

## HICPAC Isolation Precautions Guideline Workgroup Call

September 15, 2022, 2:00 pm ET

### Participants

Workgroup: Sharon Wright, Mike Lin, Hilary Babcock, Elaine Dekker, Judith Guzman-Cottrill, Anu Malani, Mark Russi, Connie Steed, Deborah Yokoe

CDC: Mike Bell, Darian Bishop, Sydney Byrd, Abigail Carlson, Mylaica Conner, Marie de Perio, Jamesa Hogges, Melissa Schaefer, Devon Schmucker, Christine So, Erin Stone, David Weissman, Laura Wells

### Agenda

- Recap
- Evidence review update by Erin
- Transmission-based precautions categories (section C)

### Discussion Summary

#### Evidence review update

Ms. Stone led a discussion on the status of the evidence reviews on masks and eye protection.

- Masks
  - The OGER team is reviewing 99 relevant studies, which were narrowed down from 5600 titles and abstracts.
  - This will be narrowed down further as they look for the best available evidence on a pathogen-by-pathogen basis.
  - The goal is to send out summaries for acute respiratory infection outcomes and influenza outcomes for the group to review before the next meeting.
  - There is a large amount of data for SARS-CoV-2, so this will take longer.
  - There are about 100 articles on adverse events, which are being aggregated for the different mask types as well.
- Eye protection
  - A request for information has been sent for the library to draft a search.
- Members discussed if this would lead to general recommendations vs. pathogen-specific.
  - The hope is that the evidence will show if they all behave similarly or not.

#### Transmission-based precautions categories (section c)

Dr. Lin reviewed the draft of potential transmission-based precaution categories.

- There are three proposed categories for pathogens transmitted by air and two for pathogens transmitted by touch.
  - The PPE for each category is the minimum PPE recommendation and can be upscaled.
- Members expressed concern about seasonal flu being under the respiratory plus category and that science and evidence will need to be shown in the rationale.
  - Members discussed source control and that a facility might decide to implement higher precautions during a bad flu outbreak or during a year when the vaccine is not as effective.
  - From the chat: Our healthcare system has, on occasion, used universal face mask use for flu outbreaks.
- A member brought up a question about the labels and if each category should have one label to address everything or two labels, one for respiratory protection and one for air handling.
  - Two labels may be more difficult to operationalize, so bundling under one label might be more straightforward.

- From the chat: Agree with idea of a bundle category. We have bundled things together for COVID-19 and now MPX as well in our order set. They are sharing same signs and they call out eye protection as required component.
- It was suggested that there should be clear criteria for when a pathogen, such as SARS-CoV-2, can be downgraded from respiratory plus to respiratory.
- There was a discussion about eye protection and if it should be in respiratory/respiratory plus or should the recommendation be per Standard Precautions.
  - From the chat: An example of airborne material impacting the eyes is allergens like pollen or dander, causing allergic conjunctivitis.
  - A member suggested it may be better to tackle this in Standard Precautions, where there is a risk assessment to determine the level of PPE.
  - From the chat: I worry about allowing too much room for judgment for the grey areas (e.g., when to use eye protection, whether seasonal influenza is respiratory vs. respiratory plus depending on vaccine coverage). HCP are busy and just want to know what PPE to wear...
    - When it comes to implementation on the front lines, it must be very clear-cut.
- A member asked if the AIIR title will need to be changed to avoid using the term airborne.
  - From the chat: airborne infection isolation rooms used to be called negative pressure isolation rooms <https://www.cdc.gov/infectioncontrol/guidelines/isolation/glossary.html>
  - From the chat: My facility still uses the term negative pressure room as they understand it. The rooms with AIIR signs led to consternation and confusion for quite some time.
- The group discussed the placeholder labels and the need for these labels to be simple and reflect the rationale behind the label.
  - From the chat: It would be great to consider standardized signage for consistent communication.
  - These labels are placed on the patient's door, so they should not be too lengthy or too descriptive.
- The group discussed seasonal viruses that do not require droplet precautions, such as rhinovirus.
  - A few members said their facilities have droplet precautions in addition to contact for rhinovirus.
  - From the chat: Currently, there are multiple respiratory viruses in the Appendix A table for which droplet precautions are not required.
  - From the chat: Having different isolation precautions/combinations of isolation precautions for the different non-COVID community respiratory viruses has always been confusing to HCP and hard to operationalize.
  - From the chat: We did the same as we have been doing all the resp virals which does complicate things.
  - From the chat: We do same thing - if ID'ed by our BioFire RVP then we isolate. And for children under certain age (cannot recall it) we use both Droplet and Contact.
  - It is less complicated to treat all respiratory viruses the same.
- The group discussed the new types of masks, such as ASTM masks.
  - A member suggested that the ASTM level 2 mask may be sufficient for most situations.
  - The group discussed the cost and availability of these masks.
  - ASTM masks could go in row 1 and potentially in row 2.
  - The use of N95s would be reduced to extremely specific situations.
  - The group agreed they need to seek more information on the new masks.

- From the chat: See <https://www.cdc.gov/niosh/topics/emres/pandemic/default.html>. The ASTM performance plus masks are quantitatively rated for leakage ratio for source control, not protection of wearers.
- From the chat: For a better understanding of ASTM workplace performance masks, I suggest we ask our NIOSH SME in that ASTM work group to give us a primer.

The call adjourned at 3:02 pm with no additional comments or questions.  
The next Workgroup call is scheduled for September 29, 2022, at 2 pm ET.

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