



What is Respiratory Etiquette and Why Does it Matter?

December 31, 2003

The recently published CDC Guideline, “Public Health Guidance for Community-Level Preparedness and Response to Severe Acute Respiratory Syndrome (SARS)”¹ recommends initiating “a universal respiratory etiquette strategy” for healthcare facilities.

Though these guidelines were established in response to the SARS outbreak, the CDC states that “implementation of ‘respiratory etiquette’ practices can decrease the risk of transmission from unrecognized SARS patients and also control the spread of other, more common, respiratory pathogens.”² Education of the patient (and visitors) with respect to respiratory etiquette should be a concurrent program. Many hospitals are currently utilizing this type of program in their efforts to control the spread of the flu virus.

Supplement C, Part IV, Section C of the Guideline details Universal Respiratory Etiquette Strategy for Healthcare Facilities³ and includes the following infection control steps:

- Provide surgical masks to all patients with symptoms of respiratory illness. Instruct on the proper usage and disposal of the masks. (Surgical masks are typically the type that fasten to the head with ties. Procedure masks, the type with earloops, are an effective option and the one we recommend for this use.)
- Implement usage of surgical or procedure masks by healthcare personnel during evaluation of symptomatic patients.
- If masks are unavailable or cannot be utilized by the person exhibiting symptoms, then disposable tissues should be used to cover the mouth and nose when coughing or sneezing.
- Provide hand hygiene materials in waiting room areas and encourage patients and visitors with symptoms to perform hand hygiene.
- Designate an area in the waiting room for patients with respiratory symptoms.
- Place patients with respiratory symptoms in a private area as soon as possible for further evaluation.
- Consider isolating symptomatic patients from the staff during triage, utilizing a plexiglass barrier to avoid contact with respiratory droplets
- If no barriers are utilized, instruct registration & triage staff to remain at least three feet from unmasked patients and consider wearing surgical masks during respiratory infection season.
- Continue to use droplet precautions to manage symptomatic patients until it is determined that the cause is not an infectious agent that requires precautions beyond standard precautions.

Kimberly-Clark Health Care can assist healthcare facilities with their selection of masks, facial tissue and hand hygiene products that are listed in the Respiratory Etiquette Strategy.

For additional information on Respiratory Etiquette, review the full Guideline by visiting www.kchealthcare.com/respiratoryetiquette, contact your Kimberly-Clark sales representative or call 1-800-KC-HELPS.



KNOWLEDGENETWORK*

Kimberly-Clark Health Care Education

References

1. Public Health Guidance for Community-Level Preparedness and Response to Severe Acute Respiratory Syndrome (SARS), www.cdc.gov/ncidod/sars/sarsprepplan.htm
2. Public Health Guidance for Community-Level Preparedness and Response to Severe Acute Respiratory Syndrome (SARS), www.cdc.gov/ncidod/sars/sarsprepplan.htm, Supplement C: Preparedness and Response in Healthcare Facilities, Part III, Section C, p 9.
3. Public Health Guidance for Community-Level Preparedness and Response to Severe Acute Respiratory Syndrome (SARS), www.cdc.gov/ncidod/sars/sarsprepplan.htm, Supplement C: Preparedness and Response in Healthcare Facilities, Part III, Section C, p 9, 10.