

Contact 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](#), Contact Precautions are used for patients known or suspected to have microorganisms spread by direct contact with the patient or by indirect contact with contaminated environmental surfaces. Contact precautions are needed for situations when Routine Practices are not enough to control transmission or there is potential for widespread environmental contamination.

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

Contact Precautions can be discontinued in consultation of the Infection Control Practitioner/Physician.

Some examples of conditions requiring Contact Precautions are:

- Antibiotic Resistant Organisms such as MRSA, VRE, and CPO
- Scabies, Pediculosis (lice)
- Wound or abscess with major drainage not contained by a dressing
- Infectious diarrhea due to a known microorganism (e.g., *Shigella* species, *Salmonella* species, *Campylobacter jejuni*) accompanied by fecal incontinence/uncontained stool, poor hygiene, or increased risk of environmental contamination

Guideline

All Routine Practices are used with Contact 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)
- Negative pressure is not required

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- Room door can remain open
- Post a Contact Precautions sign in a visible place at room entry point (see [Appendix A](#))
- Staff are to use Contact Precautions when caring for the patient as well as when coming in contact with the patient environment

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, especially after using the bathroom, before eating, and when leaving the room

Personal Protective Equipment

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

- Gloves:
 - Wear gloves to provide direct care to the patient or when touching the patient environment
 - Perform hand hygiene prior to donning gloves before entering the patient's room
 - If also wearing a gown, don gown first and then gloves; gloves should cover gown cuffs
 - Change gloves between tasks on the same patient (i.e., work from clean to dirty sites; change gloves after working on a contaminated body site before starting next task)
 - Gloves are single use; never wash gloves or use ABHR when wearing gloves
 - Remove gloves and perform hand hygiene before leaving the patient's room, or when task is complete if transporting contaminated items outside the patient's room
- Gown:
 - Wear a clean, non-sterile gown if clothing or forearms will have direct contact with the patient or the patient environment
 - Perform hand hygiene prior to donning gown before entering the patient's room
 - Gown should be donned prior to gloves; gloves should cover gown cuffs
 - Fasten the neck and waist ties of the gown, ensure sleeves cover wrists
 - Gowns are single use; do not reuse gowns
 - Remove gown and perform hand hygiene before leaving the patient's room, or when task is complete if transporting contaminated items outside the patient's room
 - Place gowns in laundry hamper or in garbage if disposable
- Mask and Eye Protection (based off point of care risk assessment):

- Wear a mask and eye protection (i.e., goggles, visor mask, or face shield) according to a point of care risk assessment when there is a risk of splashes or sprays

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 Contact Precautions
- Gloves and gown are not required for delivery or pickup of food trays, dishes, or utensils
- Unit staff may be required to deliver/remove food trays when additional precautions are also implemented, such as Droplet or Airborne Precautions

Housekeeping

- Daily cleaning of all flat surfaces and frequently touched areas and bathrooms
- Do not remove Contact 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 does not wear a gown or gloves during transport
- For transporting staff, use point of care risk assessment to determine if PPE is required during transport (i.e., if patient contact is expected)

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 participate in direct care

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 Contact Precautions is in patient's Cerner chart, and discontinue order if no longer indicated

Related Documents

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

Appendix A: Contact Precautions Sign

Bed #

Families and visitors:



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:

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



Required:

- Gown & Gloves

Point-of-Care Risk Assessment

When there is a risk of splash or spray, wear face and eye protection.





How you want to be treated.

Form No. PHC-NP134 (R. Sep-16)



A program of the Provincial Health Services Authority

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



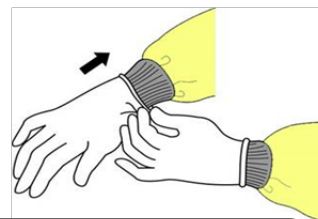
3. GOGGLES OR FACE SHIELD

- 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

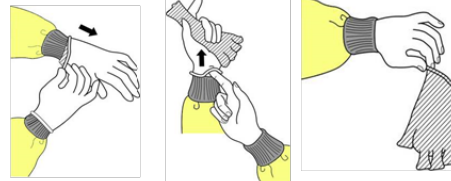
- Perform hand hygiene
- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated

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

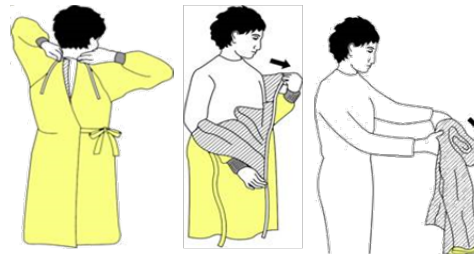
- Outside of gloves are contaminated
- Grasp outside of glove with opposite gloved hand; peel off
- Slide fingers of ungloved hand under remaining glove at wrist
- Peel glove off over first glove



Perform hand hygiene

2. GOWN

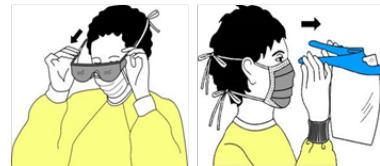
- Gown front and sleeves are contaminated
- Unfasten ties
- Pull away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard



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)

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