



hand hygiene

Strict HAND HYGIENE is required before and after contact with resident or resident environment, as well as before and after donning and doffing PPE



mask

Extended use for all resident interactions. Reuse after coffee break(s), change after meal break(s)

Change when damp, soiled, damaged.

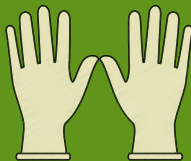


eye protection

Extended use for all resident interactions

Retain eye protection for full shift. When removed, clean, disinfect and store per protocol. Dispose if scratched or damaged.

<https://sharedhealthmb.ca/files/standard-operating-procedure-disinfecting-eye.pdf>



gloves

Routine Practices & Additional Precautions

NOT required for every resident interaction

Perform hand hygiene before AND after removing gloves.



gown

Routine Practices & Additional Precautions

e.g. MRSA, scabies, blood and body fluid contact

Change when damp, soiled, damaged.



N95 mask

Use N95 respirator if there is clinical concern of infection with airborne pathogen (eg. TB). Extended use of N95s for repeat encounters with multiple patients (except intubation).

Change when damp, soiled, damaged.

AGMPs in Long Term Care:

<https://sharedhealthmb.ca/files/agmps-and-long-term-care.pdf>