Infection Control Plan- Respiratory Illness

This plan provides guidance to implement certain infection prevention and control practices of respiratory illness. It is based on CDC guidance for COVID 19, Influenza and RSV illnesses.

The COVID 19 virus is reportedly transmited by a combination of droplet and airborne particles. These particles can travel up to 6 feet and may be carried through the air in droplets so small that they stay in air currents and can be inhaled.

The influenza virus, commonly referred to as the "Flu" is reportedly spread by large droplets when a person coughs, talks, or sneezes.

RSV is spread through contact with droplets from the nose and throat of infected people when they cough and sneeze.

Symptoms of COVID 19 include:

- Cough
- Shortness of breath or difficulty breathing
- Fever
- New loss of taste or smell
- Chills
- Muscle pain
- Sore throat

COVID 19 Prevention and Preparedness Measures

19.	office does not anticipate caring for patients who are suspected or confirmed to have COVID-All routine appointments will be rescheduled when the patient is no longer contagious. Soffice anticipates caring for patients who are suspected or confirmed to have COVID-19.			
	owing measures are in place to reduce potential exposure to SARS-CoV-2, the virus that causes 19, and possible spread of infection.			
	Signs will be posted to remind anyone who enters to notify the office if they meet any of the following three criteria:			
	 a positive viral test for SARS-CoV-2, 			
	o symptoms of COVID-19, and/or			
	 close contact with someone with SARS-CoV-2 infection. 			
	Additional signage will be posted to provide directions for anyone entering the office/facility current infection control recommendations. Alerts will address hand hygiene measures and respiratory hygiene and cough etiquette practices.			
	All non-urgent treatment will be postponed for patients with suspected or confirmed COVID-19 infection. If patient cannot wear a mask, non-urgent care will be postponed until the appropriate quarantine time has elapsed.			

Source Control ☐ All employees, patients, and visitors will wear masks while in the practice/facility. ☐ When **Hospital Admissions** levels are high or Respiratory Virus transmission (including influenza, RSV) is high masks will be worn in all areas where patients may be encountered. Source control is not indicated in well-defined areas that are restricted from patient access (break/locker rooms, offices, etc.) unless: **Levels** of respiratory virus are high. Exhibiting respiratory symptoms such as runny nose, cough, sneezing. The individual has high-risk exposure to someone with COVID-19. Masks should be worn for 10 days after the last known exposure. ☐ When **Hospital Admission** levels are low and respiratory virus transmissions are low masking will be optional for employees, patients, and visitors, unless: Exhibiting respiratory symptoms such as runny nose, cough, sneezing. o The individual has high-risk exposure to someone with COVID-19. Masks should be worn for 10 days after the last known exposure. **Patient Care:** All scheduled patients will be reminded to notify the office if they have indication of COVID-19 infection or other

respiratory symptoms.

 \square Signs will be posted at the entrance to the office.

☐ Messaging on business website

☐ Messaging when appointment reminders are sent.

Patients with symptoms of COVID-19 upon arrival will be:

- Provided a mask, if not wearing one.
- Advised to return home, self-isolate, and to contact their healthcare provider for further direction. Remind the patient to call 911 for any life-threatening symptoms.
- Advised to reschedule appointment when they are no longer at risk of transferring the infection.

Personal Protective Equipment

The following PPE is available for use during the delivery of healthcare. Use is determined based on the risk of exposure to blood, bloody saliva, and possible respiratory illness.

- Gowns and gloves
- Masks
- Eye protection (face-shield/goggles)
- N-95 respirators or higher upon employee request

Performing Aerosol-Generating Procedures

When performing aerosol-generating procedures on patients not suspected or confirmed to have SARS-CoV-2 infection or other respiratory illness the following PPE will be considered:

- N-95 respirators or higher will be available for use.
- Eye protection (face-shield/goggles) will be used.
- During oral healthcare dental dams and high-volume evacuation (HVE) will be used.

NOTE: Commonly used dental equipment known to create aerosols and airborne contamina on include ultrasonic scaler, high-speed dental handpiece, air/water syringe, air polishing, and air abrasion. Medical procedures that can create aerosols are intubation, tracheotomy, CPR, bronchoscopy, and sputum induction.

Additional	strategies	to reduce	the chance of	f transmission:
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Treatment is provided in individual patient rooms whenever possible with the HVAC in constant ventilatio node.	n
This office has an open floor plan. The following strategies are utilized: At least 6 feet of space between patient chairs.	
Adjunct use of portable HEPA air filtration systems to enhance air cleaning. Physical barriers between patient chairs. Easy-to-clean floor-to-ceiling barriers will enhance ffectiveness of portable HEPA air filtration systems (check to make sure that extending barriers to the eiling will not interfere with fire sprinkler system). Operatories oriented parallel to the direction of airflow when possible. Where feasible, consider patient orientation carefully, placing the patient's head near the return air	
ents, Away from pedestrian corridors, and toward the rear wall when using vestibule-type office	

Employees are encouraged to self-monitor for signs and symptoms of COVID-19 and other respiratory illnesses. If experiencing symptoms of a COVID-19 infection or other illness, notify the employer, remain at home, and seek testing and/or medical care.

Return to Work for COVID 19

Employees with mild to moderate illness, who are not moderately to severely immunocompromised may return to work based on these CDC guidelines:

At least 7 days have passed since symptoms first appeared if a negative viral test* is obtained within 48 hours prior to returning to work (or 10 days if testing is not performed or if a positive test at day 5-7), and

• At least 24 hours have passed since last fever without the use of fever-reducing medications, and

Symptoms (e.g., cough, shortness of breath) have improved. If testing is NOT performed, then return to work on day ten.

The worker must be fever free for 24 hours without the use of fever-reducing medications and symptoms have improved.

Workers who are asymptomatic and are not moderately to severely immunocompromised may return to work after the following criteria have been met:

- At least 7 days have passed since the date of their first positive viral test and if a negative viral test* is obtained within 48 hours prior to returning to work.
- If testing with an antigen test, the test is negative on day 5 and 48 hours later.
- If testing is not performed, or if a positive test on day 5 -7, then return to work on day 10.

Employees with severe COVID-19 or immune disease extending time of infectivity will be allowed to return to work based on the guidance of a licensed healthcare provider regarding return to work.

*Either a NAAT (molecular) or antigen test may be used. If using an antigen test, HCP should have a negative test obtained on day 5 and again 48 hours later

Symptoms of Influenza:

- Cough
- Sore throat
- Stuffy/runny nose
- Muscle/body aches
- Headaches

Symptoms of RSV

- Runny nose
- Sore throat
- Cough and headache

Return to Work for Influenza, RSV

- Employees with confirmed flu who have a fever should be fever free for 24 hours without the use of fever reducing medicine. Employees with suspected or confirmed flu, who do not have a fever, should stay home from work at least 4-5 days after the onset of symptoms.
- Employees with RSV are contagious for 3-8 days. Employees can return to work when fever- free for at least 24 hours and symptoms have improved.

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- Training will be provided to employees on respiratory illness protection and how to reduce the exposure and spread of infection
- Employees are to notify their manager and stay at home if exhibiting symptoms of illness.
- If symptoms appear during the workday, the employee must report to their manager, leave the office, and seek medical advice/care.

Reference and Resources

- **1. CDC Coronavirus (COVID-19) Homepage:** Landing page for all CDC guidance related to SARS- CoV-2 and COVID-19. https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html
- **2. Guidance Documents:** From this page all topics can be reached specific to the delivery of healthcare and worker safety. https://www.cdc.gov/coronavirus/2019-ncov/communication/guidance.html
- 3. Pages of interest:

 Infection Control Guidance for Healthcare Professionals about Coronavirus (COVID-19): Review of key infection control and prevention strategies for the broader healthcare community. https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control- recommendations.html
 Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2: https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk- assesment-hcp.html
 Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID 19) https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html
 Clinical Questions + Answers: https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#Infection-Control
- **4. State Health_Department Contact Information:** Case numbers and community spread information. https://www.cdc.gov/publichealthgateway/healthdirectories/healthdepartments.html