

Airborne Precautions

Should be used with residents suspected to be infected with pathogens transmitted by airborne route (e.g. tuberculosis, measles, chickenpox, disseminated herpes zoster).



Ensure appropriate resident placement

- Resident should be moved to an airborne infection isolation room (AIIR)
- If no AIIR, resident should wear a mask and be placed in private room with the door closed and should be transferred to a facility that has an AIIR.

Restrict susceptible healthcare personnel from entering room

- If resident is suspected to have measles, chickenpox, disseminated zoster, or active TB immune susceptible healthcare personnel should not care for the resident.
- Immunize susceptible people following exposure.

Use Personal Protective Equipment appropriately

- Don fit-tested NIOSH-approved N95 or higher-level respirator before entering the resident's room.
- Remove respirator after leaving the resident room.
- Door must remain closed.

Limit Transport and Movement

- Transport outside of room only for medically-necessary purposes.
- Resident should wear surgical mask
- Educate resident to observe respiratory hygiene/cough etiquette

Prioritize cleaning & Disinfection of the Room

- Clean and disinfect resident rooms daily
- Focus should be on high touched surfaces and equipment in the immediate vicinity of the resident.