


DROPLET PRECAUTIONS HIGHLIGHTS

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME CARE
SIGNAGE			N/A	
PPE (Personal Protective Equipment)	Medical face mask (procedure or surgical mask) and eye or face protection			
ACCOMMODATION	Single Room <u>Preferred</u>		Place in clinic room as soon as possible	N/A
	Door can remain open			
SOURCE CONTROL	Triage	Have the person suspected of having a Droplet spread infection immediately perform hand hygiene and put on medical face mask (procedure or surgical mask) – not a respirator when they present to triage or the registration desk.		
	Respiratory Hygiene	Instruct people to follow Respiratory Hygiene : <ul style="list-style-type: none"> Cover the mouth and nose against a sleeve or shoulder while coughing or sneezing Use tissue to contain mucous or saliva by covering the mouth and nose while coughing or sneezing Throw used tissue into a garbage as soon as possible and perform hand hygiene 		

DROPLET PRECAUTIONS

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DROPLET PRECAUTIONS PROTOCOL

1. INTRODUCTION

Droplet Precautions are required for people diagnosed with or suspected of having infectious microorganisms (germs) spread by the droplet route. Droplets are usually spread by a person coughing, sneezing or talking. Droplets are solid or liquid particles suspended in the air whose spread is usually limited to two meters (or six feet) mostly due to gravity; particle size is greater than 10 micrometers. [6.1](#)

Droplet Precautions are followed **in addition to Routine Practices**. Routine Practices shall be followed at all times by all staff.

2. INDICATIONS [6.1](#)

Implement Droplet Precautions as indicated in the [Clinical Presentation and Empiric Precautions Table](#) for your area of care (acute, community or long term care).




DO NOT wait for the cause to be determined to initiate Droplet Precautions.


If the specific organism or infectious disease is known (has been determined), follow the measures outlined for your area of care in the [Microorganism, Infectious Disease Table](#).



The need to start Droplet Precautions may differ between some children (e.g. epiglottitis or cellulitis in child < 5 yrs. old) and adults.


Some conditions and germs require two types of precautions (e.g. Droplet and Contact).


3. INFECTION PREVENTION & CONTROL MEASURES

ELEMENT	ACUTE CARE	LONG TERM CARE	COMMUNITY	
			CLINIC SETTING	HOME CARE
3.1. HAND HYGIENE	<p>Clean your hands according to the 4 moments of Hand Hygiene:</p> <p>Moment 1: BEFORE initial patient/resident/client (PRC) or PRC environment contact</p> <p>Moment 2: BEFORE aseptic/clean procedure</p> <p>Moment 3: AFTER body fluid exposure risk</p> <p>Moment 4: AFTER PRC/PRC environment contact</p> <p>Health care workers should avoid touching the mucous membranes of their eyes, nose and mouth with their hands to prevent self-contamination.</p> <p>Refer to Routine Practices</p>			
3.2. PPE (Personal Protective Equipment)	<p>Store PPE outside the room, cubicle or bed space of the person receiving care (or the anteroom if available).</p> <div style="text-align: center;">  <p>DO NOT carry any PPE in pocket(s)!</p> </div> <p>PPE for Droplet Precautions includes:</p> <ol style="list-style-type: none"> MASKS <ul style="list-style-type: none"> Wear a medical face mask (procedure or surgical mask) when within two meters / 6 feet of a coughing person, or if performing procedures that may result in the person coughing Ensure nose, mouth and chin are covered when wearing a mask Do not dangle a mask around the neck when not in use Do not reuse mask Change the mask if it becomes damaged, wet or soiled (from the wearer's breathing or due to an external splash) Change the mask if breathing becomes difficult Wait to remove or change your mask until you are outside the room, cubicle or bed space. <div style="background-color: #ffffcc; padding: 10px; margin-top: 10px;"> <p>Mumps and Rubella:</p> <ul style="list-style-type: none"> If you are immune to rubella or mumps you do not have to wear a mask. People who are not immune or immunity is unknown^{6.1} must wear a mask and only enter the room when absolutely necessary. </div>			

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3.2 PPE cont'd	<p>2. EYE PROTECTION</p> <ul style="list-style-type: none"> • Wear a mask with a visor attachment, goggles or face shield when within two meters / 6 feet of a coughing person, and for procedures that may result in coughing, splashes or sprays • Wear eye protection over prescription or fashion glasses as these glasses are not adequate eye protection • Wear disposable eye protection only once to avoid self-contamination • Avoid self-contamination by not touching mask and eye protection on its external surface during use and disposal • Remove eye protection once outside the room, cubicle or bed space and perform hand hygiene • If reusable, clean and disinfect as per site policy and perform hand hygiene. <div style="background-color: #ffffcc; padding: 10px; margin: 10px 0;"> <p>Masks and Eye Protection</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Remove carefully by the straps or ties <input checked="" type="checkbox"/> Place into the garbage after leaving the person's room, cubicle or bed space and perform hand hygiene <input checked="" type="checkbox"/> DO NOT place on head or around the neck for later use </div> <div style="background-color: #e6f2ff; padding: 10px; margin: 10px 0; display: flex; align-items: center;">  <p>Faith or cultural head coverings do not require covering or removing</p> </div>			

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3.3. SOURCE CONTROL				
3.3.1.SIGNAGE	Place an Additional Precautions sign on the door / bed space Mark off the Additional Precautions needed: DROPLET		n/a	
				
3.3.2.RESPIRATORY HYGIENE	<ul style="list-style-type: none"> • Instruct people to follow respiratory hygiene: • Cover the mouth and nose against a sleeve or shoulder while coughing or sneezing • Use tissues to contain mucous or saliva by covering the mouth and nose while coughing or sneezing • Throw used tissue into a garbage as soon as possible and perform hand hygiene • Turn the head away from others when coughing or sneezing • Offer the person who is coughing a medical face mask if they are not performing respiratory hygiene properly. The mask may be removed when the person receiving care is in their own room • Place person receiving care in a single room, or pull privacy curtain in a multi-bedroom or treatment area <div style="text-align: center; margin-top: 20px;">  <p>Staff to wear a medical face mask if coughing or sneezing. However, if you are unwell, stay home.</p> </div>			
3.3.3.TRIAGE	<ul style="list-style-type: none"> • All persons entering a Healthcare Facility should be asked and encouraged to perform hand hygiene (if able), or be assisted to perform hand hygiene if indicated^{6.1} • Have the person suspected of having a droplet spread infection immediately put on a medical face mask (procedure or surgical mask) - not a respirator, when they present to triage or the registration desk • Direct people with a sudden onset of respiratory symptoms directly to a single room or to a separate waiting area if immediate placement is not an option. • Place the person in an area of the waiting room separated by at least two meters from other people OR The person must wear a mask, then place them at least one meter from others in the waiting room. 			

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3.4. ACCOMMODATION	<p>Single Room (preferred)</p> <ul style="list-style-type: none"> A single room with a private in-room toilet (or designated commode chair), designated person's sink and staff hand washing sink is preferred Door may remain open No special air handling and ventilation are necessary 		<ul style="list-style-type: none"> Identify persons who require Droplet Precautions (e.g., meningococcal infection, rubella, mumps or pertussis). Place the person in a single room as soon as possible Door may remain open Schedule symptomatic persons receiving care at a time when they are less likely to encounter others receiving care 	<p>Discuss feasibility of spatial separation with person receiving care (e.g., when sharing a bed)</p>
3.4.1. Cohorting Room Sharing^{6.1}			<ul style="list-style-type: none"> Consult ICP/designate When single rooms are limited, assess risk to determine if people with the same germ can share a room (cohorting). Give single rooms to people who cannot be confined to their bed or bed space. DO NOT place a person on Droplet Precautions in the same room as a person who is at high risk for complications if infection occurs, or with conditions/presentations that may increase spread (e.g., elderly, people with heart or lung disease, immunocompromised) Ensure there is at least two meters separation between bed spaces, if possible ensure head of the beds are facing away from each other Close privacy curtains between beds to decrease the chance for droplet spread Inform client, roommates and all visitors of precautions and provide PPE use education as needed Consider the ability of the roommates and their visitors to follow Droplet Precautions when choosing a roommate.^{6.1} <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">  <p>When caring for a group of persons infected with the same germ (cohorting), Droplet Precautions must be applied individually for each person receiving care</p> </div>	
3.4.2. Newborn Nurseries^{6.1}			<p>A single room is not necessary, if there is at least two meters separation between infant stations, and visitors are able to follow Droplet Precautions.</p>	

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<p>3.5.2. Inter-Facility Transport</p>	<p>Notify the transport service and receiving facility that Droplet Precautions are needed and Document Droplet Precautions on the Interfacility Transport Form/Transfer Referral Form</p> <p>Precautions for Transport Service</p> <ul style="list-style-type: none"> See section Precautions for Staff Follow Droplet Precautions at the receiving facility <p> Person receiving care can remove mask once in a suitable room. See Accommodation.</p>			
<p>3.6. THERAPY</p>	<p>Based on their care plan the person can leave their room as needed for therapy. Following a risk assessment, supervise the person if they are not able to follow precautions^{6.1}</p> <p>Before the person leaves the room, ensure the person:^{6.1}</p> <ul style="list-style-type: none"> Performs hand hygiene upon leaving room (staff to assist as necessary) Wears a medical face mask if able Teach person about respiratory hygiene practices. See Section 3.3.2 <p>When the person is out of the room:</p> <ul style="list-style-type: none"> The person should follow respiratory hygiene practices If the person is coughing and unable to follow respiratory hygiene practices, staff that provide care within two meters/6 feet of the person are to wear mask and eye protection. 		<p style="text-align: center;">Ensure all medically care is provided</p> <p>If possible, advise the person to reschedule routine therapy when symptoms have resolved^{6.1}</p> <p>Defer care (e.g.: foot Care) and services (e.g.: interactions with volunteers) that are not medically necessary when persons receiving care are experiencing acute respiratory symptoms</p> <p style="text-align: center;">Advise the person to exclude themselves from group programs when experiencing acute symptoms of a respiratory illness.</p>	

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3.7. MANAGEMENT OF THE HEALTHCARE ENVIRONMENT	Follow Routine Practices			
3.7.1. Cleaning	<ul style="list-style-type: none"> When precautions are discontinued, or the person is discharged/transferred complete a terminal cleaning of the room, cubicle or bed space and bathroom as per your facility standard operating procedure using a Facility Approved Disinfectant. Leave Additional Precautions sign on door until discharge cleaning completed. 		Clean clinic room as usual between appointments with a facility approved disinfectant.	Maintain routine household cleaning
3.8. EDUCATION	<p>Inform the person receiving care and/or visitors as appropriate about Contact Precautions, including:</p> <ul style="list-style-type: none"> How the germ is spread When and how to clean their hands according to the 4 moments of Hand Hygiene How to put on, take off and dispose of PPE safely Duration of Precautions – see Section 4 below Refer to Contact Precautions pamphlet 			

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3.9. VISITOR / ACCOMPANYING INDIVIDUAL MANAGEMENT	<p>As directed on the Additional Precautions sign, visitors are to report to the nursing station before entering the room^{6.1}</p> <ul style="list-style-type: none"> • All persons must clean their hands when entering and exiting the room • Visitors/accompanying individuals should have access to the same PPE as staff (mask and eye protection). • Provide instruction on hand hygiene and use of PPE as necessary • Assess: <ul style="list-style-type: none"> ○ The risk to the health of the visitor ○ The risk of the visitor to spread infection ○ The ability of the visitor to follow precautions <p>Exceptions:</p> <ul style="list-style-type: none"> • PPE may not be necessary for <i>household</i> members (as they may have already been exposed). Assess on a case-by case basis. Other visitors should be instructed to correctly wear PPE – mask, and eye protection. • While visiting people with suspected or confirmed H. influenza type B infection: <ul style="list-style-type: none"> ○ Visitors need to wear a mask and eye protection if they will then have extensive close contact with non-immune infants or children less than 5 years old after the visit. • While visiting people with suspected or confirmed rubella or mumps: <ul style="list-style-type: none"> ○ If you are immune to rubella or mumps, you do not have to wear a mask ○ People who are not immune or immunity is unknown must wear a mask & eye protection & only enter the room when it is <i>absolutely necessary</i> • Keep the number of visitors to a minimum (as determined by a risk and benefit analysis) • All visitor/accompanying individuals should be asked not to visit other people after visiting a person on Droplet Precautions • If the visitor must visit more than one person, inform the visitor to use the same PPE as health care workers. Clean hands and put on appropriate PPE needed before going to the next person's room. 		<p>All persons must clean their hands when entering and exiting the facility</p>	<p>Encourage any visitors to clean their hands and end of the visit</p>
				<p>PPE is usually not necessary for exposed parents, household members or caregivers who are providing the usual care of the person or child</p>

4. DURATION OF PRECAUTIONS

Discontinue Droplet Precautions when the person can no longer spread germs and terminal cleaning of the room, cubicle or bed space is complete. Discontinuation of precautions must also be consistent with the specific organism – see applicable disease in the [Clinical Presentation and Empiric Precautions Table](#), or the [Microorganism, Infectious Disease Table](#) for your area of care (hospital, long term care or community).

Determine duration of precautions on a case-by-case basis when symptoms of the person on Contact Precautions are prolonged or when the person is immune suppressed. Re-evaluate the person with persistent symptoms for other potential diagnoses. Repeat microbiological testing may sometimes be warranted

5. OCCUPATIONAL HEALTH

Contact Occupational and Environmental Safety and Health (OESH) / Occupational Health designate for staff assessment and/or concerns.

6. REFERENCES

- 6.1 [Routine Practices and Additional Precautions: Preventing the Transmission of Infection in Health Care.](#) (June 2019). Manitoba Health. Accessed November 21, 2019.