


# CONTACT PRECAUTIONS HIGHLIGHTS

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
SIGNAGE			Signage Optional	N/A
PPE (Personal Protective Equipment)	GLOVES and GOWN			
ACCOMMODATION	Single Room <u>Preferred</u>		Place in clinic room as soon as possible	N/A
	Door can remain open			
TRANSPORT	STAFF	<ul style="list-style-type: none"> <li>• Hand hygiene.</li> <li>• Use a clean wheelchair or stretcher, cover with a clean sheet.</li> <li>• Change to clean gown and gloves immediately before transport.</li> </ul>		N/A
	PERSON on CONTACT PRECAUTIONS	<ul style="list-style-type: none"> <li>• Clean clothes – NO isolation gowns or gloves.</li> <li>• Hand hygiene.</li> <li>• All wounds covered.</li> </ul>		N/A

## CONTACT PRECAUTIONS

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## CONTACT PRECAUTIONS PROTOCOL

### 1. INTRODUCTION

Contact Precautions are required for persons diagnosed with or suspected of having infectious microorganisms (germs) spread by the contact route. Contact spread occurs when microorganisms are transferred through physical contact between an infected source and a host, or through the passive transfer of the microorganisms to a host, via a shared object. Transmission may result in infection or colonization of the susceptible host. Hands can be contaminated by contact with an infected source, or by contact with contaminated surfaces, or objects in the immediate environment of an infected source. There are **two types of contact transmission**:

#### Direct Contact

The transfer of microorganisms through direct physical contact between an infected or colonized person and a susceptible host (body surface to body surface without barriers e.g., shaking hands)

#### Indirect Contact

The passive transfer of microorganisms to a host via a person or shared object, such as contaminated hands not cleaned between episodes of care, after touching contaminated equipment (e.g., commodes, wheelchairs, electronic thermometers, BP cuffs or monitoring equipment), surfaces such as bedrails that are not appropriately cleaned and disinfected between persons receiving care, or devices that cannot be properly reprocessed. [6.1](#)

### 2. INDICATIONS [6.1](#)

Implement Contact Precautions as indicated in the Clinical Presentation and Empiric Precautions Table for your area of care (hospital, community or long term care).



**DO NOT** wait for the cause to be determined to initiate Contact Precautions

If the specific organism or infectious disease is known (has been determined), follow the measures outlined for your area of care in the Microorganism, Infectious Disease Table.





Contact Precautions are followed *in addition to* [Routine Practices](#). [Routine Practices](#) shall be followed at ALL TIMES BY ALL STAFF [6.1](#)


Contact Precautions may be required with some children and adults who are incontinent or unable to comply with hand hygiene (e.g., cognitively impaired persons), no matter the diagnosis.

Some conditions and microorganisms require more than one type of precautions (e.g., Droplet and Contact); Refer to the specific combined precautions for more information.

### 3. INFECTION PREVENTION & CONTROL MEASURES

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
<b>3.1. Hand Hygiene</b>	<p>Clean your hands according to the <a href="#">4 moments of Hand Hygiene</a>:</p> <p>Moment 1: <b>BEFORE</b> initial patient/resident/client (PRC) or PRC environment contact            Moment 2: <b>BEFORE</b> aseptic/clean procedure            Moment 3: <b>AFTER</b> body fluid exposure risk            Moment 4: <b>AFTER</b> PRC/PRC environment contact</p> <p>Staff should avoid touching the mucous membranes of their eyes, nose and mouth with their hands to prevent self-contamination. Hand hygiene using soap and water, instead of alcohol based hand rub (ABHR) should be used during outbreaks in settings with high transmission of <i>C. difficile</i> infection or with suspected or documented exposure to <i>B. anthracis</i> contaminated items.<sup>6.2</sup></p> <p>Refer to <a href="#">Routine Practices</a></p>			
<b>3.2. PPE</b>  (Personal Protective Equipment)	<p>Store PPE outside the room, cubicle or bed space of the person receiving care (or in the anteroom if available).</p> <div style="text-align: center;">  <p><b>DO NOT carry any PPE in pocket(s)!</b></p> </div> <p>PPE for Contact Precautions includes:</p> <p><b>GLOVES</b></p> <ul style="list-style-type: none"> <li>• Wear gloves to enter the room, cubicle or designated bed space within a shared room.</li> <li>• Perform hand hygiene before putting on gloves.</li> <li>• Remove gloves, dispose and perform hand hygiene on exit from room, cubicle or designated bed space.</li> <li>• Change gloves and perform 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>• Perform hand hygiene after glove removal.</li> </ul>			

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
3.2 PPE cont'd	<p><b>LONG-SLEEVED GOWNS</b></p> <ul style="list-style-type: none"> <li>Wear a long-sleeved isolation gown if you think clothing or forearms will be in direct contact with:               <ul style="list-style-type: none"> <li>The person receiving care.</li> <li>Environmental surfaces.</li> <li>Objects in the care environment.</li> </ul> </li> <li>If a gown is to be worn, put it on before entry into the room, cubicle or designated bed space in shared room.</li> <li>Remove the gown, dispose after use and perform hand hygiene before leaving the room, cubicle or designated bed space in a shared room.</li> <li>Do not wear the same gown for more than one person receiving care.</li> <li>Do not wear the same gown on repeated occasions (e.g., do not remove and then reapply the same gown).</li> <li>Remove and replace the gown if it becomes wet or visibly soiled.</li> </ul> <div style="background-color: #fff9c4; padding: 10px; margin: 10px 0;"> <p><b>If staff enters a Contact Precautions room without a gown and then needs to perform an activity requiring a gown, they <u>MUST</u>:</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Remove and discard gloves.</li> <li><input checked="" type="checkbox"/> Perform hand hygiene.</li> <li><input checked="" type="checkbox"/> Put on a new, clean gown, and apply fresh gloves before returning to provide care.</li> <li><input checked="" type="checkbox"/> Remove gown before leaving the care environment, place it into a hands-free receptacle in the room, cubicle or bed space.</li> <li><input checked="" type="checkbox"/> Perform hand hygiene.</li> </ul> </div> <div style="background-color: #e1eef6; padding: 10px; margin: 10px 0;"> <p> <b>Faith or cultural head covering do not require covering or removing.</b></p> </div>			


ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
<b>3.3. SOURCE CONTROL</b>				
3.3.1. Signage	Place an Additional Precautions sign on the door / bed space /curtain. Mark off the Additional Precautions needed: <b>Contact</b>		optional	n/a
				
3.3.2. Triage/Reception	All persons entering a Healthcare Facility should be asked and encouraged to perform hand hygiene (if able) or be assisted to perform hand hygiene if indicated. <a href="#">6.1</a>			
<b>3.4. ACCOMMODATION</b>	<p><b>Single Room</b> (preferred)</p> <ul style="list-style-type: none"> <li>A single room with a private in-room toilet (or designated commode chair), designated sink and bathing facility for the person and ideally a designated hand washing sink for staff.</li> <li>Door may remain open.</li> <li>Prioritize single rooms to persons with certain conditions/presentations that may lead to cross-transmission of microorganisms (e.g., uncontained drainage, stool incontinence, young age, and cognitive impairment). Discuss options with Infection Control Professional (ICP) or designate.</li> </ul>		<ul style="list-style-type: none"> <li>Identify persons who require Contact Precautions (e.g., symptomatic persons, uncontrolled/uncontained draining wounds).</li> <li>Place the person in a single room as soon as possible.</li> <li>Door may remain open.</li> <li>Schedule symptomatic persons receiving care at a time when they are less likely to encounter others receiving care.</li> </ul>	<p><b>NO restrictions</b> on accommodations, however, staff can advise person:</p> <ul style="list-style-type: none"> <li>To rest away from others, in a separate room if available.</li> <li>Use a designated bathroom, whenever possible.</li> <li>Clean the bathroom frequently, especially frequently touched surfaces.</li> <li>Not share towels or other personal items.</li> <li>Perform hand hygiene frequently</li> </ul>


ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
<b>3.4 ACCOMMODATION</b> cont'd				
3.4.1. Cohorting/Room Sharing <sup>6.1</sup>	<ul style="list-style-type: none"> <li>Assess risk to determine if persons with the same microorganism can share a room (cohorting)</li> <li>Give single rooms to the person who cannot be confined to their bed or bed space<sup>6.1</sup></li> <li>Perform a risk assessment to determine placement and suitability for cohorting</li> <li>Assign a designated commode or toilet to the person on Contact Precautions. Any person with diarrhea (even when cause is still unknown) should not share a toilet or commode with another person</li> <li>In a multi-bed room, ensure 2 meter/6 foot separation between beds to reduce opportunities for accidental sharing of items between persons receiving care</li> <li>Where possible, close privacy curtains between beds to minimize opportunities for direct contact</li> <li>Ensure roommates, family members/visitors are aware of the precautions to follow (i.e., roommates can follow Contact Precautions when interacting with roommate)</li> </ul>		n/a	n/a
3.4.2. When cohorting is NOT possible	<ul style="list-style-type: none"> <li>Consult ICP/designate</li> <li>DO NOT place a person on Contact Precautions in the same room as a person who is at high risk for complications if infection occurs, or with conditions/presentations that may increase spread (e.g., open wounds, immunocompromised condition)</li> </ul>		n/a	n/a

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
<b>3.4 ACCOMMODATION</b> cont'd				
3.4.3. Special Considerations	<p><b>Newborn Nurseries<sup>6.1</sup></b></p> <ul style="list-style-type: none"> <li>• A single room is not necessary.</li> <li>• When cohorting:               <ul style="list-style-type: none"> <li>○ Ensure a 1.2 - 2.4 meter space between infant stations</li> <li>○ Ensure family members or designated visitors can follow precautions</li> </ul> </li> </ul> <p><b>Mental Health In-Patient</b></p> <p>Perform a Point of Care Risk Assessment to determine the person's placement and/or removal from a shared room on a case-by-case basis.</p>	<p><b>Additional LTC considerations:</b></p> <p>Perform a Point of Care Risk Assessment to determine the person's placement and/or removal from a shared room on a case-by-case basis.</p> <p><b>Consider:</b></p> <ul style="list-style-type: none"> <li>• The infection risks to roommates.</li> <li>• Risk factors that increase the likelihood of transmission.</li> <li>• The potential adverse psychological impact of Contact Precautions on the infected person.<sup>6.1</sup></li> </ul>	n/a	n/a






ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
3.5.1 Internal Transfer cont'd	<p>Precautions for Person Requiring Contact Precautions</p> <ul style="list-style-type: none"> <li>Cover all wounds</li> <li>Person to perform hand hygiene upon leaving room (staff to assist as necessary)<sup>6.1</sup></li> <li>Person on precautions is <b>NOT</b> to wear gloves. The person is to wear clean clothes, housecoat or cover gown</li> </ul> <p>  <b>Person on Contact Precautions should <u>not</u> wear isolation gowns.</b> </p> <p>Visitor (accompanying person) precautions if accompanying transport</p> <ul style="list-style-type: none"> <li>Perform hand hygiene before leaving the room<sup>6.1</sup> (staff to instruct as necessary)</li> <li>Visitors are not required to wear gloves and gowns outside the room</li> </ul>			
3.5.2. Inter-Facility Transport	<p>Precautions for Transport Service</p> <ul style="list-style-type: none"> <li>See section <a href="#">Precautions for Staff</a> (above)</li> <li>Follow Contact Precautions at the receiving facility</li> <li>Consider wheelchair or stretcher used in the transport as contaminated. Clean and disinfect prior to removal from isolation space or before use on someone else</li> <li>Disinfect vehicle surfaces and any equipment that was in contact with the person receiving care with <a href="#">facility approved disinfectant</a> after transfer is complete</li> </ul>			

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<p><b>3.6. THERAPY</b></p>	<p>Based on their care plan the person can leave their room as needed for therapy. Following a risk assessment, supervise the person if they are not able to follow precautions.<sup>6.1</sup></p> <p>Before the person leaves the room, ensure the person:<sup>6.1</sup></p> <ul style="list-style-type: none"> <li>• Performs hand hygiene upon leaving room (staff to assist as necessary)</li> <li>• All excretions/secretions are contained</li> <li>• Person on precautions is <b>NOT</b> to wear gloves. The person is to wear (visibly) clean clothes, housecoat or cover gown</li> </ul> <div style="display: flex; align-items: center; margin-top: 10px;">  <p>Person should <b>NOT</b> wear yellow isolation gowns</p> </div>		<div style="border: 1px solid blue; padding: 10px; text-align: center; margin-bottom: 20px;"> <p><i>Ensure all medically essential care is provided</i></p> </div> <p>If possible, advise the person to reschedule routine therapy when symptoms have resolved<sup>6.1</sup></p>	<ul style="list-style-type: none"> <li>• Do not exclude asymptomatic persons from group/social activities<sup>6.1</sup></li> <li>• Educate symptomatic persons how to contain secretions/excretions to minimize the risk of transmission to others (e.g., contain draining wounds with a dressing and to perform hand hygiene prior to group activities)<sup>6.1</sup></li> <li>• Advise symptomatic persons to exclude themselves from group/social activities when experiencing acute symptoms and when secretions/excretions cannot be contained<sup>6.1</sup></li> <li>• Reschedule routine care and services (e.g., appointments at foot care clinics, volunteer visiting and volunteer transportation) that are not medically necessary, until the person is asymptomatic<sup>6.1</sup></li> </ul>

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3.7. MANAGEMENT OF THE HEALTHCARE ENVIRONMENT	Follow <a href="#">Routine Practices</a>			
3.7.1. Equipment and Supplies	<p>Dedicate if possible:</p> <ul style="list-style-type: none"> <li>Label and store dedicated equipment to prevent reuse by or with another person</li> <li>If reusable equipment must be used, clean and disinfect with <a href="#">Facility Approved Disinfectants</a> prior to removal from room</li> <li>Keep minimal supplies in Contact Precautions room. Do not overstock!</li> <li>Use dedicated personal supplies (e.g., combs, razors, lotions, creams and soaps)</li> <li>Discard supplies/equipment that are disposable or cannot be appropriately cleaned, disinfected or sterilized when the person is discharged, deceased, or Contact Precautions is discontinued</li> <li>Upon discharge, bag personal articles that cannot be disinfected (e.g., books, magazines, toys, playing cards) and give to the person or discard</li> </ul>	<ul style="list-style-type: none"> <li>Use <a href="#">Facility Approved Disinfectants</a> to clean and disinfect the equipment used in the care of person requiring Contact Precautions before they are used on another person</li> <li>If transferring items to a soiled area for cleaning/disinfection or sending for off-site reprocessing, consider placing them in a plastic container for transport to avoid accidental contamination of the environment</li> </ul>	<ul style="list-style-type: none"> <li>Use <a href="#">Facility Approved Disinfectants</a> to clean and disinfect the equipment used in the care of a person requiring Contact Precautions before you leave the home and they are used on another person</li> <li>Advise person requiring Contact Precautions to <b>NOT</b> share towels or other personal items</li> </ul>	

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
3.7.2. Cleaning	<ul style="list-style-type: none"> <li>If reusable equipment must be used, clean and disinfect with <a href="#">Facility Approved Disinfectants</a> prior to removal from room</li> <li>Clean and disinfect all horizontal and frequently touched surfaces daily and immediately when visibly soiled</li> <li>Facility approved disinfectant must achieve manufacturer's recommended wet contact time on all surfaces to ensure disinfection. The wet contact time is the amount of time a disinfectant must remain wet on a surface to ensure efficacy</li> <li>During an outbreak more extensive and frequent cleaning with the facility approved disinfectant may be required. Any changes will be recommended by the Outbreak Management Team or Infection Prevention &amp; Control (IP&amp;C)</li> <li>Additional cleaning measures may be recommended by IP&amp;C in situations when continued transmission of a specific infectious microorganism occurs (e.g., <i>C. difficile</i>, norovirus, rotavirus)</li> <li>When precautions are discontinued or the person is discharged, deceased or transferred complete a terminal cleaning of the room, cubicle or bed space and bathroom as per the facility standard operating procedure</li> <li>Leave the Additional Precautions sign on the door until cleaning is completed</li> </ul>		<ul style="list-style-type: none"> <li>Clean and disinfect clinic room as usual between appointments with a <a href="#">facility approved disinfectant</a></li> <li>Clean and disinfect all equipment used, horizontal and frequently touched surfaces</li> <li>Always allow for the manufacturer's recommended wet contact time. The wet contact time is the amount of time a disinfectant has to remain wet on a surface to ensure efficacy</li> </ul>	Maintain routine household cleaning practices

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
3.7.3. Handling Documents: Health Record / Health Record Documents, Mobile, Computers for Electronic Documentation, Other Papers	 <p><i>Written health records should NOT go into the room of the person on Contact Precautions</i></p> <p>When there are documents that <b>must</b> enter the room (e.g., Power of Attorney, Paneling Papers, Advanced Care Directive), <b>ALWAYS perform hand hygiene and wear appropriate PPE!</b></p> <p><b>To bring in a document that must go into a Contact Precautions Room:</b></p> <ul style="list-style-type: none"> <li>• The document can be taken into the room with or without a disposable document holder</li> <li>• Before placing the document down to be signed, wipe the surface you will be putting it on with a <a href="#">Facility Approved Disinfectant</a> and allow for required wet contact time</li> <li>• Wipe the pen with a facility approved disinfectant after signing and place on disinfected surface and allow for required wet contact time</li> <li>• Assist the person to perform hand hygiene with ABHR prior to signing/handling the document</li> </ul> <p><b>After paperwork is complete:</b></p> <ul style="list-style-type: none"> <li>• Wipe the pen with a <a href="#">Facility Approved Disinfectant</a> after signing and place on disinfected surface and allow for required wet contact time</li> <li>• Remove gown and gloves</li> <li>• Perform hand hygiene</li> <li>• Pick up the pen and paper(s) being careful not to contaminate yourself or the papers</li> <li>• Exit the room</li> </ul> <p><b>If a disposable folder is used:</b></p> <ul style="list-style-type: none"> <li>• Take it to the doorway where a second person can remove the paper</li> <li>• Discard folder in the room</li> <li>• If exiting the room, remove PPE and perform hand hygiene as per protocol</li> </ul>		<p><i>No special considerations for health record, etc.</i></p> <p><i>Follow</i></p> <p><a href="#">Routine Practices</a></p>	

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
3.7.3 Handling Documents cont'd	<p><b>If the Medication Administration Record (MAR) must enter the isolation room:</b></p> <ul style="list-style-type: none"> <li>Wipe the pen and external surface of the MAR with facility approved disinfectant upon leaving the room</li> </ul> <p><b>For sites that use mobile computer:</b></p> <ul style="list-style-type: none"> <li>Place mobile computer at the entrance of the room/cubicle/bed space and maintain the computer as clean (i.e., remove gloves and clean hands between care of the person and use of the computer)</li> <li>Alternately, a plastic cover may be placed on the computer keyboard</li> <li>Remove the plastic cover and clean the keyboard, keyboard tray and mouse with facility approved disinfectant before removing from the room or upon discharge if computer is dedicated to the room</li> <li><a href="#">Cleaning Table, Keyboard, Mouse, Wrist Support and Push Handles on Work Station on Wheels (WOWs)</a> Standard Work Sheet is available</li> </ul> <p><b>When a wall mounted or fixed computer with the room is used for documentation:</b></p> <ul style="list-style-type: none"> <li>Remove gloves and perform hand hygiene to use the computer keyboard</li> <li>After using the computer, perform hand hygiene and put on clean gloves if providing hands on care</li> <li>Avoid cross contamination from computer to person receiving care</li> </ul> <p><b>If the health record is required to accompany the person on Contact Precautions for tests or treatments:</b></p> <ul style="list-style-type: none"> <li>Place in a protective cover (e.g., plastic bag) to prevent contamination</li> <li>Otherwise, have a dedicated staff person carry the health record without contaminating self or the health record</li> </ul> <p><b>If the outside of the health record becomes contaminated:</b></p> <ul style="list-style-type: none"> <li>Clean and disinfect with <a href="#">Facility Approved Disinfectant</a>, allow for required wet contact time</li> </ul>		<p><i>No special considerations for health record, etc.</i></p> <p><i>Follow</i> <a href="#">Routine Practices</a></p>	

3.7.4 Using Medication Administration Record (MAR)/Pyxis slip

**Using the MAR:**

- Perform hand hygiene
- Don PPE
- Enter the room with PPE donned, MAR and medication in hand
- Disinfect overbed table and pen with facility approved disinfectant
- Place MAR and pen on disinfected table
- Name band check without contaminating MAR (do not touch MAR once name band touched)
- Administer medication as appropriate

**Signing the MAR:**

- Perform hand hygiene
- Change gloves
- Sign for meds
- Disinfect pen and external surface of MAR with facility approved disinfectant upon leaving room
- Doff PPE
- Perform hand hygiene

**Using the Pyxis slip:**

- Perform hand hygiene
- Don PPE
- Enter the room with PPE donned, Pyxis slip/print out and medication in hand
- Verify pyxis printout name is the same as MAR
- Use the printout for name band check
- Administer medication as appropriate
- Dispose of printout after removing identifiers or place in appropriate collection area in patients'/residents'/clients' room
- Doff PPE per protocol
- Perform hand hygiene
- Sign for meds outside the room

*No special considerations for MAR, etc.*

*Follow [Routine Practices](#)*



ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME SETTING
3.8. EDUCATION	<p>Inform the person receiving care and/or visitors as appropriate about Contact Precautions, including:</p> <ul style="list-style-type: none"> <li>• How the germ is spread</li> <li>• When and how to clean their hands according to the <a href="#">4 moments of Hand Hygiene</a></li> <li>• How to put on, take off and dispose of PPE safely</li> <li>• <a href="#">Duration of Precautions</a> – see <a href="#">Section 4</a> below</li> <li>• Refer to <a href="#">Contact Precautions Pamphlet</a></li> </ul>			
3.9. VISITOR / ACCOMPANYING INDIVIDUAL / DESIGNATED CAREGIVER MANAGEMENT	<p>As directed on the Additional Precautions sign, visitors are to report to the nursing station before entering the room<sup>6.1</sup></p> <ul style="list-style-type: none"> <li>• <b>All persons</b> must clean their hands when entering and exiting the room</li> <li>• Visitors/accompanying individuals/designated caregivers should have access to the same PPE as staff</li> <li>• Provide instruction on hand hygiene and use of PPE as necessary</li> <li>• Assess:               <ul style="list-style-type: none"> <li>○ The risk to the health of the visitor/designated caregiver</li> <li>○ The risk of the visitor/designated caregiver to spread infection</li> <li>○ The ability of the visitor/designated caregiver to follow precautions.</li> </ul> </li> <li>• Keep the number of visitors to a minimum (as determined by a risk and benefit analysis)</li> <li>• All visitor/accompanying individuals should be asked not to visit other people after visiting a person on Contact Precautions</li> </ul> <p><b>In the adult setting:</b></p> <ul style="list-style-type: none"> <li>• Visitors/designated caregivers are to wear a gown and gloves when providing direct care to the person on Contact Precautions (e.g., when helping with bathing, dressing, toileting, assisting with meals or changing soiled items)</li> </ul> <p><b>In the pediatric setting:</b></p> <ul style="list-style-type: none"> <li>• PPE may not be necessary for parents or designated caregivers exposed pre-hospital who are providing the usual care of the child, provided the parent or caregiver is not visiting other people in the facility</li> </ul>		<p><b>ALL PERSONS MUST CLEAN</b> their hands when entering and exiting the facility</p>	<p>Encourage any visitors clean their hands at the beginning and end of the visit and after any contact</p>
			<p>PPE is usually not necessary for exposed parents, household members or designated caregivers who are providing the usual care of the person or child</p>	

## 4. DURATION OF PRECAUTIONS

Discontinue Contact Precautions when the person is no longer deemed infectious and when terminal cleaning of the room or bed space is complete. Discontinuation of precautions must also be consistent with the specific organism – see applicable disease in the [Clinical Presentation and Empiric Precautions Table](#), or the [Microorganism, Infectious Disease Table](#) for your area of care (hospital, long term care or community).

Determine duration of precautions on a case-by-case basis when symptoms of the person on Contact Precautions are prolonged or when the person is immune suppressed. Re-evaluate the person with persistent symptoms for other potential diagnoses. Repeat microbiological testing may sometimes be warranted

## 5. OCCUPATIONAL HEALTH

Contact Occupational and Environmental Safety and Health (OESH) / Occupational Health designate for staff assessment and/or concerns.

## 6. REFERENCES

- 6.1 [Routine Practices and Additional Precautions: Preventing the Transmission of Infection in Health Care](#). (June 2019). Manitoba Health. Accessed February, 2023.
- 6.2 Expert Opinion. Infection Prevention & Control Program Team (May 2021)

## Appendix A: CONTACT PRECAUTIONS in the OPERATING ROOM (OR) ENVIRONMENT

<b>REQUIREMENT</b>	Contact Precautions shall be maintained at all times within the OR environment (e.g., Pre-op, OR Theatre, Post-Op, etc.)
<b>PRE-OPERATIVE</b>	<ol style="list-style-type: none"> <li>1. The person receiving care (patient) can be scheduled on the OR slate and does not need to be scheduled for a particular time of day.</li> <li>2. Notify Patient Transport Services, receiving area and recovery area as appropriate regarding the need for Contact Precautions in advance.</li> <li>3. Whenever possible, remove non-essential equipment from the OR theatre. Equipment that cannot be removed shall be removed from the immediate area of the surgery and covered with a clean cover.</li> </ol>
<b>TRANSPORTATION</b>	See <a href="#">Section 3.5.1 Internal Transfer</a> (will be linked to section in main document).
<b>INTER-OPERATIVE</b>	<ol style="list-style-type: none"> <li>1. Post an Additional Precaution sign on the OR door indicating <b>Contact Precautions</b> are to be followed.</li> <li>2. Maintain OR Theatre in normal air handling operation (i.e., positive pressure).</li> </ol>
<b>APPROPRIATE PPE</b>	<ol style="list-style-type: none"> <li>1. Any staff having contact with the patient or patient environment outside the sterile field shall follow Contact Precautions and wear appropriate PPE – gloves and gowns.</li> <li>2. Wear gown and gloves for:             <ol style="list-style-type: none"> <li>a. Direct contact with the patient and/or items used for patient care</li> <li>b. Patient transfer assist</li> <li>c. When clothing or forearms will be in direct contact with the patient and/or items used for patient care.</li> </ol> </li> <li>3. Remove gown and gloves and perform hand hygiene after use.</li> <li>4. Staff having direct contact with the patient and/or items used for patient care shall not touch clean surfaces with contaminated gloves and gowns.</li> </ol>
<b>CHART</b>	If the outside of the chart becomes contaminated, clean and disinfect with facility approved disinfectant.
<b>CODE BLUE</b>	<ol style="list-style-type: none"> <li>1. The defibrillator is removed from the Code Blue Cart and taken into the OR</li> <li>2. A designated staff member, with clean hands shall hand any cart supplies requested by the Code Blue Team</li> <li>3. If the Code Blue Cart or any of its equipment or supplies enters the OR, all items must be cleaned and disinfected, reprocessed or discarded according to manufacturer's recommendations.</li> </ol>
<b>POST-OPERATIVE</b>	<ol style="list-style-type: none"> <li>1. Notify the receiving area that Contact Precautions are being used</li> <li>2. See <a href="#">Section 3.5.1 Internal Transfer</a> (will be linked to section in main document)</li> </ol>
<b>EQUIPMENT &amp; ENVIRONMENTAL CLEANING &amp; DISINFECTION</b>	<ol style="list-style-type: none"> <li>1. Please refer to the Evidence Informed Practice Tool (EIPT) <a href="#">Evidence Informed Practice Tool (EIPT) Guidelines for Routine Environmental Cleaning of the Operating Room</a></li> <li>2. Leave Additional Precautions sign on the OR door until cleaning and disinfection is complete</li> </ol>

### REFERENCES

1. The ORNAC Standards, Guidelines and Position Statements for Perioperative Registered Nurses (14<sup>th</sup> ed.). (2019). Operating Rooms Nurses Association of Canada (ORNAC).
2. Routine Practices and Additional Precautions: Preventing the Transmission of Infection in Health Care. (June 2019). Manitoba Health.
3. 110.050.010 Code Blue Team Resuscitation in Acute Care ADULT (2017) Winnipeg Regional Health Authority.