

Infection Control: A Quick Reference Guide for SARS

Summary list of precautions for infection control practitioners

- Any article that is brought into the room must be cleaned or placed into a clean bag before it is removed from the environment. People should clean hands and remove the outside layer of clothing before exiting the room. Equipment should be placed into a container for cleaning and disinfecting or for removal to the sterilizing department.
- A suspect or probable SARS patient should be placed in a single room – if possible, one with negative pressure.
- Only staff/visitors who have been educated about SARS should enter the room.
- All staff/visitors who enter the room should sign a log book.
- All health care workers (and visitors) must wear personal protective equipment when entering the room.
- The patient must wear a surgical face mask when in contact with staff/visitors.
- The infection control SARS equipment trolley should remain outside the door (see Annex 4).
- Patients should have clinical equipment (e.g. sphygmomanometer, thermometer) dedicated to their exclusive use
- Sterile items should be disposable where possible. Reusable items should be placed in a plastic bag and then into another plastic bag inside the equipment collection bin on the trolley. Request the sterile service department to collect.
- Alcohol-based hand-rub should be located in and outside the room.
- The patient's room must be cleaned each day – including all horizontal surfaces.

- Cleaning equipment must be cleaned after each use. Mop heads should be sent to the laundry for proper laundering in hot water.
- Pathology specimens must be taken directly to the laboratory. Request form must indicate “suspected or probable SARS”.
- Used linen should be placed in a linen bag inside the room and then into another bag outside the room. Take immediately to laundry collection area – treat as per normal soiled/contaminated linen.
- All waste should be discarded into clinical waste bag inside the room. When waste is to be collected for disposal, place in another bag outside the room and then treat as “normal” clinical/contaminated/infectious waste.
- A telephone should be set up in the patient’s room

