

HICPAC Isolation Precautions Guideline Workgroup Call

July 6, 2023, 2:00 pm ET

Participants

Workgroup: Sharon Wright, Mike Lin, Elaine Dekker, Judith Guzman-Cottrill, Anu Malani, JoAnne Reifsnyder, Julie Trivedi, Deborah Yokoe

CDC: Mike Bell, Marie de Perio, Ryan Fagan, Alex Kallen, Fernanda Lessa, Melissa Schaefer, Devon Schmucker, Christine So, Erin Stone, Matt Stuckey, Laura Wells

Agenda

- Recap from prior meeting (5 min)
- Detailed review of Section B draft, Fundamental Elements

Discussion Summary

Detailed review of Section B draft, Fundamental Elements

After recapping the previous meeting, Dr. Wright led a discussion on Section B.

- Room ventilation was moved from section C to the end of section B.
- Each section is organized the same way.
 - Selection of PPE, criteria for use, indications, special situations
- Members discussed if masks and respirators could be separated into two sections vs. being lumped together.
 - They are different in terms of regulations.
 - Staff may look for them in the same place, so the members agreed to keep them under the same heading but have separate subheadings
- The group discussed disposable vs. reusable gowns.
 - There needs to be clarification that the reusable gowns are meant to be single-use and then laundered.
 - Some facilities use disposable because of the cost of laundering.
 - A member suggested that guidance on laundering gowns after a single use should be added, and they should be put in the hamper after a single use and not hung up.
 - Another suggestion was “reusable laundered after each use.”
- Language around reusable respirators, reuse of disposable respirators, and barrier face coverings was added.
 - The group agreed on removing the word “routinely” from the first bullet under the reuse section.
 - Members agreed with keeping the bullet referencing crisis capacity strategies.
 - A draft will be sent to NIOSH for review.
 - The group agreed it needs to be added that a PAPR respirator should not be worn for source control.
- Eye and face protection was reviewed
 - There could be a link to examples of appropriate eye/face protection.
 - Members asked about certain masks with eye shields and if they counted as proper eye protection.
 - This is also a question for NIOSH.
- This Environmental Control section was pulled from section C.
 - The group discussed renaming AIIR to Air Containment Rooms.

- Members agreed that if airborne and droplet terminology is going to change, then the word airborne should also be removed from the name of these rooms for consistency.
- A member suggested having a few sentences or a paragraph explaining the reason behind the change in terminology.
- Other topics that need further discussion: does there need to be an introduction to each section; transitioning from one section to the next; does there need to be a hierarchy of controls; when using the general term “mask,” there needs to be clarification on what type of specific mask to use in different situations.
- The group discussed Aerosol Generating Procedures (AGP).
 - Currently, there is no definitive list of procedures considered to be AGPs.
 - A member asked if, in addition to commenting about AGPs and respirators, should there also be a comment on the use of Air Containment Rooms during these procedures.
 - Comments made about defining AGPs:
 - A procedure that creates an extreme hazard that is different from coughing and sneezing.
 - Standard Precautions should cover procedures like a nasopharyngeal swab– if you think the person might sneeze at you, wear a mask/respirator and/or a face shield, but you do not need to be in a special containment room.
 - If a procedure produces mechanically generated aerosols that contain high concentrations of infectious respiratory material, then the special air containment is important to protect people outside the room – you do not want the infectious material to leave the immediate area.
 - Risk assessment is important – if there is a risk of being exposed, wear the proper PPE, but that differs from needing to contain the procedure.
 - Studies are being conducted, but that data will not be available in time for this update, so there needs to be something in the interim.
 - An update can be done when more data is available.
 - The importance of risk assessment should be addressed somewhere, possibly under special situations.
 - Risk assessment is important but is sometimes hard to apply in real life, so some parameters around which patients and what kinds of procedures will help determine when a special air containment room is required.
- Members discussed how to best respond to comments coming from outside stakeholders.
 - Reiterate to interested parties that in addition to the public comment period at the HICPAC meetings, there will be a 60-day written public comment period.
 - The presentations could also be posted but must be 508 compliant.

The call adjourned at 3:02 pm with no additional comments or questions.

The next Workgroup call is scheduled for July 20, 2023, at 2 pm ET.