

Contact and Droplet Precautions

When and how to apply contact and droplet precautions in a residential setting for a suspected, probable or confirmed case of COVID-19

Point of contact assessment



Control/Protective Measures

Engaging in indirect contact (greater than 6ft from the individual) that is casual in nature.

Some examples of this could be preparing or providing meals, providing directions on activities of daily living, administrative and household tasks







Frequently clean high touch surfaces

Avoid touching your face and cough into your sleeve



Hand hygiene

Engaging in direct contact that is within 3ft (1 metre) of the individual. Some examples of this could be supporting an individual with their hygiene routine and activities of daily living.



Full PPE required

- Engage in hand hygiene before donning
 Donning should occur outside of the individual's bedroom
- Gowns, gloves and masks can be disposed in a garbage bag and tied and disposed of immediately
 - -Goggles are to be disinfected and reused
 - Doffing should occur upon leaving the individual's bedroom
- When doffing, remove gown and gloves and perform hand hygiene
- Remove eye protection and mask and perform hand hygiene



Supporting individual's with Aerosol Generating Medical Procedures (AGMP). This includes the use of nebulizer treatment, BiPAP and/or CPAP and suctioning



Full PPE is required with the use of an N95 mask $\,$

Staff will be fitted for an N95 mask when supporting individuals with AGMP

- Ensure door is closed when engaging in aerosol generating medical procedure
 - Ensure there is proper ventilation in the room



To Note: The control/protective measures listed above are cumulative and should not be used in isolation. PPE is not a substitute for hand hygiene

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