

MDS Alert

Manual Instructions Define Isolation as Provided in a Private Room

Some experts, however, think it may not be crystal clear.

Before the final MDS 3.0 and RAI User's Manual came out, people speculated about what would count for coding infection isolation, which is an Extensive Services qualifier under RUG-IV.

And the newly released MDS 3.0 manual's chapter three (Section O) includes a sentence that seems to be clear that only strict isolation in a private room will count:

"Code only when the resident requires strict isolation or quarantine in a separate room because of active infection (i.e., symptomatic and/or have a positive test and are in the contagious stage) with a communicable disease, in an attempt to prevent spread of illness," states the manual.

Don't code if the resident only has a history of an infectious disease, such as C. difficile or MRSA without active symptoms, but the facility requires cohorting residents with similar infectious disease conditions, the manual directs. And "do not code this item if the 'isolation' primarily consists of body/fluid precautions, because these types of precautions apply to everyone. Transmission-Based Precautions must also be considered regarding the type and clinical presentation related to the specific communicable disease. The three types of transmission-based precautions are contact, droplet, and airborne.

More information related to the types of transmission-based precautions can be found in the 2007 Guideline for Isolation Precautions:

Preventing Transmission of Infectious Agents in Healthcare Settings
www.cdc.gov/ncidod/dhqp/pdf/guidelines/Isolation2007.pdf."

Extra Verbiage Creates Confusion

The manual "does say you need private rooms [to code isolation], but then it goes on to talk about droplet and other types of isolation that don't require private rooms," observes **Patricia Boyer, MSM, RN, NHA**, president of Boyer & Associates LLC in Brookfield, Wis. And she thinks that requires clarification. Consultant **Sue LaBelle, RN, MSN, RA-CT**, notes that when she worked in long-term care "strict isolation always involved a resident in a single isolation room." And to her, the manual "instructions seem fairly specific that the person has to be in his or her own room." But "this may, however, come up as a question of clarification as people read and respond to the manual," says LaBelle, with PointRight Inc. in Lexington, Mass.