## Prevention of COVID-19
### Key Points upon Initial Recognition of Person Under Investigation (PUI)

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<th>RECOMMENDATION</th>
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| Initial Patient Placement        | • If a patient arrives unannounced at an Emergency Department or other ambulatory location and triggers the travel screen, **immediately ask the patient to perform hand hygiene and to put on a surgical mask.**  
  • Move the patient to a single patient room with the door closed. Ask the patient to keep their mask on until seen by a provider for further instruction.  
  • If a negative airflow room is available, please use for maximum precautions.  
  • A provider wearing appropriate PPE should enter the room and assess the patient.  
  • Contact Critical Event Officer (pager 9876) and Infection Preventionist On Call (pager 2399)                                                                                                             |
| Isolation Precautions Staff/Visitor Log | • Place the patient in Contact, Droplet, and Airborne isolation precautions.  
  • ALL staff and visitors will be asked to print/sign their name on a paper log outside the door.  
  • Anyone who enters or exits the room must sign in “time in” and “time out.”                                                                                                                                   |
| Signage                          | • Place appropriate signs on door: Contact, Droplet, and Airborne Precautions.  
  • The number of people entering through the patient room will be minimized including physicians, hospital staff and visitors.                                                                                                      |
| Negative Airflow Room and Log    | • Once it is confirmed that the patient meets the PUI definition, the patient will be moved to a negative airflow room as quickly as possible.  
  • The list of negative airflow rooms can be found on OneSource under Safety and Emergency Preparedness and is available from the Patient Flow Management Department (614-293-4444).  
  • Staff are asked to post the negative airflow confirmation log outside the door and check the pressure daily (i.e. visually or with a tissue test).  
  • Once the patient is placed in a negative airflow room, the patient can remove the surgical mask.  
  • Please notify the Infection Preventionist on call (2399) if the patient must leave the room (e.g. additional testing/procedures or discharged).                                                                 |
| Personal Protective Equipment (PPE) | • Consistent with the policy for contact, airborne and droplet isolation precautions, all persons entering the room must wear gloves, gown, and either N-95 respirator mask (with either face shield or goggles) or powered air-purifying respirator (PAPR).  
  • Carefully don and doff all PPE according to posted signage.  
    • All PPE should be donned prior to entering patient room.  
    • Upon exit, doffing of gown and gloves should occur while in the patient room.  
    • Perform Hand Hygiene when exiting the room.  
    • Goggles/face shield and N95 or PAPR are removed when outside of the patient room. Clean the goggles and the PAPR hood and PAPR machine with a Saniwipe.  
    • Perform hand hygiene.  
  • View donning and doffing procedures the Epidemiology page OneSource.                                                                                                                                 |
| Visitors MUST check with the nursing staff prior to any room entry | • Visitors will be extremely limited and must be pre-approved before coming to room.  
  • Visitors must provide name, phone number, address, county of residence and DOB.  
  • No children under 12 years of age are permitted.  
  • ALL visitors MUST follow all directions on signage including use of PPE.                                                                                                                                 |
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| **Hand Hygiene** | • Perform hand hygiene immediately before and after use of PPE and per hospital policy:  
  o Alcohol hand-rub is acceptable for non-soiled hands  
  o Soiled hands should be washed with soap and water  
  o Avoid touching any surface, face or mucous membranes prior to performing hand hygiene |
| **Aerosol-Generating Procedures (AGPs) including intubation, bronchoscopy, sputum induction, etc.** | • Aerosol-generating procedures (AGP) must be done in a negative airflow room  
  • Aerosol-generating procedures should be limited  
  • N-95 masks with goggles/face shield or PAPR MUST be worn during any AGP. |
| **Patient Care Equipment** | • Dedicated medical equipment (e.g., stethoscope, BP cuff, etc.) should be disposable whenever possible and should be left in the room.  
  • All dedicated, non-disposable medical equipment should be cleaned and disinfected according to hospital policy and manufacturer’s instructions using strict blood and body fluid precautions and contact times. |
| **Environmental Cleaning and Disinfection** | • Our hospital approved disinfectants (i.e. Super Sani-Cloth Wipes and Sani-Cloth Beach Wipes) meet the criteria for the EPA emerging viral pathogens claim and have label claims against coronaviruses.  
  • Nursing staff assigned to the patient will perform the daily clean to limit the amount of additional staff going in the room and to help conserve PPE. EVS can assist with providing the necessary supplies.  
  • EVS will perform the terminal cleaning consistent with our current process for cleaning and will perform UV light upon completion.  
  • Once the patient is discharged from a patient room in all patient care settings (inpatient and ambulatory sites), adequate time should elapse, with the door closed, to allow for appropriate air exchanges before allowing entry by unmasked staff or another patient:  
  o The room should sit empty for at least 69 minutes.  
  • Contact the Infection Preventionist on call (2399) for questions and/or guidance for other types of rooms (e.g. procedural areas). |
| **Bodily Fluids** | • Urine, stool and vomitus may be flushed down the routine toilet. |
| **Reduce Number of People Entering Room** | • Medical students and other Health Science students will not enter the room of patients with confirmed or suspected COVID-19.  
  • Dietary will deliver meals up to the floor and the nursing staff /PCA assigned to the patient will deliver the tray with the necessary PPE to limit the amount of additional staff going in the room and to help conserve PPE. |
| **Duration of Isolation** | • Duration of isolation will be determined in conjunction with Columbus Public Health (CPH) and the Ohio Department of Health (ODH) |
| **Post-Mortem Care** | • If a patient expires, please contact the Critical Event Officer at pager 9876 and notify Epidemiology on call at pager 2399.  
  • Follow routine post-mortem procedures.  
  • Need for autopsy will be determined in conjunction with CPH, ODH and CDC. |