

GUIDELINES FOR RESPIRATORY ETIQUETTE

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PURPOSE:

In order to maintain a safe environment in healthcare facilities, basic infection control practices must be reinforced. Many viral and sometimes bacterial respiratory pathogens (e.g., influenza, adenovirus, respiratory syncytial virus, Mycoplasma pneumonia, corona virus) share transmission characteristics. Implementation of respiratory etiquette practices can decrease the risk of transmission from patients with undiagnosed respiratory infections and can control the spread of other more common pathogens.

POLICY:

Patients, family and visitors should be aware of the risk of spread of infection and that clinic enforced measures, followed by staff, patients, family and visitors will reduce the risk of spread of infection.

Symptoms such as sore throat, rash, fever and productive cough may be indications of an infectious process. Clinic personnel will help screen persons who are obviously ill.

Patients, family and visitors will observe the facility's policies for isolation practices and barrier precautions as applicable.

PROCEDURE:

1. Provide surgical masks (non –N-95) to all patients and essential visitors with symptoms of respiratory illness.
2. Post, explain and enforce instructions on when to use the masks (i.e., when coughing, sneezing or controlling nasal secretions).
3. Post, explain and enforce how and when to dispose of the masks (i.e., when visit complete and or when mask becomes moistened/soiled and needs replaced).
4. Provide tissues and provide receptacles for disposal of used/soiled tissues.
5. Make available hand hygiene products (i.e., alcohol based hand sanitizer) in waiting areas and areas where patients, staff and visitors need to sanitize their hands frequently.
6. Encourage persons with respiratory symptoms to stay at least 3 feet from other persons who do not have respiratory symptoms.
7. Place patients with respiratory symptoms in a private room as soon as possible to limit their stay in the waiting room.
8. Staff members will don a surgical mask (non –N-95) and follow Droplet Precautions during the evaluation of patients with symptoms of an infectious respiratory illness.
9. Registration staff should stay at least 3 feet from unmasked patients and may choose to apply a surgical mask (non-N-95) if no Plexiglas barrier is in place.
10. All staff should wipe any patient care equipment with a clinic approved disinfectant cloth after use in a potential respiratory exposure situation.
11. Housekeeping staff, who may need to service an area where there could be potential exposure to respiratory infection during routine work (or in an emergency situation) will need to apply a surgical mask (non-N-95) to reduce risk for exposure.

Reference: Pfeiffer, J.A., editor. APIC Text of Infection Control and Epidemiology. DC: APIC, 2000.
Department of Health and Human Services, Centers for Disease Control and Prevention. October 2004