



INFECTION CONTROL POLICY & PROCEDURE

Title: MDI Use for COVID-19 Confirmed and Suspected Patients

Number: IC-6006

Effective Date: 04-17-20

Revised Date: 02-03-22

Review Date:

PURPOSE:

To reduce aerosolizing of medications via nebulizer treatment of COVID-19 suspected or confirmed patient. East Campus Substance Use Disorder Department is the only area of use.

PROCEDURE:

1. Wash hands.
2. Pharmacy delivers the inhaler to the med drawer for use.
3. The RN will pull the medication, place it in a bag.
4. The RN then goes to the room and don's isolation gear and takes the inhaler in the room (leaving the clean bag out on the isolation cart).
5. The dose is administered to the patient using a spacer if indicated.
6. Goes to the door, doffs isolation gear and washes hands.
7. With new gloves, cleans the inhaler with a PDI Cavi wipe.
8. The inhaler is placed back in the open clean bag.
9. Wash hands.
10. The RN takes the inhaler back to PYXIS, returning the clean bagged inhaler into the patient's med drawer.
11. THE SPACER STAYS IN THE PATIENT'S ROOM.

NOTE: Upon discharge, all unused portions of the inhalers go back to the pharmacy. WE DO NOT SEND INHALERS HOME WITH PATIENTS!!

Approved By:

Director Infection Control/Employee Health

Date

Chief Nursing Officer

Date