

REQUIRED LEARNING 2021 PART 2 (of 3)

This learning packet is for North Memorial Hospital individuals in a non-customer care role. It presents fundamental and important information that helps us create a safe and caring environment for our customers and team members. The information provided on various topics have been contributed by NMH subject matter experts.

The topics covered in Part 1 are:

- Emergency Response & Equipment Safety
- Infection Prevention
- Respirator Training
- OSHA COVID-19 Essentials
-

Emergency Response and Equipment Safety

2021




Activate Emergency Responses & Codes

On Campus

- Dial *99 on any campus phone
- Say "Call Star 99" into Vocera
- Designated button in patient care room

Off Campus


- Dial emergency number (911, 9-911)



Emergency Response

Code Red
Code Green
Code Blue
Code Pink
Rapid Response Team
Severe Weather Alert
Code Walker
Active Threat
Incident Management Response Team

Click each of the buttons to the left to learn more. The next button will appear once you have viewed all the buttons.



Emergency Response

Code Red
Code Green
Code Blue
Code Pink
Rapid Response Team
Severe Weather Alert
Code Walker
Active Threat
Incident Management Response Team

Fire or Smoke

- Rescue anyone in danger
- Contain the fire by closing room and fire doors
- Alert by pulling the fire alarm
- Alarms will sound and location will be broadcast

Emergency Response

Code Red	Aggressive Individual - Emergency Assistance Needed <ul style="list-style-type: none"> • Activate a Code Green team by pressing a Code Green button in the customer room or by calling *99 • Code Green will be broadcast and a Code Green team will respond to the identified location • Stay CALM and remove yourself and others from immediate danger
Code Green	
Code Blue	
Code Pink	
Rapid Response Team	
Severe Weather Alert	
Code Walker	
Active Threat	
Incident Management Response Team	

Emergency Response

Code Red	Adult/Pediatric Cardio Pulmonary Response (CPR) <ul style="list-style-type: none"> • Activate a Code Blue team by pressing a Code Blue button in a customer's room or by calling *99 for codes not in a customer's room. • Code Blue Team will respond to identified area • Provide appropriate intervention (initiate CPR) • If Code Blue is called in your work area, return to area and assist with other customers.
Code Green	
Code Blue	
Code Pink	
Rapid Response Team	
Severe Weather Alert	
Code Walker	
Active Threat	
Incident Management Response Team	

Emergency Response

Code Red	Infant/Child Abduction <ul style="list-style-type: none"> • Team Members call *99 once it is confirmed that the infant/child is missing. • Safety & Security will broadcast and respond to the identified area • All Team Members will monitor corridors and exits for missing infant/child or suspicious activity • If found or suspected that you have found the abductor, DO NOT approach the individual(s) • Call *99 to report suspicious individuals or activity.
Code Green	
Code Blue	
Code Pink	
Rapid Response Team	
Severe Weather Alert	
Code Walker	
Active Threat	
Incident Management Response Team	

Emergency Response

Code Red	Customer in Need of Immediate Medical Assessment <ul style="list-style-type: none"> • If a customer's condition rapidly changes and assistance is needed from a team of critical care clinicians, press the Rapid Response button in the customer's room or call *99 and give location • Rapid Response Team will be notified to respond to the identified location.
Code Green	
Code Blue	
Code Pink	
Rapid Response Team	
Severe Weather Alert	
Code Walker	
Active Threat	
Incident Management Response Team	

	Emergency Response
Code Red	Severe Weather Alert (tornado, severe thunderstorm, etc.) <ul style="list-style-type: none"> • Weather warnings with imminent threat will be broadcast • Move and/or direct visitors & customers away from windows • Customers who cannot be moved, should be turned away from windows and protected with pillows and blankets
Code Green	
Code Blue	
Code Pink	
Rapid Response Team	
Severe Weather Alert	
Code Walker	
Active Threat	
Incident Management Response Team	

	Emergency Response
Code Red	Missing Customer (Elopement) <ul style="list-style-type: none"> • Call *99 to report a missing individual who is 18 years or older and on holds or suffers from conditions that may prevent him/her from making rational decisions or cause them to wander away • Monitor corridors and exits • Safety and security will broadcast and respond to identified area • Call *99 to report the location of the found individual
Code Green	
Code Blue	
Code Pink	
Rapid Response Team	
Severe Weather Alert	
Code Walker	
Active Threat	
Incident Management Response Team	

Emergency Response	
Code Red	Immediate Threat <ul style="list-style-type: none"> • Aggressive individual with an object or weapon • Something that can cause bodily harm, injury, or death • Hostage situations
Code Green	
Code Blue	
Code Pink	
Rapid Response Team	Potential Threat <ul style="list-style-type: none"> • Suspicious item: backpack, package, unattended weapon, etc. • Verbal/Written Threat: phone call, bomb threat, in-person note, email • Civil Unrest: protest, demonstration, upset family members/customers
Severe Weather Alert	
Code Walker	
Active Threat	
Incident Management Response Team	

Emergency Response	
Code Red	Department Specific or Complex Emergencies <ul style="list-style-type: none"> • Incident management team requested or assigned to manage large scale or complex emergency, such as a mass casualty incident or IT downtime, etc.
Code Green	
Code Blue	
Code Pink	
Rapid Response Team	
Severe Weather Alert	
Code Walker	
Active Threat	
Incident Management Response Team	

Code Pink

A
C
T
I
V
A
T
I
O
N

- Any team member first aware of an **actual or attempted infant/child abduction** needs to call *99 or by Vocera "Call Star 99" and advise operator of Code Pink and location.
- State your name and call back extension. Remain on hold with the operator.

A
C
T
I
V
A
T
I
O
N

R
E
S
P
O
N
S
E

T
E
A
M
M
E
M
B
E
R

R
E
M
I
N
D
E
R
S

[Click here to continue.](#)

Code Pink

A
C
T
I
V
A
T
I
O
N

R
E
S
P
O
N
S
E

- All departments must deploy team member(s) to observe the nearest exits and stairwells and report any sighting by calling *99.
- Unit/department team members from the area of the announced abduction will report immediately to their area to assist in response efforts.
- Do a headcount of all children in your area.
- Department team members, not watching exits and doorways, must check all dept. spaces including rooms, bathrooms, closets and garbage cans for unauthorized person or missing child.
- If a Team Member sees a suspicious package, bag, backpack etc. please alert Security so they can conduct a search of the contents.
- All team member(s) should remain in their department or watch stair/exit locations until "Code Pink All Clear" is announced overhead.

T
E
A
M
M
E
M
B
E
R

R
E
M
I
N
D
E
R
S

[Click here to continue.](#)

Code Pink

A
C
T
I
V
A
T
I
O
N

R
E
S
P
O
N
S
E

T
E
A
M
M
E
M
B
E
R
S

- Team members should not attempt to apprehend a suspected abductor.
- If a team member can maintain personal safety, you may follow at a distance to note route of escape, physical characteristics and clothing and possible vehicle license number.

STROKE at North Memorial Health Hospital

Stroke Symptoms may include problems with:

Balance,
changes in **E**yesight,
Facial droop,
Arm/leg weakness or numbness,
difficulty with **S**peech, or a sudden, severe headache.
Time is brain.

If it seems like a lot to remember, just remember **BEFAST**.

STROKE at North Memorial Health Hospital

Immediate interventions include:

- Call for Help.
- Activate a Rapid Response by pushing the Rapid Response button on the call panel in the patient room or using your Vocera or phone to call *99. Give the patient location and your name.
- Reassure patient that help is on the way.
- Avoid giving anything to eat or drink.
- Once Rapid Response Team arrives, describe what you saw that made you call the Rapid Response.
 - If the responding doctor agrees it's a possible stroke, it should be escalated to a Rapid Response STROKE - Hospital, by paging/consulting neurology once directed by the MD. The original responding CC Flyer RN should call the CCRT by Vocera with an update that the Rapid Response has been escalated to a Rapid Response STROKE.

Evacuation Process

Know at least two ways (routes) out of your area in the event one route cannot be used. Move people in immediate danger to the next safe place (refuge area) on the same level/floor, which is called horizontal evacuation.

Horizontal Evacuation



Vertical Evacuation



Evacuation Process (cont)

- Move persons who can walk first. Know the location of and how to use equipment (e.g., wheelchairs, carts, evacuation chairs) that can be used to evacuate patients/persons. Provide special assistance to persons with a disability or special needs.
- Check victims/patients after moving them to a safe area. Make sure you can account for everyone. Count heads.
- As directed by the hospital administrator in charge or other authority, move person down one or two levels/floors (vertical evacuation) or out of the building (external evacuation).
- Stay calm, help all customers and team members to move safely. Make sure all are accounted for.

Evacuation Aids

[**Click on each image to learn more.**](#)



Evacuation Process (cont)

Stryker Evacuation Stair Chairs

- Located throughout the hospital
- Weight capacity: 500 lbs
- Stored Total: 7 units

[Back](#)

Evacuation Aids

[**Click on each image to learn more.**](#)



Evacuation Process (cont)

Med Sleds – Evacuation Tool

- Located throughout the hospital
- Med Sled weight capacity: 1000 lbs

[Back](#)

Evacuation Aids

[Click on each image to learn more.](#)



Code Red

Rescue anyone in danger

Confine by closing doors. Only go through the fire doors to evacuate or move people to an adjacent safe place (area of refuge). Do not use elevators.

Alert by pulling alarm or dialing *99 and giving your location



HOW TO USE A FIRE EXTINGUISHER

PASS

Click on each letter above to learn what it stands for.

HOW TO USE A FIRE EXTINGUISHER



Pull the pin
in the handle



Aim the nozzle
at the base
of the fire



Squeeze the
lever slowly



Sweep from
side to side

Smoke Compartments

- Fire doors will close with activation of fire alarm
- Fire doors should only be opened to allow for movement to the next compartment – do not wedge doors open
- There is a 2 hour fire rated separation between the compartments
- Each compartment has a stairwell for movement to the next level of the building if necessary



Communication System Failure

Telephone System Failure: Essential areas have the 511E Intercom system to communicate between departments and/or Emergency Power Failure Phone, which are either all RED or have a RED handset cord, to make outgoing calls and take incoming calls.

Team members may also use:

- computerized tube system
- portable walkie-talkies
- Vocera
- runners/messengers



Downtime

- In the event there is a downtime involving IT systems (EPIC, Internet, etc.) you should be familiar with your department's DOWNTIME BOX and procedures.
- Downtime procedures should be followed until IT has given the all clear message.
- Team members are responsible for understanding how to use the paper forms in their department's downtime box.

Severe Weather – Tornado

What's the difference between a tornado watch and a tornado warning?

Click here for

**Tornado
Watch**

**Click
here to
continue.**

Click here for

**Tornado
Warning**

Severe Weather – Tornado

What's the difference between a tornado watch and a tornado warning?

TORNADO WATCH is a National Weather Service alert to possible tornado development in a specified area over a specified period of time.

Click
here to
continue.

TORNADO WARNING OR VERY DESTRUCTIVE WINDS WARNING is a National Weather confirmation of a tornado sighting or the existence of 75 MPH winds, location, time of detection and direction of movement.

General Protocol

Next

IN EVENT OF A TORNADO **WARNING** BY THE WEATHER SERVICE, THE FOLLOWING PROTOCOL WILL BE INVOKED. THE CALL CENTER WILL PAGE "**ACTIVATE WEATHER ALERT**" THREE TIMES WHICH IS PRECEDED BY A SIREN TONE ALERT.

- Close and lock all outside windows. Remove all objects from window sills
- Pull shades and drapes on all outside windows (this includes all non- patient rooms also).
- Lower all patients' beds to minimum height.
- Turn corridor lights on.
- Reassure patients as you proceed. Leave lights on in the rooms.
- "Patient room" doors may be left open at the discretion of the nursing personnel (close all other doors).
- Do not panic; do not shout; do not run. Keep all persons away from outside windows.
- Do not restrict use of elevators.
- Employees shall return to their work station or department and remain there until "all clear" is announced
- Notify Call Center by dialing *99 if there is damage or a problem in your area.
- Files and drawers shall be closed.
- Visitors in Plaza Level classrooms, boardrooms, cafeteria, etc., will be told of Warning by Food & Nutrition Services or Dietary.
- Persons in areas with exterior glass will be directed to leave the area and report to an inner hallway or the Plaza Level Cafeteria.
- Persons in the Atrium area will be advised by the Information Desk to report to the lower level of the Atrium.

Personal & Family Emergency Preparedness

Be Informed! Know what to do before, during and after an emergency that could impact you, your family, your workplace or community. For example, external emergencies may be weather-related such as tornadoes, severe thunderstorms, ice storms or blizzards. External emergencies may also be mass casualty incidents or communitywide outbreaks (like influenza) where many people show up at the hospital for care. Emergencies may also be internal such as IT or communication failure, a utility failure or a security type incident.

[MN Homeland Security Management](#)

[Click here to continue.](#)

Make a Plan

Build a Kit

Get involved

Know your role when there are emergencies at work (see NMMC Emergency Codes). Review the policies and procedures BEFORE you need to use them and contact your manager/supervisor or NMMC Emergency Management Coordinator if you have questions.

Know your role

Personal & Family Emergency Preparedness

Be Informed! Know what to do before, during and after an emergency that could impact you, your family, your workplace or community. For example, external emergencies may be weather-related such as tornadoes, severe thunderstorms, ice storms or blizzards. External emergencies may also be mass casualty incidents or communitywide outbreaks (like influenza) where many people show up at the hospital for care. Emergencies may also be internal such as IT or communication failure, a utility failure or a security type incident.

[MN Homeland Security Management](#)

[Click here to continue.](#)

Make a Plan

Build a Kit

Participate in drills.

Get involved

Know your role

Personal & Family Emergency Preparedness

Be Informed! Know what to do before, during and after an emergency that could impact you, your family, your workplace or community. For example, external emergencies may be weather-related such as tornadoes, severe thunderstorms, ice storms or blizzards. External emergencies may also be mass casualty incidents or communitywide outbreaks (like influenza) where many people show up at the hospital for care. Emergencies may also be internal such as IT or communication failure, a utility failure or a security type incident.

[MN Homeland Security Management](#)

[Click here to continue.](#)

Make a Plan

Good examples can be found at www.ready.gov. Make it a family activity!

Build a Kit

Get Involved

Know your role

Personal & Family Emergency Preparedness

Be Informed! Know what to do before, during and after an emergency that could impact you, your family, your workplace or community. For example, external emergencies may be weather-related such as tornadoes, severe thunderstorms, ice storms or blizzards. External emergencies may also be mass casualty incidents or communitywide outbreaks (like influenza) where many people show up at the hospital for care. Emergencies may also be internal such as IT or communication failure, a utility failure or a security type incident.

[MN Homeland Security Management](#)

Based on the types of emergencies you expect, build a plan for your family including child care, elder care, pet care and any specific care for family members with special needs.

Make a Plan

Build a Kit

Get Involved

Know your role

Backup Generators

- Electrical outlets connected to back up generators have **RED outlets** and/or plates.
- Think ahead about how you would deal with a power failure and working with only emergency power. What would your environment look like with only emergency power? How would patient care be different?
- Know which equipment has battery operated back up. Make sure emergency equipment is plugged into a **RED outlet**. Extension cords can be used temporarily.
- Emergency generators are tested monthly.

Utility Management and Reporting

Notify Maintenance at x12390 for the following utility failures or problems:

- Electricity
- HVAC (heating, ventilation and air conditioning)
- Water and sewer
- Elevators
- Medical gases including:
 - medical air
 - clinical vacuum
- Computerized tube system
- Intercoms



Notify IT at x12580 for other communication systems problems or failures, such as telephones and pagers. There are back up systems in place for most utility failures.



Shutting Off Oxygen Valves

- All patient care providers authorized to use oxygen may turn off local oxygen meters, regulators, or valves located in patient care /treatment rooms.
- Zone valves may only be turned off by authorized staff (Maintenance, Respiratory Care Practitioners, Administrative Managers, and manager/charge person). A label on each zone valve lists persons authorized to turn off a zone valve. Each zone valve is labeled with the rooms/areas it supplies.
- Signage available from the Respiratory Therapy Department must be posted on zone valves out of service, or whenever the oxygen system needs to be taken down for either elective or emergent reasons.



Electrical Safety

- Most equipment in the healthcare setting is electric so there is a risk of electric shock. Electric shock can cause burns, muscle spasms, ventricular fibrillation, respiratory arrest and death.
- To help prevent electrical accidents, remove and report electrical hazards, use electrical equipment properly, maintain, test, and inspect equipment and use power cords and outlets properly.

Storing Compressed Gas

Portable Oxygen Devices

- All compressed gas cylinders must be properly secured (e.g., in a tank holder, wheeled cart, or chained to a fixed object such as a wall) when being stored or during customer transport so they cannot fall or bang violently against one another. Each tank must be stored individually.
- North Memorial has two categories of tanks. Full tanks are tanks that have not been opened and have plastic wrap around the neck of the cylinder. Empty tanks are tanks that do not have the plastic wrap around the neck of the cylinder. They may have a regulator on them or nothing at all. Empty tanks can still be used for customer care, but the amount of gas remaining in the cylinder must be checked to ensure it is enough for the task. Tanks are officially empty and should not be used if they have less than 500 psi in them.

Storing Compressed Gas

- No more than 12 FULL oxygen E (transport size) cylinders/tanks can be stored in the same area. Remove empty tanks as soon as possible. Tanks on carts and wheelchairs are considered in use and do not count toward the 12 tank limit.
- Not all oxygen cylinders are hospital property. A large number of customers bring in portable oxygen cylinders when they are admitted. Do not use customer owned or patient rented oxygen cylinders for hospital use. They must be kept separate in the customer room or sent home with the family.



Hallway Clutter

Corridor clutter is any item that creates an obstruction in a corridor or exit path. The Life Safety code requires that “all exit paths must remain free of obstructions, including unattended items that are not considered in use by staff members.” In other words, any item not in use or unattended for more than 30 minutes -- or blocking the egress -- can be considered clutter. The exceptions to this rule allow crash carts and patient isolation supply carts (provided the cart is serving a patient on contact precaution isolation) to be left unattended longer than 30 minutes.

[Click here to see why is this so important...](#)

[What you can do to keep hospital corridors free of obstructions?](#)

Hallway Clutter

Why is this so important?

In fire and other emergency scenarios, it may become necessary to relocate or evacuate customers, often in reduced visibility. On first appearance, corridors seem to have ample space for many items that help support patient care: equipment, supply carts, food carts, empty beds, etc.

[Click here to see why is this so important...](#)

[What you can do to keep hospital corridors free of obstructions?](#)

Hallway Clutter

To keep the hospital corridors free of obstructions:

- Items in a hallway waiting for direct patient use within 30 minutes should all be placed to one side of the corridor, against the wall.
- Do not allow items to block stair tower doors, extinguisher cabinets or cross automatic smoke or fire doors.
- In the event of an emergency requiring evacuation, move items out of the corridors and into unoccupied rooms or behind the nurse stations to allow unobstructed egress.

[Click here to see why is this so important...](#)

[What you can do to keep hospital corridors free of obstructions?](#)

Safe Medical Devices - Test Prior to Use and Routine

Equipment Failure Incidents

- Safety testing of medical equipment: Customer care and some non-clinical equipment that requires preventative maintenance will have a preventative maintenance (PM) sticker on it. If you see a sticker with an overdue date, call the appropriate Engineering Department indicated on the label; BioMed, ext. 1-2440 (763-581-2440) or Maintenance, ext. 1-2390 (763-581-2390).

[What if equipment fails/breaks?](#)

[What is a safe medical device related incident?](#)

Safe Medical Devices - Test Prior to Use and Routine

Actions to take if equipment fails/breaks:

- Remove it from service.
- Put on a defective sticker.
- Call the appropriate Engineering Department.

What if equipment fails/breaks?

What is a safe medical device related incident?

Safe Medical Devices - Test Prior to Use and Routine

If medical device (anything used in customer care that is not a drug) may have contributed to the serious illness, injury or death of a patient or a user, it may be a Safe Medical Device reportable incident. In this event:

- Attend to the medical needs of the customer/user.
- Remove the equipment from service.
- Put on a defective sticker, noting it was involved in an incident.
- Tell the area's manager/supervisor.
- Save the disposables for evaluation during the investigation of the incident.
- Complete a Safety First Report.
- Call BioMed, ext. 12440 or 763-581-2440 and Risk Management, ext. 12390 or 763-581-2390.

What if equipment fails/breaks?

What is a safe medical device related incident?

Slips, Trips and Falls

Most falls occurring from slips and trips are due to slipping on an icy surface or tripping over an object. A fraction of the falls occurs when people fall off ladders or steps. It is also a fact that falls at the workplace can be prevented. Look for ways to prevent slips, trips and falls:

- Ensure that all spills and wet surfaces are immediately cleaned up from the floor.
- See to it that all walking pathways in the workplace are clutter-free.
- In case you need to reach up to something that's high up in the office, always use a safe stepladder. Never use chairs or desks to climb up to access things above your head.
- Make sure that you only carry loads that you can safely handle. While carrying objects, make sure that your line of vision is not affected and that you are not carrying a load that is too heavy.
- Always have good illumination around the office space. Whether indoors or near to the exteriors, ensure that lighting is adequate and visibility is not affected.
- Always wear good footwear. We may not have control over the condition of the surface that we walk on, but we do have control over what we choose to wear on our feet.

The End

There is no quiz with this module.

CLOSE THIS MODULE.

Infection Prevention

Infection Prevention

2021



Your Infection Prevention Team – Here to Assist!



763-581-4660



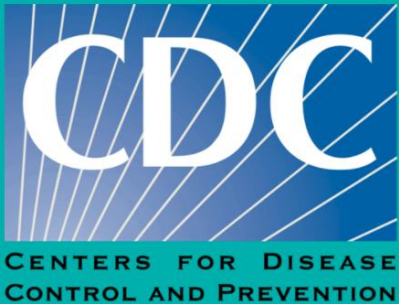
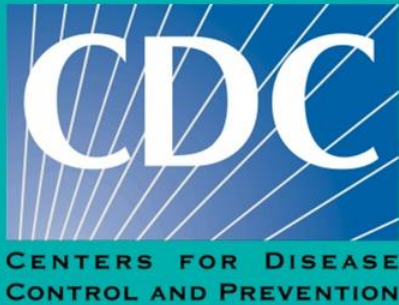
612-580-0218

Listed on Amion Infection Prevention
Rounder



1-1234
or
Vocera

According to the CDC, what is the single most important procedure for preventing healthcare acquired infections?



“Hand hygiene is the single most important procedure for preventing healthcare acquired infections”

Click anywhere to continue.



Hand Hygiene Step 1: Clean



Hand Hygiene Step 1: Clean

WATERLESS HAND RUB

- Rub all surfaces (including nails)
- Don't use after caring for patient with diarrhea or when hands are soiled - use soap and water

HAND WASHING

- Moisten with water
- Mechanically wash surfaces for 20 seconds (including under nails)
- Thoroughly rinse
- Pat hands dry
- Use paper towel to turn off faucet

Hand Hygiene Step 2: Moisturize

Take care of your hands- the most commonly used medical instrument

- Use moisturizing lotion or cream in your work shift to keep skin neutral
- See Team Member Health if you are having skin difficulties or product concerns



Jewelry and Nails

A Patient Safety Concern

- Artificial nails, nail polish and jewelry are prohibited in some departments such as: performing patient care in the NICU, in an or sterile field, or for certain tasks in Pharmacy.
- Natural fingernails should be kept short, ($<1/4$ inch), and clean. Nail polish, when worn should be kept fresh, (i.e. not chipped or peeling). Nail enhancements, (including any substance or device applied to the nail to lengthen or strengthen, such as tips, wraps, gels, overlays, extenders, acrylics, tapes, appliques, piercing's, or jewelry), shall not be worn.

Equipment & Cleaning

Equipment Cleaning and Disinfecting

- Always consult manufacturer's instructions for cleaning and disinfection to prevent damage
- Team members are responsible for cleaning and disinfecting equipment after use and when removed from the room.



NMHH/Blaze

Click this box to continue

MGH

Click this box to continue

Instructions For Use Can be Found on MGH Intranet

1. Go to "tools" on the intranet and click on "Manufacturer's Instructions for Use".
2. Type in your piece of equipment in the key word box.
3. Scroll down to the correct model number and click "View Document" over on the right.
4. Search the table of contents for "cleaning and disinfection" or whatever it is you're interested in.



Click this box to continue.

Equipment Cleaning and Disinfecting

- Effective killing of environmental organisms **requires contact time**, the amount of time that the surface is wet and remains undisturbed
 - Time is found on the product label



Disinfection Wipes for Patient Care Items & Environmental Surfaces

Click on each of the wipes to learn more.



Disinfection Wipes for Patient Care Items & Environmental Surfaces



PDI Super Sani-Cloth Wipe
Purple Top

- Primary Surface disinfection
- Alcohol/Quaternary
- 2 minute contact time

Back

Disinfection Wipes for Patient Care Items & Environmental Surfaces



PDI Sani-Cloth Bleach Wip
Orange Top

- Enteric Isolation
- Vomiting and diarrheal illness disinfection
- 4 minute contact time

Back

Disinfection Wipes for Patient Care Items & Environmental Surfaces

PDI Easy Screen Wipe White Top

- Anti-streaking cleaning for touch screen equipment
- 70% Isopropyl Alcohol

Back

wipes to learn more.



Disinfection Wipes for Patient Care Items & Environmental Surfaces

PDI Sani-Cloth AF3 Gray Top

- Alcohol Free Quaternary
- 3 minute contact time
- Use only per manufacturer instructions

Back



Infection Prevention Precautions

Keeping You and the Patient Safe

Standard Precautions

Are used for all patients, all the time

Treat all patient's blood or body fluids as if they are infectious.

- Use personal protective equipment (PPE) based on exposure anticipation
- Practice sharps safety
- Use respiratory etiquette (cover your cough)
- Practice hand hygiene
- Clean and disinfect equipment after use

Universal Mask & Eye Protection Standard

As part of our COVID-19 universal precautions response, ALL team members should don mask upon entry to the building. Any team member having contact with a patient should also have eye protection. Glasses are not considered PPE.



https://www.freepik.com/free-vector/people-using-face-shield-mask_8408833.htm

Personal Protective Equipment



Personal Protective Equipment



- Wear gloves when touching abnormal skin, non-intact skin, rashes, blood, body fluids, mucous membranes, contaminated items and environmental cleaning products
- Additional indications for sterile vs. clean glove use can be found in the Standard Precautions policy available in C360
- Hand hygiene is required before and after donning/doffing gloves

[Back](#)

Personal Protective Equipment



- Are worn when anticipating contamination; for specific isolation; managing blood and body fluids and excretions
 - Gowns are generally worn in combination with other PPE
 - Put on before you go in the room
 - Take off before you exit
- A new gown is necessary with each encounter with the patient
- Perform hand hygiene after removal

[Back](#)

Personal Protective Equipment

As a result of the pandemic, everyone must wear a face mask while at North Memorial Hospital, Maple Grove Hospital, or clinic.

DONNING

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator

DOFFING

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



[Back](#)

Personal Protective Equipment

Worn to protect eyes when there is a risk of droplet dispersal, splashing of blood and or body fluids

- Full face shields are the preferred choice for eye protection which provides protection for eyes, nose and face
- Alternative eye protection options are also acceptable when worn with a mask including: Safety goggles and safety glasses with minimal gap between the glasses and forehead.
- Personal eyeglasses alone is not adequate protection



[Back](#)

Respirators

N95



PAPR



Elastomeric



The above are masks that you may see being used as well. There is a separate module that goes into greater detail about these masks for those individuals who will use them.

Donning and Doffing PPE

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

The following slides will follow the sequence in which PPE should be put on.