

Isolation Precautions: Airborne (Ambulatory) – CE

CHECKLIST

S = Satisfactory **U** = Unsatisfactory **NP** = Not Performed

Step	S	U	NP	Comments
Performed hand hygiene.				
Verified the correct patient using two identifiers.				
Evaluated the patient’s potential for infectious pulmonary or laryngeal TB.				
Assessed for signs or symptoms of other airborne infections (e.g., Rubeola, chicken pox).				
Labeled the door of the room.				
Prevented extra trips in and out of the room; gathered all needed equipment and supplies before re-entering the room.				
Dedicated medical equipment to be used only with the patient.				
PAPR Option				
Donning PPE				
Performed hand hygiene.				
Obtained PPE appropriate for the recommendations and type of isolation used for a patient who had or was suspected of having an airborne-transmitted infectious illness, per the organization’s practice.				
Inspected PPE before donning. Ensured that the PPE was intact, that all required PPE and supplies were available, and that the correct size was selected.				
Entered the designated area for donning PPE and prepared for entry into the isolation room as applicable.				
Performed hand hygiene.				
If a PAPR with a self-contained filter and blower unit integrated inside the helmet was used, put on the belt and battery before donning the impermeable gown so that the belt and battery unit were under the gown.				
Donned a fluid-resistant or impermeable gown if the patient was also in contact isolation.				
If a PAPR with an external belt-mounted blower would be used, attached the tubing and donned a belted blower unit. Ensured that the blower and tubing were outside the gown to ensure proper airflow.				
Donned gloves, pulling the cuffs over the sleeves of the gown.				
Donned a PAPR with a full-face shield, helmet, or headpiece.				

Isolation Precautions: Airborne (Ambulatory) – CE

CHECKLIST

S = Satisfactory **U** = Unsatisfactory **NP** = Not Performed

Step	S	U	NP	Comments
1. For a PAPR with a self-contained filter and blower unit inside the helmet, use a single-use (disposable) hood that extended to the shoulders and fully covered the neck. Ensured that the hood covered all of the hair and the ears and that it extended past the neck to the shoulders.				
2. For a PAPR with an external belt-mounted blower unit and attached reusable headpiece, used a single-use (disposable) hood that extended to the shoulders and fully covered the neck. Ensured that the hood covered all of the hair and the ears and that it extended past the neck to the shoulders.				
Verified the integrity of the PPE. Extended the arms, bent at the waist, and went through a range of motion that was sufficient for delivering patient care.				
Performed hand hygiene and donned gloves. Donned a gown if the patient was also in contact isolation. Donned both a gown and eye protection if there was a risk of being splashed by blood, body fluids, secretions, or excretions.				
Entered the patient’s isolation room, closed the door, and arranged the supplies and equipment.				
Introduced self to the patient.				
Verified the correct patient using two identifiers.				
Explained the procedure to the patient and ensured that he or she agreed to treatment.				
Ensured that evaluation findings were communicated to the clinical team leader per the organization’s practice.				
Provided designated care to the patient while maintaining precautions.				
1. Kept hands away from own face.				
2. Limited touching surfaces in the room.				
3. Removed gloves when torn or heavily contaminated, performed hand hygiene, and donned clean gloves.				
Administered medications as ordered while maintaining precautions.				
1. Provided oral medication in a wrapper or cup and then discarded the wrapper or cup in the proper trash receptacle.				

Isolation Precautions: Airborne (Ambulatory) – CE

CHECKLIST

S = Satisfactory **U** = Unsatisfactory **NP** = Not Performed

Step	S	U	NP	Comments
2. Wore gloves when administering injections.				
3. Discarded disposable syringes and uncapped or sheathed needles in the proper sharps receptacle.				
4. Placed the reusable plastic syringe holder, if used, on a towel for eventual removal and disinfection.				
Collected any ordered specimens.				
1. In the presence of the patient, labeled the specimen per the organization's practice.				
2. Placed the labeled specimen in a biohazard bag.				
Reminded the patient to cover his or her mouth with a tissue when coughing and to wear a disposable surgical mask when leaving the room.				
After providing patient care, left the isolation room.				
Ensured that equipment was disinfected with an organization-approved disinfectant when it was removed from the room, before use on another patient.				
<i>Doffing PPE</i>				
Inspected PPE for visible contamination, cuts, or tears before starting the doffing process. If PPE was potentially contaminated, disinfected it using an EPA-registered disinfectant wipe or spray and allowed it to dry.				
1. If PPE was potentially contaminated, disinfected it using an Environmental Protection Agency (EPA)-registered disinfectant wipe and allowed it to dry.				
2. If the organization's conditions permitted and appropriate regulations were followed, used an EPA-registered disinfectant spray, particularly on contaminated areas. Allowed it to dry.				
Removed and discarded gloves without contaminating bare hands during the removal process.				
Removed and discarded the gown.				
1. Depending on the gown design and the location of the fasteners, untied or gently broke them.				

Isolation Precautions: Airborne (Ambulatory) – CE

CHECKLIST

S = Satisfactory **U** = Unsatisfactory **NP** = Not Performed

Step	S	U	NP	Comments
2. Avoided contact of the scrubs or disposable garments with the outer surface of the gown during removal.				
3. Pulled the gown away from body, rolling it inside-out and touching only the inside of the gown.				
Removed the PAPR with an external belt-mounted blower.				
1. Removed the headpiece while still connected to the belt-mounted blower and filter unit. If a PAPR with a self-contained filter and blower unit inside the helmet was used, removed the hood and waited until later in the procedure to remove the integrated components.				
2. Removed the belt-mounted blower unit and placed all reusable PAPR components in an area or container designated for the collection of PAPR components for disinfection.				
Performed a final inspection for any indication of contamination, and immediately changed into clean surgical scrubs or disposable garments if contamination was identified.				
Completing the Procedure				
Transported the specimen to the laboratory per the organization's practice.				
Performed hand hygiene.				
Documented the procedure in the patient's record.				
N95 Respirator Option				
Donning PPE				
Performed hand hygiene.				
Chose a barrier protection appropriate for the recommendations and type of isolation used for a patient who had or was suspected of having an airborne-transmitted infectious illness, per the organization's practice.				
Inspected PPE before donning. Ensured that the PPE ensemble was in serviceable condition, that all required PPE and supplies were available, and that the correct size was selected.				
Entered the designated area for donning PPE and prepared for entry into the isolation room as applicable.				
Performed hand hygiene.				

Isolation Precautions: Airborne (Ambulatory) – CE

CHECKLIST

S = Satisfactory **U** = Unsatisfactory **NP** = Not Performed

Step	S	U	NP	Comments
Donned a fluid-resistant or impermeable gown if the patient was also in contact isolation. Donned both a gown and eye protection if there was a risk of being splashed by blood, bodily fluids, secretions, or excretions.				
Donned the N95 respirator and completed a user seal and fit-check.				
1. Checked the respirator before donning it to ensure that there was no damage or tears and that the straps were in good condition.				
2. Placed the mask over the nose, mouth, and chin. Ensured that the bottom flap was pulled out completely, if applicable.				
3. Secured the lower elastic strap at the top of the neck and the upper elastic strap above the ears at the back or top of the head.				
4. Adjusted the mask for a comfortable fit.				
5. Placed the fingertips on each side of the metal nosepiece. Beginning at the bridge of the nose, moved down the cheeks and molded the flexible nosepiece to create a snug fit. Avoided pinching the nosepiece, which may result in an improper fit.				
6. Performed a fit-check.				
a. Inhaled rapidly and ensured that the mask collapses slightly.				
b. Exhaled and used the hands to check for leaks around the face.				
i. Adjusted the nosepiece if there were air leaks around the nose.				
ii. Adjusted the straps along the sides of the head if there were air leaks at the mask edges.				
7. Repeated the fit-check.				
Donned gloves, pulling the cuffs over the sleeves of the gown.				
Verified the integrity of the ensemble. Extended the arms, bent at the waist, and went through a range of motion that was sufficient for delivering patient care.				
Entered the patient's isolation room, closed the door, and arranged the supplies and equipment.				
Introduced self to the patient.				
Verified the correct patient using two identifiers.				

Isolation Precautions: Airborne (Ambulatory) – CE

CHECKLIST

S = Satisfactory **U** = Unsatisfactory **NP** = Not Performed

Step	S	U	NP	Comments
Explained the procedure to the patient and ensured that he or she agreed to treatment.				
Ensured that evaluation findings were communicated to the clinical team leader per the organization's practice.				
Provided designated care to the patient while maintaining precautions.				
1. Kept hands away from own face.				
2. Limited touching surfaces in the room.				
3. Removed gloves when torn or heavily contaminated, performed hand hygiene, and donned clean gloves.				
Administered medications as ordered while maintaining precautions.				
1. Provided oral medication in a wrapper or cup and then discarded the wrapper or cup in the proper trash receptacle.				
2. Wore gloves when administering injections.				
3. Discarded disposable syringes and uncapped or sheathed needles in the proper sharps receptacle.				
4. Placed the reusable plastic syringe holder, if used, on a towel for eventual removal and disinfection.				
Collected any ordered specimens.				
1. In the presence of the patient, labeled the specimen per the organization's practice.				
2. Prepared the specimen for transport.				
a. Placed the labeled specimen in a biohazard bag.				
b. If the specimen required ice for transport, placed the specimen in a biohazard bag and then placed the bag with the specimen into a second biohazard bag filled with ice slurry.				
Reminded the patient to cover his or her mouth with a tissue when coughing and to wear a disposable surgical mask when leaving the room.				
After providing patient care, left the isolation room.				
Ensured that equipment was disinfected with an organization-approved disinfectant when it was removed from the room, before use on another patient.				

Isolation Precautions: Airborne (Ambulatory) – CE

CHECKLIST

S = Satisfactory **U** = Unsatisfactory **NP** = Not Performed

Step	S	U	NP	Comments
<i>Doffing PPE</i>				
Inspected PPE for visible contamination, cuts, or tears before starting the doffing process.				
1. If PPE was potentially contaminated, disinfected it using an EPA-registered disinfectant wipe or spray and allowed it to dry.				
2. If the organization’s conditions permitted and appropriate regulations were followed, used an EPA-registered disinfectant spray, particularly on contaminated areas. Allowed it to dry.				
Removed and discarded gloves without contaminating bare hands during the removal process.				
Removed and discarded the gown.				
1. Depending on the gown design and the location of the fasteners, untied or gently broke them.				
2. Avoided contact of the scrubs or disposable garments with the outer surface of the gown during removal.				
3. Pulled the gown away from body, rolling it inside-out and touching only the inside of the gown.				
Donned clean gloves.				
Removed the N95 respirator.				
1. Tilted the head slightly forward.				
2. Grasped the bottom elastic strap first and then the top elastic strap.				
3. Removed them without touching the front of the N95 respirator.				
4. If not reusing the respirator, discarded the N95 respirator.				
5. If reusing the respirator, placed the reusable respirator mask in a clean, breathable container (e.g., paper bag), labeled for reuse by the same person. N95 respirators can be reused when supplies are limited (e.g., influenza pandemics or widespread outbreaks of other respiratory illnesses).				
Removed and discarded gloves without contaminating bare hands during the removal process.				

Isolation Precautions: Airborne (Ambulatory) – CE

CHECKLIST

S = Satisfactory **U** = Unsatisfactory **NP** = Not Performed

Step	S	U	NP	Comments
Performed a final inspection for any indication of contamination, and immediately changed into clean surgical scrubs or disposable garments if contamination was identified.				
<i>Completing the Procedure</i>				
Transported the specimen to the laboratory per the organization's practice.				
Performed hand hygiene.				
Documented the procedure in the patient's record.				