

# Infectious Disease Prevention & Protection

## *What I Do to Protect You and Me*

**I utilize defensive standards that EXCEED infectious disease prevention and protection guidelines for outpatient doctor's offices. The goal is to drastically reduce small & large droplet diffusion and to eradicate virus particles from the air and surfaces. My goal is to protect you and me during this pandemic.**

- I AM FULLY VACCINATED and have received THREE vaccine doses. I encourage ALL of my patients to receive the CORONAVIRUS VACCINE and the BOOSTER shot—*it is the right thing to do*.
- During the Omicron variant phase of the pandemic, I am getting PROPHYLACTIC TESTING for asymptomatic coronavirus infection once per week until this current wave of Covid-19 passes.
- I see ONE patient at a time, working out of a single examination room without any office staff members.
- My office is WELL VENTILATED, dramatically limiting the airborne spread of any virus. We know that when air can move freely, infection risk is significantly lower. Great air quality is an IMPORTANT ANTI-VIRAL STRATEGY.
- I OPEN THE WINDOWS frequently during the day to provide fresh air and HIGH QUALITY ventilation.
- BOTH my waiting room and examination room have industrial-grade, state-of-the-art high-efficiency HEPA filters that capture 99.97% of the droplet and particulate matter in the circulating air. This especially filters large and small-droplets that carry viruses exhaled from breathing, talking, coughing, and sneezing. HEPA filters also remove the airborne dust that can piggyback with virus laden droplets.
- Repeatedly throughout the day I expose the entire waiting room and examination room to a POWERFUL hospital strength Ultraviolet light (UVC) lamp that KILLS AIRBORNE VIRUSES and those in hard to reach areas of the office.
- I have a filtered forced fresh air HVAC system that provides constant AIR MOVEMENT and VENTILATION—circulating the room air constantly.
- I have large windows that allow NATURAL SUNLIGHT to illuminate my office.
- I have many well maintained office plants that help to increase oxygen and also remove airborne toxins.
- I maintain the CO2 level in my office BELOW 1000 ppm. Stuffy, poorly ventilated offices have high CO2 levels. High CO2 levels promote the airborne viability of coronavirus. High CO2 levels are a marker for poor ventilation.
- I maintain the RELATIVE HUMIDITY in my office between 30-60%, which has been shown to significantly decrease the coronavirus. Dry winter air or dehumidified airconditioned air increases airborne coronavirus lifespan.
- Hard surfaces such as my treatment table, telephone, door handles, armrests of chairs, edges of doors, handles, etc. are wiped down or sprayed with DISINFECTANT on a regular basis.
- I WASH MY HANDS for 20 seconds with soap and water or with hand sanitizer before each patient encounter.
- Alcohol-based HAND DISINFECTANT is available for all patients.
- I will be wearing a SURGICAL MASK during the entire office visit.
- SURGICAL MASKS are available for EVERY patient. Until the Omicron variant has passed, all patients must wear a mask.
- I use appropriate PPE depending upon the clinical situation. If a patient is infected with any form of upper respiratory infection I AM PREPARED with required personal protective equipment (PPE): I put on a single use lab coat, head covering, safety goggles, surgical gloves, and an N95 face mask.