

# Isolation Precautions Guideline Workgroup

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# Disclaimer

- The findings and conclusions herein are **draft** and have not been formally disseminated by the Centers for Disease Control and Prevention and should not be construed to represent any agency determination or policy.

# Meaning of Today's Vote

- Today's vote regarding the draft Isolation Precautions Guideline is focused on the HICPAC response to the 4 CDC questions. No specific recommendations with the draft Isolation Precautions Guideline are being voted on today.

# Vote (Question 1)

**1. Should there be a category of Transmission-based Precautions that includes masks (instead of NIOSH-approved® N95 [or higher-level] respirators) for pathogens that spread by the air? Should N95 respirators be recommended for all pathogens that spread by the air?**

## **Response:**

- Among multiple approaches, there should be a category of Transmission-Based Precautions that includes masks for pathogens that spread by air.
- N95 respirators should not be recommended for all pathogens that spread by air.

## Vote (Question 2)

**2. Can the workgroup clarify the criteria that would be used to determine which transmission by air category applies for a pathogen? For the category of Special Air Precautions, can you clarify if this category includes only new or emerging pathogens or if this category might also include other pathogens that are more established? Can you also clarify what constitutes a severe illness?**

### **Response:**

- The narrative of the draft guidance will be updated to include key concepts including:
  1. Listing of important pathogen considerations as (a) transmissibility, (b) burden of morbidity and mortality and other adverse outcomes, and (c) efficiency of spread over long distances, such as through ventilation systems;
  2. Routine Air Precaution recommendations for specific pathogens will be based on observed effectiveness of masks in reducing risk of transmission of infection;
  3. The category of Special Air Precautions might also include other pathogens that are more established; and
  4. “Severe illness” will be clarified as “morbidity and mortality and other adverse outcomes” to more clearly encompass a variety of pathogen-related adverse outcomes that are not limited to hospitalization and death.

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## Vote (Question 3)

**3. Is the current guideline language sufficient to allow for voluntary use of a NIOSH-approved® N95 (or higher-level) respirator? Should the document include a recommendation about healthcare organizations allowing voluntary use?**

### Response:

- The current guideline language may not be sufficient to allow for voluntary use of a NIOSH-approved® N95 (or higher-level) respirator, because current Federal Regulations make voluntary use at the discretion of the Employer.
- The guideline should not include a recommendation about healthcare organizations allowing voluntary use, because the current narrative language clearly supports the concept of voluntary use of N95 (or higher level) respirators for healthcare personnel when not otherwise required for Routine Air Precautions.

## Vote (Question 4)

**4. Should there be a recommendation for use of source control in healthcare settings that is broader than current draft recommendations? Should source control be recommended at all times in healthcare facilities?**

### Response:

- A recommendation for use of source control in healthcare settings that is broader than current draft recommendations is not indicated.
- HICPAC recommends that source control decisions be determined by local risk of pathogen transmission and epidemiology, rather than at all times.