



Recommended Practices and Personal Protective Equipment (PPE) for Medical Clinics and Outpatient Facilities – Interim Guidance 18/01/2022

Evidence of Omicron-associated community transmission

The following are interim guidelines for the use of PPE in medical clinics/outpatient facilities **specific to COVID-19**. The presence or absence of symptoms and/or exposure risks will direct the provider or staff member to the recommended PPE for that particular encounter.

These recommendations do not supersede existing IPC guidance and occupational health and safety, requirements for protecting health care providers during the delivery of routine, direct patient care for other infectious diseases, such as tuberculosis (TB), measles or vancomycin-resistant enterococcus (VRE).

Screening questions: yukon.ca/sites/yukon.ca/files/covid-19_screening_questions_for_cn_md_clinics_mass_imms_oct_2020_final.pdf

Responding “yes” to any of the above questions will indicate the need for augmentation of Routine Practices. If the individual is unable to respond to the screening questions, treat as a risk factor (“yes”) and follow the augmented Routine Practices.

Please note, at this time we recommend all staff in clinical areas wear a surgical/procedural mask and eye protection at all times; administrative staff and those without direct patient contact wear a surgical/procedural mask; and all patients/clients wear a surgical/procedural mask.

- Masks should be worn continuously while in the workplace. Masks can be used for an extended period of time while seeing different patients.
- Masks should not be re-used.
- Eye protection refers to goggles, face shield/visor (either reusable or disposable) or mask with an attached visor.
- Masks and eye protection can be worn continuously between:
 - o Patients who do not have a COVID-19 risk, or
 - o Patients confirmed with the same virus (ex: all with COVID-19 and no other associated respiratory virus)
- Masks and eye protection should be changed, cleaned or discarded when:
 - o Damaged
 - o Wet or visibly soiled
 - o After caring for a patient in droplet or droplet/contact precautions and before caring for a patient not in precautions
 - o Between patients cared for in droplet or droplet/contact precautions for different viruses (e.g. one patient has COVID-19 and the other has Influenza)

For more information, see existing guidance documents PPE (Personal Protective Equipment)-extended use mask guidelines available at yukon.ca/en/health-and-wellness/health-concerns-diseases-and-conditions/find-information-health-professionals.

What are Routine Practices?

Routine Practices are the infection prevention and control (IPC) “practices for use in the routine care of all patients at all times in all healthcare settings and are determined by the circumstances of the patient, the environment and the task to be performed.”¹ Central to these Routine Practices is a point-of-care (POC) risk assessment. A POC risk assessment is performed by healthcare workers to determine which IPC measures are appropriate to assure safe patient care, given the symptoms of the patient and the intended interaction, and to protect the healthcare worker from exposure to infection (such as exposure to body fluids, respiratory secretions, sharps, etc.).

Routine Practices include, but are not limited to:

- Point-of-care risk assessment
- Hand hygiene (either soap and water or an alcohol-based hand sanitizer)
- Aseptic technique
- Patient placement and flow
- Appropriate use of PPE
- Management and cleaning of the patient care environment



The continuation of basic public health measures shown to reduce the risk of transmission and acquisition of COVID-19 is imperative to all interactions. These health measures include:

- **Physical/social distancing**
- **Hand hygiene**
- **Respiratory etiquette**

Additional measures can be put in place to help to create a safer environment for the patient and staff. Such environmental measures and visual cues include:

- Visual cues and signage at doors encouraging patients to call ahead if symptomatic
- Visual cues and signage re-enforcing good hand hygiene practices and respiratory etiquette
- Visual cues of signage with stop signs on sandwich board outside the health centre
- Plexiglass barrier for administrative staff
- Duct tape or other visual cue indicating appropriate spacing between patients
- Removing some seating in the waiting rooms to support safe distancing
- Staggering scheduled appointments in order to maximize capacity for physical distancing in the health center

The table on the following pages indicates the appropriate PPE for patient care based on target personnel and activity. If there are no COVID-19 symptoms or exposure risks (the patient responds “no” to the screening questions), continue Routine Practices relevant for the intended interaction.

If the patient responds “yes,” the patient can be safely seen in office for evaluation, diagnosis and treatment of an illness with staff using the appropriate PPE as per the table below. Consideration can be given to defer the visit for routine care, non-urgent cases. Providers are encouraged to re-book patient at time of deferral of visit.

¹ “Routine practices and additional precautions for preventing the transmission of infection in healthcare settings.” 2017-09-05. <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/routine-practices-precautions-healthcare-associated-infections.html> Accessed 2022-01-04.

Appropriate PPE for patient care for medical clinics and outpatient facilities, based on target personnel and activity.

Key:



Patients



Staff



Environmental Services

For individuals providing direct care to patients with suspected or confirmed COVID-19 outside the setting of an AGMP, contact/droplet precautions are recommended (eye protection, medical mask, gown, gloves). Discretionary use of an N95 instead of a surgical/medical mask is supported in circumstances where the healthcare provider determines the presence of an elevated risk of COVID-19 transmission with the patient interaction (based upon the PCRA).

Target space	Target personnel	Activity/Interaction	Recommended practices
Screening/ triage area	Staff	Screening or greeting a patient, not involving direct contact	Whether behind plexiglass or not: <ul style="list-style-type: none"> Wear a well-fitting surgical/procedural mask If the screener is moving away from the plexiglass and interacting with others, add eye protection Maintain at least 2 metres distance
	Patients	Being screened	<ul style="list-style-type: none"> Hand hygiene Surgical/procedural mask Give tissues for respiratory hygiene Maintain at least 2 metres distance Assure safe disposal of used tissues
	Patients	Being screened	<ul style="list-style-type: none"> Hand hygiene Surgical/procedural mask Maintain at least 2 metres distance
Clinical space	Staff	Tasks that do not involve patient contact	<ul style="list-style-type: none"> Maintain at least 2 metres separation Hand hygiene Well-fitting surgical/procedural mask Add eye protection if must be within 2 metres of someone
Waiting room	Patients	Waiting for medical evaluation	<ul style="list-style-type: none"> Hand hygiene Surgical/procedural mask Respiratory etiquette If possible, isolate in room or in a designated area. If not feasible, maintain at least 2 metres from other patients

* Those in the community with symptoms of COVID-19 are encouraged to call the community health centre for special arrangements.

Target space	Target personnel	Activity/Interaction	Recommended practices
Waiting room	Patient responds NO to screening questions	Waiting for medical evaluation	<ul style="list-style-type: none"> • Hand hygiene • Surgical/procedural mask • Maintain at least 2 metres between other patients
Consultation room	Healthcare workers	Performing a physical examination of patient responding YES to the screening questions	<ul style="list-style-type: none"> • Hand hygiene Droplet/contact precautions: <ul style="list-style-type: none"> • Well-fitting surgical/procedural mask or N95 • Gown • Gloves • Eye protection
	Healthcare workers	Performing physical examination of patient responding NO to the screening questions	<ul style="list-style-type: none"> • Hand hygiene • Well-fitting surgical/procedural mask • Eye protection • Routine Practices including a POC risk assessment
	Healthcare workers	Performing an AGMP on a patient who responds YES to the screening questions or confirmed to have COVID-19 ²	<ul style="list-style-type: none"> • Hand hygiene • Airborne + droplet/contact precautions: <ul style="list-style-type: none"> • N95 • Gown • Gloves • Eye protection

Target space	Target personnel	Activity/Interaction	Recommended practices
Consultation room	Patient responds YES to screening questions	Undergoing a medical evaluation	<ul style="list-style-type: none"> • Hand hygiene • Surgical/procedural mask • Respiratory etiquette
	Patient responds NO to screening questions	Undergoing a medical evaluation	<ul style="list-style-type: none"> • Hand hygiene • Surgical/procedural mask
All patient care areas	Environmental services	Cleaning and decontamination of patient care areas – no patient present in room or no suspected/confirmed COVID-19 case present in room	<ul style="list-style-type: none"> • Routine cleaning, any equipment shared between patients must be cleaned and disinfected** • Continuous mask and eye protection when in clinical areas • If an AGMP has occurred in the room and the individual has suspect/confirmed COVID-19, the cleaner should wear an N95. If not, close the room door for 2 hours, place “do not enter until xx:xx hours” sign on door. After 2 hours has passed, clean room following routine procedure
		Cleaning and decontamination of patient care areas – where suspected/confirmed COVID-19 case present in room	<ul style="list-style-type: none"> • Hand hygiene • Droplet/contact precautions: <ul style="list-style-type: none"> • Well-fitting surgical/procedural mask or N95 • Gown • Gloves • Eye protection

Target space	Target personnel	Activity/Interaction	Recommended practices
Response outside medical clinic or outpatient facility: on-scene response or home visit	Healthcare workers	Performing a physical examination of patient responding YES to the screening questions or confirmed to have COVID-19	<ul style="list-style-type: none"> • Hand hygiene • Droplet/contact precautions: <ul style="list-style-type: none"> • Well-fitting surgical/procedural mask or N95 • Gown • Gloves • Eye protection <p>Notes:</p> <ul style="list-style-type: none"> • Use designated “swab box” if swabbing for COVID-19, if applicable
	Healthcare workers	Performing physical examination of patient responding NO to the screening questions	<ul style="list-style-type: none"> • Hand hygiene • Well-fitting surgical/procedural mask • Eye protection • Routine Practices including a POC risk assessment
	Healthcare workers	Performing an AGMP on a patient responding YES to the screening questions ²	<ul style="list-style-type: none"> • Hand hygiene • Airborne + droplet/contact precautions: <ul style="list-style-type: none"> • N95 • Gown • Gloves • Eye protection
	Patients responding YES to screening questions	Undergoing a medical evaluation	<ul style="list-style-type: none"> • Hand hygiene • Surgical/procedural mask • Respiratory etiquette • Any family members present during the visit are recommended to wear a surgical/procedural mask

Target space	Target personnel	Activity/Interaction	Recommended practices
Response outside medical clinic or outpatient facility: on-scene response or home visit	Patients responding NO to screening questions	Undergoing a medical evaluation	<ul style="list-style-type: none"> • Hand hygiene • Surgical/procedural mask • Any family members present during the visit are recommended to wear a surgical/procedural mask
	Environmental services	Cleaning and decontamination of patient care areas	<ul style="list-style-type: none"> • Routine cleaning, any equipment shared between patients must be cleaned and disinfected** • Continuous mask and eye protection when in clinical area • Be sure to dispose of used, contaminated PPE in the proper receptacle
		Cleaning and decontamination of patient care areas – where suspect/confirmed COVID-19 case present in room.	<ul style="list-style-type: none"> • Hand hygiene • Droplet/contact precautions: <ul style="list-style-type: none"> • Well-fitting surgical/procedural mask or N95 • Gown • Gloves • Eye protection

**Additional information on appropriate cleaning practices in the medical offices can be found here: <https://yukon.ca/en/health-and-wellness/health-concerns-diseases-and-conditions/find-information-health-professionals>

²AGMP – aerosol generating medical procedure: include – intubation, open airway suctioning, CPR with bag valve mask ventilation, bronchoscopy and bronchoalveolar lavage, sputum induction, nebulized therapy and non-invasive positive pressure ventilation (CPAP, BIPAP). Note: these are NOT recommended in the office setting. For more information, please visit: <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/reports-publications/covid-19-aerosol-generating-medical-procedures.pdf>