

# Droplet Precautions - Infection Control

## Site Applicability

All PHC Acute and Long Term Care Sites.

## Practice Level

All PHC staff working directly or indirectly with patients.

## Standards

In addition to [Routine Practices](#), Droplet Precautions are used for exposure within two metres (six feet) of patients known or suspected to have microorganisms spread by large particle respiratory droplets (larger than 5 microns).

Nursing staff will initiate Droplet Precautions for all patients as required. A physician's order is not required.

Droplet Precautions can be discontinued with consultation of the Infection Control Practitioner/Physician.

Some examples of conditions requiring Droplet Precautions are:

- Mumps
- Rubella
- Meningococcal meningitis (*Neisseria meningitidis*)
- Pertussis

## Guideline

**All Routine Practices are used with Droplet Precautions.**

### Patient Placement/Accommodation

- A single/private room with toilet, bathing, and hand washing facilities is preferred when available
- If a single room is not possible, place the patient in the same room with another patient who has the same organism but no other infections (cohort)



- If a single room is not available and cohorting is not possible, patient may share room with other patients as long as there is a two metre separation between patients and privacy curtains are drawn
- Negative pressure is not required
- Room door can remain open, unless performing an aerosol generating medical procedure
- Post a Droplet Precautions sign in a visible place at room entry point (see [Appendix A](#))
- Staff are to use Droplet Precautions when within two metres of the patient

### **Hand Hygiene**

- Perform hand hygiene with alcohol-based hand rub (ABHR) or soap and water per Routine Practices (i.e., five moments of hand hygiene)
- Perform hand hygiene before donning and after doffing Personal Protective Equipment (PPE)
- Encourage and assist patient to clean hands frequently in addition to practicing respiratory etiquette

### **Personal Protective Equipment**

The correct technique for putting on and taking off PPE should be followed (see [Appendix B](#)).

- Mask and Eye Protection:
  - Wear a medical mask and eye protection (i.e., goggles, visor mask, or face shield) when coming within two metres of the patient
  - Perform hand hygiene prior to donning mask and eye protection before entering the patient's room
  - Mask should cover the nose and mouth with the metal bar molded to the bridge of the nose and mask extending under the chin
  - Regular prescription eye glasses are not sufficient eye protection
  - Masks should be discarded when soiled/wet; touch only the elastic straps or ties when doffing mask
  - Remove mask and eye protection outside of the patient's room and perform hand hygiene
  - Reusable eye protection (e.g., goggles) should be cleaned and disinfected after doffing
- Gloves and Gown (based off point of care risk assessment):
  - Wear gloves according to a point of care risk assessment when there is a risk of coming in contact with mucous membranes, non-intact skin, blood, or body fluids, and wear a gown if contamination of forearms or clothing is anticipated
- N95 Respirator (based off point of care risk assessment or during AGMP):

### **Patient Care Equipment**

- Do not take extra equipment or unnecessary supplies into the patient's room
- Dedicate equipment for patient use whenever possible (e.g., stethoscopes, commode) and clean and disinfect equipment between uses
- When common use equipment or items cannot be dedicated, ensure adequate cleaning and disinfection before use with another patient; avoid sharing items that cannot be cleaned and disinfected (e.g., magazines)

- Discard any single-use supplies upon patient discharge

### **Dishes, Glasses, Cups, and Eating Utensils**

- These items are not considered sources of infection and special precautions are not needed
- Disposable dishes/utensils are not required for patients on Droplet Precautions
- Unit staff are required to deliver/remove food trays for patients on Droplet Precautions; Food Services staff will leave trays for patients on Droplet Precautions outside of the patient's room for delivery and pick up finished trays from a designated area/cart on the unit

### **Housekeeping**

- Daily cleaning of all flat surfaces and frequently touched areas and bathrooms
- Do not remove Droplet Precautions sign until discharge cleaning is complete
- Upon discharge: cleaning of all flat surfaces, frequently touched areas, furniture, bathroom, and walls; bedside curtains will be replaced; reusable equipment to be cleaned and disinfected and disposable items to be discarded

### **Patient Transport**

- Limit patient transport to essential and diagnostic purposes only
- Notify receiving department prior to transport of the precautions in place
- The patient should wear a medical mask during transport
- For transporting staff, wear medical mask and eye protection when within two metres of patient, including during transport

### **Family/Visitors**

- Visitors will be kept to a minimum
- Instruct family/visitors on the importance of hand hygiene before and after visiting the patient
- Instruct family/visitors on the appropriate use of PPE if they will be within two metres of the patient

### **Transfer/Discharge**

- Notify the receiving unit, hospital, facility, long term care home, or community agency as well as any transport shuttle/ambulance crew of the precautions in place prior to transfer

### **Documentation**

- Ensure order for Droplet Precautions is in patient's Cerner chart, and discontinue order if no longer indicated

### **Related Documents**

- [B-00-07-13045](#) - Routine Practices



Appendix A: Droplet Precautions Sign

# DROPLET PRECAUTIONS


**Bed #**

**Families and visitors:**

**STOP**

**Please report to staff before entering**

**Clean hands before entering and when leaving room**



Clean hands with  
**A)** hand foam/gel or **B)** soap and water


**Staff:**



**Required:**

- **Point of Care Risk Assessment**
- **Procedure mask with eye protection**  
When within 2 metres of patient
- **Keep 2 metres between patients**

KEEP SIGN POSTED UNTIL ROOM CLEANED  
HOUSEKEEPER will remove sign after "Discharge" cleaning



Form No. PHC-NP124 (R. Sep-16)





**Appendix B: Sequence for Donning and Doffing Personal Protective Equipment**

**Sequence for donning Personal Protective Equipment (PPE)**

**Perform hand hygiene**

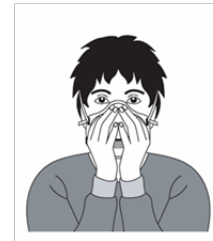
**1. GOWN**

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



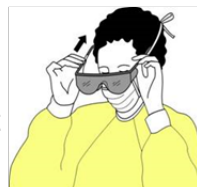
**2. MASK OR RESPIRATOR**

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



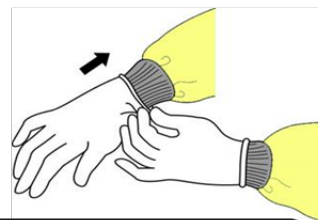
**3. GOGGLES OR FACE SHIELD**

- Place over face and eyes and adjust to fit



**4. GLOVES**

- Extend to cover wrists of isolation gown



**Use Safe Work Practices to Protect Yourself  
and Limit the Spread of Pathogens**

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

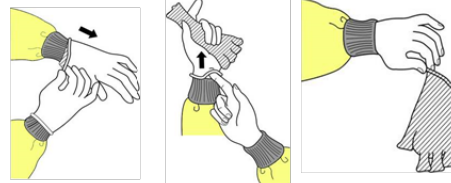
Adopted from the Guidance for Selection and  
Use of Personal Protective Equipment (PPE) in Healthcare Settings  
(CDC, 2018)



## Sequence for removing Personal Protective Equipment (PPE)

### 1. GLOVES

- Outside of gloves are contaminated
- Grasp outside of glove with opposite gloved hand; peel off
- Slide fingers of ungloved hand under remaining glove at wrist
- Peel glove off over first glove



Perform hand hygiene

### 2. GOWN

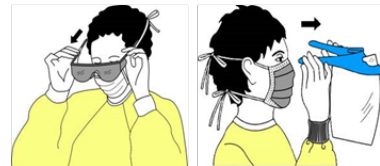
- Gown front and sleeves are contaminated
- Unfasten ties
- Pull away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard



Perform hand hygiene and leave isolation room

### 3. GOGGLES or FACE SHIELD

- Outside of goggles or face shield is contaminated
- To remove, handle by headband or ear pieces



Perform hand hygiene

### 4. MASK or RESPIRATOR

- Front of mask/respirator is contaminated  
**DO NOT TOUCH**
- Grasp bottom, then top ties, or elastic loops to remove
- Discard in waste container



Perform hand hygiene



INFECTION PREVENTION AND CONTROL  
PROVIDENCE HEALTH CARE

Adopted from the Guidance for Selection and  
Use of Personal Protective Equipment (PPE) in Healthcare Settings  
(CDC, 2018)



<b>First Released Date:</b>	30-DEC-2015
<b>Posted Date:</b>	09-FEB-2023
<b>Last Revised:</b>	09-FEB-2023
<b>Last Reviewed:</b>	09-FEB-2023
<b>Approved By:</b>	PHC
	IPAC Standards Committee
<b>Owners:</b>	PHC
	IPAC