



IPC.15.3 The ventilation system serving airborne isolation facilities provides pressure patterns that prevent airborne pathogens from being distributed to other areas of the hospital.

IPC.15.3.1 Rooms designed for airborne isolation patients are under negative pressure.

IPC.15.3.2 Air is exhausted to the outside and is not re-circulated unless it is filtered through High-Efficiency Particulate Air (HEPA) Filter.

IPC.15.3.3 The negative pressure for the isolation room should be validated on daily basis when patient is isolated (admitted in the room). Weekly validation is done when the room has no patients. A minimum of 12 air changes per hour should be maintained by testing and documentation as per manufacturer's recommendation/hospital's policy

IPC.15.4 The entry of the isolation room is through a work area or ante-room that serves as a site for hand washing, gowning and storage of protective clothing (gloves, aprons, masks).

IPC.15.5 Toilet, shower, or tub and hand washing facilities are provided for each isolation room.

IPC.15.6 Transmission-based precaution cards (isolation signs) are consistent with the patient diagnosis and are posted in Arabic and English and indicate the type of precautions required.

IPC.15.6.1 Transmission-based precaution cards (isolation signs) are color coded for isolation of different categories (e.g., contact: green, airborne: blue, droplet: pink or red).

IPC.15.6.2 Transmission-based precaution cards (isolation signs) should contain short statements and supported with the required figures.

IPC.15.6.3 Isolation instructions must highlight the transmission-based precaution cards (isolation signs) needed while transporting the patients under transmission-based precautions to other department (e.g., radiology).

IPC.15.7 Respirator (high filtration) masks (N-95, N-99) are used by staff during direct care of patients on airborne precautions and are available on all units likely to admit patients on airborne precautions.

IPC.15.8 Respirator (high filtration) masks (N95, N-99) can be reused by the same patient care giver as per the period specified by the manufacturer.

Standard Intent:

This is to ensure proper implementation of appropriate type of isolation precautions. The hospital preparedness of isolation precaution includes: the availability of negative



pressure airborne isolation room which meets the measurable elements requirements, the availability of required supplies particularly respirator (high filtration mask e.g. N95) in patient care areas, and the availability of isolation card indicating the type of isolation precautions.

IPC.16 Disinfectants use is supervised by the infection prevention and control team.

IPC.16.1 The purchase of equipment and supplies used for sterilization and disinfection is reviewed by the infection prevention and control team.

IPC.16.2 Antiseptics and disinfectants are used in accordance with current scientific guidelines and recommended practice (e.g., approved by recognized professional organizations such as the Food and Drug Administration and Environmental Protection Agency).

Standard Intent:

Disinfectants are frequently used in hospital to kill infectious organisms. The choice of disinfectant to be used depends on many factors. Some disinfectants have a wide spectrum (kill many different types of microorganisms), while others kill a narrower range of disease-causing organisms but are preferred for other properties (they may be non-corrosive, non-toxic, or inexpensive). To ensure proper use of disinfection, selection and indication for uses must be based on scientific references and national laws and regulations, reviewed and supervised by infection control personnel.

IPC.17 The hospital ensures environmental safety when disinfectants are used outside the central sterilization service.

IPC.17.1 In endoscopy units, a proper approved disinfectant is used in a way to protect the patient, the staff and the environment from possible infectious hazard.

IPC.17.1.1 The procedure room and the decontamination room are physically separated and the decontamination room has infection control requirements to prevent spread of infection to healthcare workers and to patients.

IPC.17.1.2 Appropriate personal protective equipment (respirator, gloves: nitrile or butyl rubber, goggles and gowns) are used.

IPC.17.1.3 Unauthorized persons are not allowed in the processing area.

IPC.17.1.4 Well closed containers are used to keep the disinfectant solution.

IPC.17.1.5 A policy and procedure is implemented on how the endoscope is processed (cleaning, decontamination, and disinfection) between patients.

IPC.17.1.6 Endoscopes are cleaned with disposable brushes or with reusable brushes that are sterilized after every use. Heat-stable parts and accessories of the endoscopes such as biopsy forceps are cleaned by mechanical cleaners and stabilized after use.