



Preparing Your Office or Clinic for Potential COVID-19 (Novel Coronavirus) Patients

February 14, 2020

The following best practices were developed by the San Francisco Department of Public Health for your consideration.

1. **Identify where you would isolate a potential COVID-19 patient who comes into your office or clinic.**
 - a. Ideally the patient would be masked and isolated in an airborne infection isolation room (AIIR, sometimes called a “negative pressure” room).
 - b. If an AIIR is not available, place the masked patient in a private room with the door closed. See section below “**Preparing a Non-AIIR room**” for instructions on preparing a non-AIIR room for a potential COVID-19 patient.
 - c. If private room is not available, place masked patient in an area with at least 6 feet separation from other persons.
2. **Post Novel Coronavirus Alert posters** ([English](#)) ([Simplified Chinese](#)) ([Spanish](#)) requesting that visitors with a fever, cough, or shortness of breath plus COVID-19 exposure risk immediately put on a surgical mask and notify health care staff. All visitors with respiratory symptoms should don a surgical mask and follow [respiratory hygiene/cough etiquette](#).
3. **Keep masks at reception areas** and other first contact locations for patients and visitors.
4. **Assemble personal protective equipment (PPE) for staff:**
 - a. N95 Respirators / Disposable Gowns / Face Shields or Goggles / Nonsterile gloves
5. **N95 Respirators:**
 - a. Arrange for your staff to be fit-tested for N95 respirators in advance.
 - b. Assistance with respirator fit testing may be obtained from your:
 - (1) Facility or employer’s health and safety, infection control, or employee health services staff,
 - (2) Workers Compensation Insurance Carrier, or
 - (3) the supplier who sells you N95 respirators.
6. **Train staff on [how to properly don and doff protective equipment](#).** Have staff practice until they are confident. Don’t forget to train support staff such as custodians who may be involved in your overall response.
7. **Have an EPA-registered hospital-grade disinfectant on hand.**
 - i) Look for products whose manufacturer has stated “has demonstrated effectiveness against viruses similar to COVID-19 / 2019-nCoV on hard non-porous surfaces”. If no product with that statement is available, use a product which has a human coronavirus claim on the label. Always use disinfectants in accordance with label instructions, paying attention to required wet contact time.
 - ii) Many commercial and healthcare cleaning product manufacturer’s websites now have listings of products which have demonstrated effectiveness against viruses similar to COVID-19 / 2019-nCoV.

Refer to the SFDPH [Clinical Checklist for Managing Patients who may have Novel Coronavirus \(COVID-19\) Infection](#).



Preparing a Non-AIIR Room for a Potential COVID-19 Patient

The following best practices were developed by the San Francisco Department of Public Health for your consideration.

If an airborne infection isolation room (AIIR, sometimes called a “negative pressure room”) is not available, place the masked patient in a private room with the door closed.

To prepare for this scenario:

1. Review and select room(s) for patient isolation in advance. Do not wait until a patient presents with symptoms.
2. Choose rooms which:
 - a. Do not share airspace with other patient rooms, waiting rooms, or staff work and break areas.
 - b. Minimize patient transit through staff occupied or patient care areas.
3. Create a clear area outside the room door where protective equipment can be donned and doffed and which can hold a trash can to place used protective equipment.
4. Consult with Facilities Engineering or Maintenance Staff about mechanical (forced air) ventilation to verify that contaminated air isn’t exhausted into another room or area of the clinic.
5. Consider purchasing HEPA-filter equipped fan units to place in selected rooms. Unless equipped with ducting and exhaust points such units do not create “negative pressure” but they do provide some air cleaning so that air escaping from the room has less potential for contamination.
6. For information on how to create a temporary Negative Pressure Room in your facility see the Minnesota Department of Health’s “Airborne Infectious Disease Management – Methods for Temporary Negative Pressure Isolation” <https://www.health.state.mn.us/communities/ep/surge/infectious/airbornenegative.pdf>

Additional resources:

CDC Interim Infection Prevention and Control Recommendations for Patients with Confirmed 2019 Novel Coronavirus (2019-nCoV) or Persons Under Investigation for 2019-nCoV in Healthcare Settings
<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/infection-control.html>

CDC 2019 Novel Coronavirus (COVID-19) Information: <https://www.cdc.gov/coronavirus/2019-ncov/>.

SFDPH Novel Coronavirus page for Health Professionals: www.sfdcp.org/novelcoronavirus