

Standard Precautions

Highlights	Policy Statement
	<p>Standard Precautions will be used in the care of all residents regardless of their diagnoses, or suspected or confirmed infection status. Standard Precautions presume that all blood, body fluids, secretions, and excretions (except sweat), non-intact skin and mucous membranes may contain transmissible infectious agents.</p> <p style="text-align: center;">Policy Interpretation and Implementation</p>
Standard Precautions	<ol style="list-style-type: none"> 1. Standard precautions shall apply to the care of all residents in all situations regardless of suspected or confirmed presence of infectious diseases.
Staff Training	<ol style="list-style-type: none"> 2. Staff shall be adequately trained in the various aspects of Standard Precautions to ensure appropriate decision-making in various clinical situations.
Resident/Family Information	<ol style="list-style-type: none"> 3. Residents and family members will be provided with information pertaining to Standard Precautions and the prevention of infection upon the resident’s admission to the facility. <p>Standard precautions include the following practices:</p>
Hand Hygiene	<ol style="list-style-type: none"> 1. Hand hygiene <ol style="list-style-type: none"> a. Hand hygiene refers to handwashing with soap (anti-microbial or non-antimicrobial) OR using alcohol-based hand rubs (gels, foams, rinses) that do not require access to water. b. Hands shall be washed with soap and water whenever visibly soiled with dirt, blood, or body fluids, or after direct or indirect contact with such, and before eating and after using the restroom. c. In the absence of visible soiling of hands, alcohol-based hand rubs are preferred for hand hygiene. d. Wash hands after removing gloves (see below). e. Artificial fingernails are discouraged among staff with direct resident contact.
Gloves	<ol style="list-style-type: none"> 2. Gloves <ol style="list-style-type: none"> a. Wear gloves (clean, non-sterile) when you anticipate direct contact with blood, body fluids, mucous membranes, non-intact skin, and other potentially infected material. b. Wear gloves when in direct contact with a resident who is infected or colonized with organisms that are transmitted by direct contact (VRE, MRSA, VISA-VRSA, etc.). c. Wear gloves when handling or touching resident-care equipment that is visibly soiled or potentially contaminated with blood, body fluids, or infectious organisms. d. Wear gloves with fit and durability appropriate to the task. e. Change gloves, as necessary, during the care of a resident to prevent cross-contamination from one body site to another (when moving from a “dirty” site to a “clean” one). f. Do not reuse gloves. g. Remove gloves promptly after use, before touching non-contaminated items and environmental surfaces, and before going to another resident and wash hands immediately to avoid transfer of microorganisms to other residents or environments. <p style="text-align: right;"><i>continues on next page</i></p>

Masks, Eye Protection, Face Shields	<p>3. Masks, Eye Protection, Face Shields</p> <ul style="list-style-type: none"> a. Wear a mask and eye protection or a face shield to protect mucous membranes of the eyes, nose, and mouth during procedures and resident-care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions. b. Use mouthpieces, resuscitation bags, or other ventilation devices as an alternative to mouth-to-mouth resuscitation methods in areas where the need for resuscitation is predictable.
Gowns	<p>4. Gowns</p> <ul style="list-style-type: none"> a. Wear a gown (clean, non-sterile) to protect skin and prevent soiling of clothing during procedures and resident care activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions or cause soiling of clothing. b. Wear a gown that is appropriate to the task you are performing. c. Remove a soiled gown as promptly as possible and wash hands to avoid transfer of microorganisms to other residents or environments. d. Remove gown and perform hand hygiene before leaving the resident's room. e. Do not reuse gowns.
Resident Care Equipment	<p>5. Resident-Care Equipment</p> <ul style="list-style-type: none"> a. Handle used resident-care equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of other microorganisms to other residents and environments. b. Ensure that reusable equipment is not used for the care of another resident until it has been appropriately cleaned and reprocessed and single use items are properly discarded.
Environmental Control	<p>6. Environmental Control</p> <ul style="list-style-type: none"> a. Ensure that environmental surfaces, beds, bedrails, bedside equipment and other frequently touched surfaces are appropriately cleaned.
Linen	<p>7. Linen</p> <ul style="list-style-type: none"> a. Handle, transport, and process used linen soiled with blood, body fluids, secretions, excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and avoids transfer of microorganisms to other residents and environments.
Safe Needle Handling	<p>8. Safe Needle Handling</p> <ul style="list-style-type: none"> a. Take care to prevent injuries when using needles, scalpels, and other sharp instruments or devices; when handling sharp instruments after procedures; when cleaning used instruments; and when disposing of used needles. b. Never recap used needles or otherwise manipulate them using both hands, or any other technique that involves directing the point of a needle toward any part of the body. c. Do not remove used needles from disposable syringes by hand, and do not bend, break, or otherwise manipulate used needles by hand. d. Place used disposable syringes and needles, scalpel blades, and other sharp items in appropriate puncture-resistant containers located as close as practicable to the area in which the items were used. Place reusable syringes and needles in a puncture-resistant container for transport to the reprocessing area.

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Safe Infection Practices

9. Safe Injection Practices – The following principles are applied to the use of needles, cannulas that replace needles, and intravenous delivery systems:
 - a. Always use aseptic technique when handling injection equipment.
 - b. Never re-use syringes, even if the needle or cannula on the syringe is changed.
 - c. Use IV administration sets for one resident only and dispose of appropriately after use.
 - d. Do not use bags of IV solution as a common source for multiple residents.
 - e. Use single-dose vials for parenteral medications.
 - f. Do not administer medications from single-dose vials to multiple residents.
 - g. If multi-dose vials are used, both the cannula and the syringe used to access the vial must be sterile. Discard if the sterility of the vial is compromised.

Respiratory Hygiene/
Cough Etiquette

10. Respiratory Hygiene/Cough Etiquette – The following measures shall be implemented to contain respiratory secretions in residents, staff and visitors at the point of initial entry into the facility:
 - a. Signs posted at entrances in strategic places with instructions to residents, staff, and visitors to cover their mouths and noses when coughing or sneezing; use and dispose of tissues; and perform hand hygiene after hands have been in contact with respiratory secretions.
 - b. Availability of tissues and no-touch (e.g., foot-pedal operated) trash receptacles for the disposal of tissues.
 - c. Written materials and reminders posted in the facility regarding effective hand hygiene practices.
 - d. Availability of conveniently located supplies and equipment for hand hygiene (e.g., sinks, soap, paper towels, and alcohol-based hand rubs).
 - e. Availability of masks for residents and visitors who have symptoms of a respiratory infection.

References	
OBRA Regulatory Reference Numbers	483.65(a); 483.75(b). See also CDC <i>Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings 2007</i>
Survey Tag Numbers	F441; F492
Related Documents	<i>CDC Guideline for Isolation Precautions: Appendix A (Appendix A)</i> Isolation – Categories of Transmission-Based Precautions Personal Protective Equipment Policies
Policy Revised	Date: _____ By: _____ Date: _____ By: _____ Date: _____ By: _____ Date: _____ By: _____