitively intact of impaired) but may need prompting/assistance with hand hygiene, toileting practices, changing soiled clothes, identifying when dressings or incontinence products are leaking</li> </ul> <p style="text-align: center;"><b>AND</b></p> <ul style="list-style-type: none"> <li>• <b>Contained</b> drainage/body fluids</li> </ul>	<ul style="list-style-type: none"> <li>• <a href="#">Routine Practices</a> with prompting/assistance as needed, no signs required.</li> <li>• <b>Private room</b> preferred.               <ul style="list-style-type: none"> <li>○ If private room not available, place with resident with same organism or lower risk roommate.</li> <li>○ <b>Lower risk roommate:</b> consistent good hand hygiene and good personal hygiene; intact skin; no invasive devices or open wounds; not dependent on staff for care; and no significant co-morbidities that make them vulnerable to infection.</li> </ul> </li> <li>• No restrictions in activities and dining room with clean clothing, clean hands and contained drainage/body fluids</li> </ul>
<b>HIGHER</b>	<ul style="list-style-type: none"> <li>• <b>Uncooperative</b> (cognitively intact or impaired) with prompting/assistance – e.g. unable or unwilling to perform hand hygiene, change soiled clothes or leaking dressings or incontinence products</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• <b>Uncontained</b> drainage or uncontained body fluids that regularly soil the environment</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Additional Precautions may be needed in addition to <a href="#">Routine Practices</a></b></li> <li>• Additional Precaution sign <b>required</b></li> <li>• Private Room               <ul style="list-style-type: none"> <li>○ If private room not available, place with resident with same organism or lower risk roommate.</li> <li>○ <b>Lower risk roommate(s):</b> consistent good hand hygiene and good personal hygiene; intact skin; no invasive devices or open wounds; not dependent on staff for care; and no significant co-morbidities that make them vulnerable to infection.</li> </ul> </li> </ul> <p>Attend group activities <a href="#">Table 2</a> and dining room <b>ONLY</b> with clean clothing, clean hands and contained drainage/body fluids</p>



**Table 2: May Residents Participate in Group Activities?**

ACTIVITY	RESIDENT COGNITIVE BEHAVIOR		
	AMR GNB positive resident (colonized or infected at any body side) and <b>cooperative</b> with performing hand hygiene and wearing clean clothes <b>and</b> body fluids or wound drainage are <b>contained</b> with clean dry incontinence products or clean dry dressings	AMR GNB positive resident (colonized or infected at any body site) and <b>uncooperative</b> or unable to perform hand hygiene or change soiled clothes <b>and</b> body fluids or wound drainage are <b>not contained and regularly soil</b> the environment	AMR GNB positive resident (colonized or infected at any body side) and with <b>symptoms of an acute infection</b> (e.g. infectious rashes, diarrhea, vomiting, coughing, runny nose, fever, etc.)
Dining Room	Yes	<b>Consult ICP or designate</b> <i>(Criteria for participating includes: ONLY with supervision and if cooperative with clean clothing, clean hands, and drainage/body fluids are contained)</i>	No
Group Recreational, Physiotherapy or Occupational	Yes		No
Ambulate Outside of Room	Yes		No
Food Handling Activities	Yes	No	No
Comments	All residents to preform hand hygiene (with assistance as needed) before leaving their room, before entering the dining room and before participation in each activity.		Restrictions should be discontinued when symptoms of acute infection have stopped.

Adapted from [Alberta Health Services](#)

## Appendix B

### Routine Practices with Additional Precautions for Antimicrobial Resistant Gram Negative Bacilli (AMR GNB) in Community Settings

RISK OF TRANSMISSION	ASSESSMENT OF RESIDENT	PLACEMENT AND PRECAUTIONS
<b>LOWER</b>	<ul style="list-style-type: none"> <li>No signs/symptoms of communicable diseases (e.g. fever, rash, diarrhea, cough)</li> <li><b>Cooperative</b>, but may need prompting or assistance with hand hygiene, toileting practices, etc.</li> <li><b>Contained</b> drainage of body fluids by wound care or incontinence products</li> </ul>	<ul style="list-style-type: none"> <li><a href="#">Routine Practices</a> with prompting/assistance as needed</li> </ul>
<b>HIGHER</b>	<ul style="list-style-type: none"> <li>Signs/symptoms of communicable diseases (e.g. fever, rash, diarrhea, cough)</li> <li><b>Uncooperative</b>, even with prompting or assistance (e.g. unable or unwilling to perform hand hygiene, change soiled dressings, incontinence products or clothes, etc.)</li> <li><b>Uncontained</b> drainage of body fluids that regularly soil the environment</li> <li>Severe, non-intact skin conditions with shedding or flaking skin (e.g. extensive dermatitis or psoriasis)</li> </ul>	<p><b>Additional Precautions Required</b></p> <ul style="list-style-type: none"> <li>Consider booking at end of day or during periods of low activity</li> <li>Individuals with suspected communicable disease should not sit in the waiting room and instead be moved to the exam/treatment space as quickly as possible</li> <li>Clean and disinfect high-touch surfaces and equipment following visit</li> </ul>

Adapted from [Alberta Health Services](#)