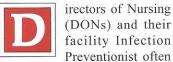
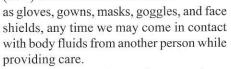
To "Don" or Not to "Don"...That Is the Question?

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have the need to evaluate the best method to protect the residents/ patients, staff, visitors, and organization from risk. This includes the appropriate use of personal protective equipment (PPE) which includes items such



Evidence-based practices are those always encouraged, starting with the CDC, which recommends using standard precautions for the care of all patients/ residents regardless of the presence of illness or infection status. Standard precautions go beyond protecting health care workers from exposure to bloodborne pathogens and includes body substances that may contain potentially infectious micro-organisms and applies to: blood; all body fluids, secretions, and excretions except sweat, regardless of whether or not they contain visible blood; non-intact skin; and mucous membranes.

In order to protect ourselves and others from illness, we must ensure that microorganisms cannot enter our body through portals of entry, such as breaks in skin, mucous membranes (i.e., eyes, nose), or mouth. If a patient/resident is coughing, prevent micro-organisms that may be in respiratory secretions from entering your body by wearing a mask to cover your nose and mouth.

In some cases, when a patient may have a particularly "wet" cough, it would be prudent to also protect your eyes by wearing goggles or a face shield. Respiratory or cough etiquette is also included in standard precautions and requires the person with respiratory symptoms to contain respiratory secretions



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by coughing into a tissue and performing hand hygiene after discarding the tissue. Coughing into your sleeve or elbow in order to keep hands clean and contain respiratory secretions is also encouraged. Persons with a cough can also wear a mask to contain respiratory secretions and protect those around them.

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illness. For example, health care workers need to wear a mask when inserting catheters or collecting cerebral spinal fluid because the natural flora in the mouth may cause infection in others. In addition to standard precautions, it is prudent for life care centers and other health care facilities to implement transmission-based precautions.

Transmission-based precautions are additional prevention measures that need to be implemented when a resident is suspected of or has colonization/infection due to a highly infectious or epidemiologically important organism in order to interrupt transmission to others.

The three types of transmission-based precautions are contact, droplet, and airborne isolation. Contact isolation includes the use of gowns and gloves when in the immediate patient care environment; droplet precaution requires the use of a mask when within three to six feet of the patient/resident; and airborne isolation requires the use of an N95 mask in addition to the patient being placed in a negative pressure room.

Hand hygiene is also included in standard precautions and must always be performed prior to donning PPE and after removing or doffing PPE. PPE should be donned in the following order: (1) gown; (2) facemask (i.e., surgical mask or N95); (3) goggles or face shield; and (4) gloves. PPE should be removed prior to exiting the patient care area. Start by removing gloves and then gowns, being careful not to contaminate your hands and clothing, followed by removing facemask and then face shield or goggles and performing hand hygiene as your final step.

The decision to "Don" or "Not to Don" PPE is important. It is key that the facility DON, Infection Preventionist, and other administrative nurses focus on their process, knowledge of, and compliance with CDC and APIC guidances, and assure staff education, policies, and procedures are appropriate and in place.

Remember, an ounce of prevention...

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