

MAY 27^{TH} , 2025

CHANGES:

Definition:

"Enhanced Barrier Precautions" (EBP) refer to an infection control intervention designed to reduce transmission of multidrug-resistant organisms (MDROs) that employs targeted gown and glove use during high contact resident care activities.

EBP are used in conjunction with standard precautions and utilizes donning of gown and gloves during high-contact resident care activities that might have higher risk of transfer of MDROs to staff and clothing.

WHEN EXACTLY SHOULD YOU USE EBP?

Indicated for residents with ANY of the following:

• Infection or colonization with a CDC-targeted MDRO when Contact Precautions do not apply

OR

• Wounds and/or indwelling medical devices even if the resident is not known to be infection or colonized with a MDRO.



WHAT COUNTS AS A WOUND?!

- Chronic wounds, not shorter-lasting wounds, such as skin breaks or skin tears covered with an adhesive bandage (i.e. Band-Aid).
- Chronic Wounds include but are not limited to:
 - Pressure ulcers
 - Diabetic foot ulcers
 - Unhealed surgical wounds
 - Venous statis ulcers



INDWELLING MEDICAL DEVICES...

- Central lines
- Urinary Foley catheters
- Feeding tubes
- Tracheostomies

PIVs are not indwelling devices for EBP.

EBP OR CONTACT??

Resident Status	Contact Precautions?	EBP?
Infected or colonized with any MDRO and has secretions or excretions that are unable to be covered or contained.	YES	No
Infected or colonized with a CDC-targeted MDRO without a wound, indwelling medical device, or secretions or excretions that are unable to be covered or contained.	No	YES
Infected or colonized with a non-CDC targeted MDRO without a wound, indwelling medical device, or secretions or excretions that are unable to be covered or contained.	No	*At the discretion of the facility
Has a wound or indwelling medical device, and secretions or excretions that are unable to be covered or contained and are not known to be infected or colonized with any MDRO.	YES — Until a specific organism is identified	YES — If they do not meet the contact precautions criteria
Has a wound or indwelling medical device, without secretions or excretions and are not known to be infected or colonized with any MDRO.	No	YES

EXAMPLES OF MDRO TARGETED BY CDC:

- Pan-resistant organisms
- Carbapenemase-producing carbapenem-resistant Enterobacterales
- Carbapenemase-producing carbapenem-resistant *Pseudomonas*
- Carbapenemase-producing carbapenem-resistant *Acinetobacter* baumanii
- Candida auris

WHAT DOES "AT THE DISCRETION OF THE FACILITY MEAN?!"

Transmission-based precautions or EBP policy should include which organisms require EBP, depending on what is happening in your facility or community:

- MRSA
- ESBL
- VRE
- MDR Pseudomonas aeruginosa
- Drug resistant Streptococcus pneumoniae
- CRAb (not crabs ©) what we are seeing is not Carbapenemase-producing, which is GOOD

WHEN TO USE EBP - HIGH CONTACT ADL

- Dressing
- Bathing/Showering
- Transferring
- Providing hygiene
- Changing linens
- Changing briefs or assisting with toileting
- Device care or use central line, catheter, feeding tube, tracheostomy
- Wound care any skin opening requiring a dressing



OUTSIDE THE ROOM

- Gown and gloves are not recommended when performing transfers in common areas like dining or activity rooms, where contact is anticipated to be shorter in duration.
- EBP should be followed when performing transfers or assisting curing bathing in a shared shower room and when working with residents in the therapy gym, specifically when anticipating close physical contact while assisting with transfers and mobility.

DOES EBP EVER END?

Typically, in place for the duration of a resident's stay in the facility or until the wound heals or the indwelling device is removed.



CONTACT PRECAUTIONS





Clean their hands, including before entering and when leaving the room.

PROVIDERS AND STAFF MUST ALSO:



Put on gloves before room entry. Discard gloves before room exit.



Put on gown before room entry. Discard gown before room exit.

Do not wear the same gown and gloves for the care of more than one person.

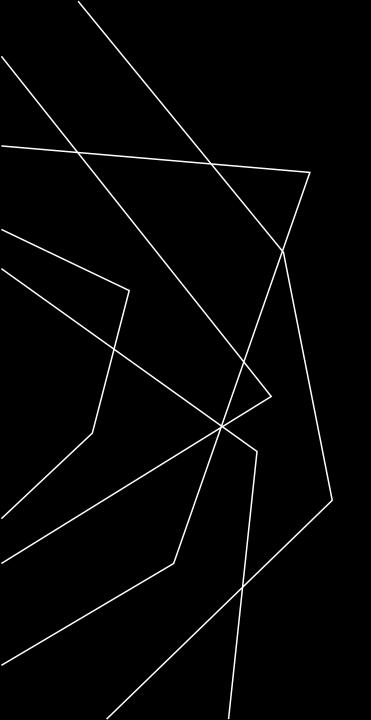


Use dedicated or disposable equipment. Clean and disinfect reusable equipment before use on another person.



OK...SO WHEN DO WE **USE CONTACT** PRECAUTIONS?

- Resident has active diarrhea, draining wounds or other sites of secretions or excretions that are unable to be covered or contained.
- Co-infection with another organism that requires contact precautions (i.e. Norovirus).
- For a limited time as determined by consultation with public health during a confirmed or suspected MDRO outbreak.
- When DOH tells you to.



ANY QUESTIONS?