

Terminal (Discharge) Cleaning and Disinfection Instructions For COVID-19 Suspect or Confirmed Isolation Rooms

- COVID-19 suspect and confirmed cases are placed on Enhanced Contact and Droplet Precautions.
- Terminal cleaning of the isolation room is required after the case vacates the room, regardless of the amount of time spent in the room.
- All staff cleaning a COVID-19 suspect/confirmed client room must wear full PPE; gown, gloves, mask, and eye shield to clean this space.
- If an aerosol generating medical procedure (AGMP) was performed in the room, no one should enter the room without a N95 respirator until the air has been cleared as per information below.

These instructions are to be followed:

- Follow Universal PPE recommendations.
- Sanitize your hands before and after each glove change.
- Clean surfaces from cleanest to dirtiest area – door knob, light switch, table tops, call bell and oxygen flow meter, furniture, stretcher to bathroom.
- Surfaces must remain wet for 5 minutes.
- Use cleaning cloths/Oxivir, RTU or 1:40 or approved cleaner disinfectant.
- Stretcher must be rinsed with water to prevent degradation of mattress 5 minutes after wiping with Oxivir
- Use the 8 sided method when wiping a surface and then move to another surface area – turn rag over in your hand to prevent transfer of microorganisms from one area to another.

These instructions to be followed in the below order:	✓
1. Remove privacy, shower and window curtains. If there are blinds in the room, they must be wiped down with a cleaning cloth saturated with a disinfectant cleaner.	
2. Remove soiled bed laundry – place in the laundry cart which is in the room.	
3. Transfer re-usable cleaned and disinfected equipment requiring sterilization to the dirty service room – do not walk around with PPE on – give this to a staff member outside the room	
4. Discard all disposable items in the room including nursing supplies/equipment	
5. Clean beginning with the least contaminated items and then move to items that are/or may be more heavily contaminated – light switches, door handles, mounted fixtures, sharps containers, call bell cord	
6. Clean and disinfect all nursing/patient equipment including; telephone, IV poles, blood pressure machines, commode. Remove this equipment as it is cleaned	
7. Clean and disinfect the chairs	
8. Spot wash the walls, around the clients space and washroom.	
9. Clean and disinfect inside of the closet	
10. Clean and disinfect the night side table	
11. Clean and disinfect the table – including roller bar with wheels, underside	
12. Carbolize bed	
13. Wipe and reline the waste containers	
14. Discard gloves – perform hand hygiene – Apply new gloves	
15. Clean the washroom – You will require 4-5 rags to complete this area	
16. Remove gloves – perform hand hygiene and don fresh gloves	
17. Replenish supplies if required – paper and soap.	
18. Mop the room floor followed by the washroom floor – Place mop head in a single black plastic bag and have a staff member place it into the dirty service room.	
19. Remove PPE before handling clean curtains. Perform hand hygiene	
20. Replace privacy and bedside curtains after the room has been cleaned.	
21. Soiled linen and garbage is handled in the same way for all patients, without regard to their infection status. Place soiled linen in an appropriate receptacle at the point-of-use. No special precautions are required. Routine Practices are sufficient.	

Time needed by number of air changes per hour to Remove Airborne Microorganisms in the Air

Each site, in consultation with Physical Plant Team and the site Infection Control Practitioner should confirm the number of air changes/hour in the room to determine the time required before safely entering the room without a N95 respirator. Follow the general guideline in the table below. Keep in mind that older buildings may not have the number of air changes that meet current standards as indicated in table. If the air changes/hour of a room is unknown, it is recommended to follow the 2 air changes/hours time required to clear the air.

Room and usual air changes per hour	Time required for air clearance
2 air changes/hour or unknown	3 hours and 45 minutes
4 air changes/such as PCH resident rooms	1 hour and 45 minutes
6 air changes/such as acute care patient rooms	1 hour and 10 minutes
8 air changes	52 minutes
12 air changes/ such as emergency room and airborne isolation room (negative air room)	35 minutes
15 air changes/ such as minor surgical and endoscopy rooms	28 minutes
20 air changes/ such as operating and bronchoscopy rooms	21 minutes

Reviewed by Regional Infection Prevention and Control Ginette Lafreniere – November 9, 2020

References:

Manitoba Health Seniors and Active Living Routine Practices and Additional Precautions: Preventing the Transmission of Infection in Health Care <https://www.gov.mb.ca/health/publichealth/cdc/docs/ipc/rpap.pdf>.

Canadian Standards Association Special requirements for heating, ventilation, and air-conditioning (HVAC) systems in health care facilities. Z317.2.10.