**Infection Prevention and Control Questions for Investigation of Mucormycosis among Bone Marrow Transplant Patients**

EXISTING PRECAUTIONS

-What special precautions (e.g. masking, special meals, decontamination, PPE) are taken for…

-all patients in unit

-neutropenic patients

-patients with GVHD

-immunocompromised patients

-What barriers or protection from rest of hospital exist (i.e. anteroom or waiting area separating BMT unit)?

-What precautions are taken for person visiting the BMT unit, are there differences for family member, maintenance staff, clinical staff?

What are the antifungal prophylactics used? How do you determine who gets which type of prophylaxis (e.g. posaconazole vs. voriconazole)?

POTENTIAL EXPOSURES

-Have you noticed any water damage, leaks, discoloration, moisture/condensation in the unit or during construction?

-Has there been any recaulking of windows? Areas of dust intrusion aside from the constuction?

-What equipment or supplies are used in the nose or mouths of patients? Where and how are they stored? Are these ever reused from patient to patient? If yes, how are they sterilized?

(i.e. nasal sprays, nasal cannula, masks, nebulizer machines, medicine/water for breathing tx)

-Are any nasal/oral procedures done on the ward?

-Where are linens laundered and stored?

AIR SUPPLY

-What is the difference in air quality of rooms on the ward?

-What regular maintenance or upgraded precautions were done on the air supply (HEPA filters/air units)?

-Was ward duct system/plumbing exposed to construction area? Was HVAC system in construction isolated?

-Was vacuuming or air pressure systems used to protect air quality?

-Any air leaks from the outdoors?

CONSTRUCTION

-What other special precautions taken during construction?

-Was construction site completely isolated from ward?

-What kind of barriers were used to isolation construction area?

-What holes existed in completely isolating construction?

-Did any construction personnel have to access ward? If so, what precautions were used?

-How long after construction were barriers removed? How were barriers and debris removed?

-What cleaning was done after construction?

-What air testing or monitoring was done during construction and before barriers were removed?

Housekeeping

* Describe the way patient rooms are cleaned daily and between patients
* What kind of dusting is used (e.g. dry vs. wet)
* Did you notice any increase in dust in patient rooms during the construction period? Did rooms appear dirtier than usual or dustier than usual?