



Implementation of Transmission-Based Precaution Contingency Guidelines in an Outpatient Pediatric Oncology Clinic during a Regional Respiratory Virus Surge

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Background

In December 2022, a regional surge in respiratory viruses directly impacted an outpatient pediatric oncology clinic by creating an increase of patients presenting with respiratory illness. As a result, isolation bed availability became limited and clinical operations to accommodate patients were directly impacted. In response, a contingency guideline using tiered isolation strategies and reduced isolation to recovery time was implemented.

Methods

A review of existing policies for transmission-based precautions and prioritization for patient placement and syndromic isolation methods in ambulatory settings was performed. Infection Prevention & Control (IPC) developed a multi-layered approach, reducing isolation duration and recommending prioritization of isolation location for transmissible organisms. Infections requiring airborne precautions and new onset of respiratory symptoms without laboratory testing were prioritized for isolation in an exam room with a door, followed by influenza and respiratory syncytial virus (RSV). Patients with parainfluenza, human metapneumovirus, and adenovirus were permitted for placement in curtained bays. Patients with rhinovirus and coronavirus were permitted for placement in non-curtained location if able to tolerate a mask. Patients with enteric or multi-drug resistant organisms were assessed for symptoms to determine placement in a room with door or curtained bay [Figure 1]. Isolation duration for influenza, RSV, parainfluenza, human metapneumovirus, and adenovirus was reduced from 28 days to 14 days [Figure 2].

Results

The contingency guideline tiered isolation practice was operationalized by pediatrics staff utilizing a dashboard to track appointments and room assignments with IPC acting as a resource for additional guidance. IPC and clinical pediatrics staff discontinued isolation requirements as patients met recovery criteria. No adverse events or outbreaks related to this contingency guideline were detected.

Figure 1.

Isolation Precautions/Indication ^{1,2} <u>Highest level takes precedent</u>	Patient Placement ³
Strict Protective	Closed door room
New onset respiratory symptoms	Closed door room
Airborne-Contact-COVID-19	Closed door room
Droplet-Influenza	
Droplet-RSV	
Special Contact	<ul style="list-style-type: none"> • Closed door room if diapered, incontinent, or symptomatic • Anywhere if asymptomatic and not diapered • Educate on hand washing with soap and water
Droplet - metapneumovirus, parainfluenza, adenovirus	Curtain if initial positive test <2 weeks ago
Droplet – Pertussis, parapertussis	Curtain
Contact	<ul style="list-style-type: none"> • Closed door room if symptomatic (i.e., actively draining wound) • Anywhere if asymptomatic
Droplet-Rhino/enterovirus, coronavirus	Anywhere

Figure 2.

Current Policy ²		Contingency Plan	
Influenza, RSV, Parainfluenza, Metapneumovirus, Adenovirus	4 weeks from initial positive test date, no symptoms, no negative test required	Influenza, RSV, Parainfluenza, Metapneumovirus, Adenovirus	2 weeks from initial positive test date, no symptoms, no negative test required

Conclusions

Developing contingency plans help mitigate potential consequences during the rapid onset of a surge, both expected and unexpected. Local infection control policies, regional respiratory virus trends, and patient population should be examined to create a plan for these occurrences.

References

1. Siegel JD, Rhinehart E, Jackson M, Chiarello L, and the Healthcare Infection Control Practices Advisory Committee, 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings <https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html>
2. IPC Policy 3.8 *Discontinuing Transmission-Based Precautions*. Memorial Sloan Kettering Cancer Center.
3. Peds H.01.2 *Isolation Precautions-Pediatrics* Guideline. MSK Kids, Memorial Sloan Kettering Cancer Center. August 2022.

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