



SECTION: EMPLOYEE RELATED INFECTION CONTROL

NUMBER: 3.12

## TUBERCULOSIS PROTOCOL: DISCONTINUING AIRBORNE RESPIRATORY PRECAUTION ISOLATION

**PURPOSE:** To provide a mechanism for discontinuing Airborne Respiratory Precaution Isolation for tuberculosis when a patient is no longer classified as infectious.

- POLICY:**
1. Airborne Respiratory Precaution Isolation for tuberculosis may be discontinued only when the criteria in this protocol have been met.
    - a. The nurse has the authority and responsibility to maintain the patient on Respiratory Isolation until the conditions for discontinuing Respiratory Isolation have been met.
  2. Airborne Respiratory Precaution Isolation must be maintained until an order to discontinue it is written by either the patient's direct care physician provider, Pulmonary physician or Infectious Disease physician.
    - a. The Hospital Epidemiologist will have the ultimate authority to make decisions regarding discontinuing isolation when conflicts arise.

- PROCEDURE:**
1. To consider discontinuing Airborne Respiratory Precaution Isolation for tuberculosis, determine whether at least one of the following criteria for discontinuing isolation have been met:
    - a. Sputum culture report is Mycobacterium other than tuberculosis (i.e., Mycobacterium intracellulare).
    - b. Three sputum specimens (obtained on separate days) are smear negative for acid fast bacilli (AFB).
    - c. Patient has been started on a minimum of three drug therapy and has definite clinical improvement, as documented by an Infectious Disease or Pulmonary physician. Improvement should include significantly diminished cough and defervescence.
  2. Remove Airborne Respiratory Precaution Isolation sign from door.
  3. Patient may be moved from the negative pressure room.

**REFERENCES:** Centers for Disease Control, Guidelines for the Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Facilities. Federal Register, Part 11, 1994; Notice.

Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Healthcare Settings, 2005, Prepared by Jensen P, Lambert L, I a DeMarco M, Ridzon R, Division of Tuberculosis Elimination, National Center for HIV, STD and TB Prevention MMWR, December 30 2005 / 5A (RR17); 1-141.

Policy 02-01 Placing a Patient on Respiratory (STOP SIGN) Isolation.

Policy 04-01 Alphabetical List of Diseases requiring Respiratory (STOP SIGN) Isolation.

Policy 02-23 Tuberculosis Protocol: Sputum Collection for Rule-out Tuberculosis.

**APPROVAL:** Infection Control Committee



University of Connecticut Health Center  
John Dempsey Hospital  
*Infection Control Manual*

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