

1. Enhanced precautions

- Conditions: intubated patients and those likely to require the following aerosol generating procedures :
 - Intubation, extubation and related procedures such as manual ventilation and open suctioning
 - Tracheotomy/tracheostomy procedures (insertion/open suctioning/removal)
 - Bronchoscopy
 - Surgery and post-mortem procedures involving high-speed devices
 - Non-invasive ventilation (NIV) such as bi-level positive airway pressure (BiPAP) and continuous positive airway pressure ventilation (CPAP)
 - High-frequency oscillating ventilation (HFOV)
 - Induction of sputum
 - Medication administration via continuous nebulizer
- Environment: negative-pressure room
- PPE: Hard reusable face shield or disposable face shield, N95 (PAPRs for those with facial hair or those unable to be fit tested), gown and double gloves.
 - Gloves and gowns MUST be disposed of before exiting patient room
 - Recommend removal and disposal of face shield or disinfection of hard reusable face shield prior to subsequent patient encounter
 - If sequential rounding is performed for a cohort of suspect and/or confirmed COVID-19 patients, recommend extended use of N95 respirator (i.e. leave on while rounding and remove and discard N95 at the end of patient rounds). If this procedure is performed, patients should be evaluated in order of suspicion (first evaluate least likely suspect COVID-19 patients and end with evaluating confirmed COVID 19 patients)
 - Consider consolidating nursing activities for individual suspect/confirmed COVID-19 patients to preserve PPE

2. Contact/droplet

- Inpatient and ED
 - Surgical mask and eye protection (goggles or reusable hard face shield/disposable face shield) OR pre-attached surgical mask and face shield, gown and double gloves
 - All elements of PPE MUST be disposed of before exiting patient room with the exception of reusable face shields (which should be removed and disinfected per manufacturer protocol).
 - When collecting diagnostic respiratory specimens (eg nasopharyngeal or oropharyngeal swab) from a possible COVID19 patient, an N95 mask should be worn in lieu of a surgical mask. Visitors should not be present and door should be closed during specimen collection.
- Ambulatory
 - Surgical mask and eye protection (goggles or face shield) OR pre-attached surgical mask and face shield, gown and double gloves
 - Do not recommend obtaining NP/OP swabs in clinic; these can be obtained in ILI/tent or ED
- ILI/tent
 - Reusable/disposable face shield, N95 (PAPRs for those with facial hair or those unable to be fit tested), gown and double gloves.
 - PPE can be maintained between patient evaluations for the duration of the healthcare worker's shift, with the exception of outer layer of gloves, which MUST be replaced between patients. Any visible soiling or contamination of PPE warrants removal and replacement of all PPE prior to the next patient encounter.

- All elements of PPE MUST be disposed of by the end of the healthcare worker's shift with the exception of reusable face shields (which should be removed and disinfected per manufacturer protocol).
- Collection area should be separated by at least 6 feet from where patients are waiting; preferable to perform specimen collection in a separate room with the door closed.