

## NOVEL H1N1 INFLUENZA 2009 PRECAUTIONS/ISOLATION

Related documents: 5.20, Standard/Universal Precautions  
5.46, Respiratory Hygiene/Etiquette Program

### I. PURPOSE

The purpose of this procedure is to provide guidance for the protection of healthcare workers involved in the care of patients with known or suspected Novel H1N1 Influenza 2009. These precautions have been developed to assure that Novel H1N1 2009 is not transmitted from a patient with Novel H1N1 2009 to other patients, personnel or visitors.

The following precautions are consistent with the Public Health Alert issued by the Santa Clara County Health Officer on July 8, 2009, as well as the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC) and the California Division of Occupational Safety and Health (Cal/OSHA). The Infection Control and Epidemiology Department (ICED) continues monitor local, state, national and international health department websites for recommendations regarding Novel H1N1 Influenza 2009.

### II. POLICY

#### A. Precautions for Prevention of Transmission of Novel H1N1 Influenza 2009

1. All patients who present with fever and respiratory symptoms should be managed using the Respiratory Hygiene/Etiquette Program (refer to policy 5.46 of the *Infection Control Manual (ICM)*).
2. Patients for whom Novel H1N1 2009 is in the differential diagnosis are managed using isolation precautions identical to those recommended for patients with known Novel H1N1 2009.
3. Promptly notify the ICED by calling (650) 725-1106 when a patient with suspected or probable Novel H1N1 2009 is admitted.

#### B. Institution of Respiratory/Droplet Isolation

1. Place the patient with suspected or probable Novel H1N1 2009 in a private room with negative pressure ventilation and an anteroom if available.
2. If unavailable, place patient in a private room with a HEPA filter.
  - a. Call (650) 498-4400 to order a HEPA filter.
  - b. Keep door closed.
3. Placed Isolation (Respiratory) order. The order may be entered by the RN per protocol.
4. Place a Respiratory/Droplet Isolation sign (green) on the door.
5. Wear properly fitted respirator (N-95) mask when entering the room.
6. Wear a mask with face shield or splash guard over N-95 mask to protect your eyes.

**NOTE:** Wearing a mask with face shield over the N-95 mask helps decrease the risk of touching your face and contaminating the surface of the N-95 mask.

7. Wear gown and gloves (see Appendix A for correct donning of personal protective equipment (PPE) attire) if anticipating contact with blood or body fluids as per Standard Precautions.
8. Use dedicated or disposable equipment such as stethoscopes, blood pressure cuffs, thermometers and computer equipment.
9. Remove PPE when leaving the room (if no anteroom is available, it is done right outside of the room) (see Appendix A for correct removal of PPE attire).
  - a. N95s may be re-donned for use throughout the shift.
    - Use for only one patient.
    - Store in a paper bag with your name on it.
  - b. Goggles may be re-donned for use throughout the shift.
    - Use for only one patient.
    - Clean with hospital-approved disinfectant after use.
    - Store in a paper bag with your name on it.

C. Discontinuation of Precautions

1. The discontinuation of Respiratory/Droplet Isolation for a patient with suspected or probable Novel H1N1 2009 must be approved by the ICED (extension 5-1106 or pager 16167).
2. Housekeeping measures after discontinuation of isolation.
  - a. Routine cleaning and disinfection protocols should be used.
  - b. Housekeeping staff must wear appropriate PPE.

D. Patient Transport

1. Transporting a probable/suspect Novel H1N1 2009 patient should be avoided if possible.
2. If patient must be transported to another area, the area must be notified that the patient is probable/suspect for Novel H1N1 2009 so healthcare personnel can use appropriate infection control precautions. Place a **surgical mask** on the patient when he/she must leave the isolation room or must be transported to other departments. The person transporting the patient does not need to wear a mask.
3. If an elevator is used, only the patient and Transport Team should be in the elevator. Notify the receiving area prior to transport.

E. Patient Teaching

1. Instruct the patient to cover his/her nose and mouth with a tissue when coughing or sneezing.
2. Instruct the patient on the importance of remaining in the isolation room.

F. Precautions for Visitors

The nurse caring for the patient should instruct the visitors as follows:

1. Limit the number of family members visiting. Other restrictions may apply based upon the condition of the patient.
2. Wear surgical mask.
3. Visitor to remove mask in anteroom or immediately outside of room.
4. Visitor to perform hand hygiene before leaving the room and after removing mask.
5. Visitor should not go to other areas of the unit, such as the kitchen. If the visitor needs something, they are to contact the nurse.
6. If visitor(s) have flu-like symptoms, nurse instructs them not to come to the hospital.

G. Ambulatory Care Setting

1. Targeted screening is asked at check-in (see Clinic Screening Poster).
2. If patient meets all screening criteria, give patient a mask.
3. Contact the patient's physician to determine if the examination is necessary.
  - a. Reschedule if possible.
  - b. If unable to reschedule, patient must wear the mask during the entire visit, except if asked by the healthcare worker to remove mask for examination.
4. Escort the masked patient to a room immediately.
5. Place a Respiratory/Droplet Isolation sign (green) on the door if the patient meets the screening criteria.  
**Note:** Staff must wear PPE even when in the exam room.
6. If going to another area notify the receiving staff prior to the patient's arrival.

H. Emergency Department Precautions

1. Security Officer or screener asks patient if they have a cough.
2. If patient answers yes, the patient is given a mask.
3. Patient is escorted to a negative airflow room or private room with HEPA filter if possible.  
**NOTE:** The door remains closed when the room is occupied.
  - a. Place appropriate signage on the door.
  - b. Isolation cart/supplies:
    - 1) Make sure supplies are located near the patient's room.
    - 2) Check to make sure it is well stocked with appropriate supplies.

I. Specimen Collection Procedure

Instructions for specimen collection can be found on the SHC Intranet → Infection Control H1N1 News → [Laboratory Testing Information for Swine Flu](#).

J. Employee Health Concerns

1. Employees with influenza-like illness (ILI) MUST remain home for 7 days after onset of first symptom (refer to CDC Guidelines for 2009).
2. Housestaff to notify chief resident.
  - a. A direct fluorescent antibody test may be performed in Occupational Health Services.

**References:**

1. Santa Clara County Publish Health Department Health Alert: Novel Influenza A H1N1 7/8/09.
2. CDC: Novel H1N1 2009 Guidelines, 2009.
3. California State Department of Public Health: Novel H1N1 Guidelines 2009.
4. Cal/OSHA Aerosol Transmissible Disease Standard, 8/5/09.

**Appendices:**

Appendix A: Proper Order for Donning (Applying) and Removing Personal Protective Equipment: CDC

Appendix B: Respiratory/Droplet Isolation Sign (green)

Approved by: Infection Control Committee, 8/09  
Quality Improvement and Patient Safety Committee,  
Stanford Hospital and Clinics Medical Executive Committee,  
Stanford Hospital and Clinics Board Credentials, Policies and Procedures Committee,

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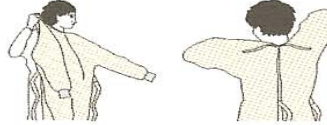
**Appendix A**

**SEQUENCE FOR DONNING PERSONAL PROTECTIVE EQUIPMENT (PPE)**

The type of PPE used will vary based on the level of precautions required; e.g., Standard and Contact, Droplet or Airborne Infection Isolation.

**1. GOWN**

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



**2. MASK OR RESPIRATOR**

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



**3. GOGGLES OR FACE SHIELD**

- Place over face and eyes and adjust to fit



**4. GLOVES**

- Extend to cover wrist of isolation gown



**SECUENCIA PARA PONERSE EL EQUIPO DE PROTECCIÓN PERSONAL (PPE)**

El tipo de PPE que se debe utilizar depende del nivel de precaución que sea necesario; por ejemplo, equipo Estándar y de Contacto o de Aislamiento de infecciones transportadas por gotas o por aire.

**1. BATA**

- Cubra con la bata todo el torso desde el cuello hasta las rodillas, los brazos hasta la muñeca y dóblela alrededor de la espalda
- Átesela por detrás a la altura del cuello y la cintura

**2. MÁSCARA O RESPIRADOR**

- Asegúrese los cordones o la banda elástica en la mitad de la cabeza y en el cuello
- Ajustese la banda flexible en el puente de la nariz
- Acomódesela en la cara y por debajo del mentón
- Verifique el ajuste del respirador

**3. GAFAS PROTECTORAS O CARETAS**

- Colóquesela sobre la cara y los ojos y ajústela

**4. GUANTES**

- Extienda los guantes para que cubran la parte del puño en la bata de aislamiento

**USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION**

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

**UTILICE PRÁCTICAS DE TRABAJO SEGURAS PARA PROTEGERSE USTED MISMO Y LIMITAR LA PROPAGACIÓN DE LA CONTAMINACIÓN**

- Mantenga las manos alejadas de la cara
- Limite el contacto con superficies
- Cambie los guantes si se rompen o están demasiado contaminados
- Realice la higiene de las manos

**SEQUENCE FOR REMOVING PERSONAL PROTECTIVE EQUIPMENT (PPE)**

Except for respirator, remove PPE at doorway or in anteroom. Remove respirator after leaving patient room and closing door.

**1. GLOVES**

- Outside of gloves is contaminated!
- Grasp outside of glove with opposite gloved hand; peel off
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist
- Peel glove off over first glove
- Discard gloves in waste container



**2. GOGGLES OR FACE SHIELD**

- Outside of goggles or face shield is contaminated!
- To remove, handle by head band or ear pieces
- Place in designated receptacle for reprocessing or in waste container



**3. GOWN**

- Gown front and sleeves are contaminated!
- Unfasten ties
- Pull away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard



**4. MASK OR RESPIRATOR**

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- Grasp bottom, then top ties or elastics and remove
- Discard in waste container



**SECUENCIA PARA QUITARSE EL EQUIPO DE PROTECCIÓN PERSONAL (PPE)**

Con la excepción del respirador, quítese el PPE en la entrada de la puerta o en la antesala. Quítese el respirador después de salir de la habitación del paciente y de cerrar la puerta.

**1. GUANTES**

- ¡El exterior de los guantes está contaminado!
- Agarre la parte exterior del guante con la mano opuesta en la que todavía tiene puesto el guante y quíteselo
- Sostenga el guante que se quitó con la mano enguantada
- Deslice los dedos de la mano sin guante por debajo del otro guante que no se ha quitado todavía a la altura de la muñeca
- Quítese el guante de manera que acabe cubriendo el primer guante
- Arroje los guantes en el recipiente de desechos

**2. GAFAS PROTECTORAS O CARETA**

- ¡El exterior de las gafas protectoras o de la careta está contaminado!
- Para quitárselas, tómelas por la parte de la banda de la cabeza o de las piezas de las orejas
- Colóquelas en el recipiente designado para reprocesar materiales o de materiales de deshecho

**3. BATA**

- ¡la parte delantera de la bata y las mangas están contaminadas!
- Desate los cordones
- Tocando solamente el interior de la bata, pásela por encima del cuello y de los hombros
- Voltee la bata al revés
- Dóblela o enróllela y deséchela

**4. MÁSCARA O RESPIRADOR**

- La parte delantera de la máscara o respirador está contaminada — ¡NO LA TOQUE!
- Primero agarre la parte de abajo, luego los cordones o banda elástica de arriba y por último quítese la máscara o respirador
- Arrójela en el recipiente de desechos

PERFORM HAND HYGIENE IMMEDIATELY AFTER REMOVING ALL PPE

EFFECTÚE LA HIGIENE DE LAS MANOS INMEDIATAMENTE DESPUES DE QUITARSE CUALQUIER EQUIPO DE PROTECCIÓN PERSONAL



**Appendix B**

# RESPIRATORY/DROPLET ISOLATION

## **Staff MUST:**

1. Use alcohol gel or wash hands for 10 seconds upon entering and leaving patient's room.
2. Wear an N95 respirator mask when entering patient's room.
3. Wear a mask and faceshield, or splash guard over the N95 mask.
4. If reusing a splash guard, clean with a hospital-approved disinfectant between uses.
5. Remove faceshield, perform hand hygiene, then remove N95 mask.
6. N95 mask may be stored in a paper bag with staff member's name on it, used throughout the shift and used for only one patient.



## **PLEASE KEEP DOOR CLOSED**

PATIENT IS CARED FOR IN A NEGATIVE AIRFLOW ROOM OR PRIVATE ROOM WITH HEPA FILTER.

PATIENT IS TO WEAR A SURGICAL STYLE MASK WHEN LEAVING THE ROOM.

LIMIT VISITORS. VISITOR(S) TO WEAR A SURGICAL STYLE MASK.

*If you have any questions, please see the nurse.*