

Appendix B - Process Map - Inpatient Unit

New suspect case already admitted on inpatient unit? Inpatient unit notified of suspected measles (via Outpatient, Emergency and Obstetrical Care Unit) see Appendix C Hierarchy Charge nurse notified of suspect case Ensure negative pressure room ready to receive patient. (Turned on and tissue test Provide patient with surgical mask. Staff to wear N95 mask Inform/page Most Responsible Physician of suspect Signage posted outside door including two-hour fallow time signage. Care team aware and wearing N95. case and assessment Clear hallway traffic for transport of patient arrival. Physician to don fit test N95 and assess patient Sending unit can proceed with transport of masked patient All transport staff to wear fit-tested N95 and Personal Protective Continue with care as per Equipment as per point of care risk assessment Appendix B Measles No Routine Practices and Patient identified Patients transport Maps Additional Precautions policy Clear transport pathway and elevator of all but transport staff as suspect Measles? and point of care risk Use most direct pathway to inpatient unit assessment Yes For case definitions for Physician notifies Public Health and Infection Prevention and Confirmed/Positive or Control Suspect/Probable Send Polymerase Chain Reaction testing of urine and Measles, please see the nasopharyngeal swab or throat:(orderable Ministry of Health VIRCO) AND measles serology IgG and IgM Measles: Information for Patient and care partner to remain in room with door closed **Health Care Providers** until transport to inpatient unit NOTE: Infection Prevention (publichealthontario.ca) And Control will conduct contact tracing for roommates of confirmed measle case

All health-care workers and staff entering the room should ensure they are immune to measles and should be wearing fit-tested N95
Patient Placement:

- Place patient in designated negative pressure room on airborne precautions
- Ensure signage including two-hour fallow time signage
- RN dons fit-test N95 respirator and performs a point of care risk assessment for any additional Personal Protective Equipment that may be required

Alternate placement: while waiting for negative pressure room

- If negative pressure is unavailable, activate alternative plan for patient placement in single room with closed door and place a Portable Hepa Filtration Unit in the room (if unavailable, submit Facilities request form asap)
- RN dons fit-test N95 respirator and performs a point of care risk assessment for any additional Personal Protective Equipment that may be required

Patients who have suspected or confirmed measles are restricted to their room/ unless medically necessary

- Medically necessary testing should be done at the end of the day to minimize exposures to others and ensure an appropriate
 room available to place the patient in immediately upon arrival.
- Ensure non-immune care partner remains in room while visiting. Grid for guidance
- Ideally elevator and pathway to be cleared of people other than transport personnel to avoid potential exposures
- Transport staff must wear fit-tested N95 and any additional Personal Protective Equipment as per point of care risk assessment

Discontinuation of Precautions or Discharge home:
See link in <u>Diseases and Conditions</u>
Patient Measles Fact Sheet and Isolation guidance

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