ASHE ICRA 2.0 Class Assignment Quick Card

ACTIVITY TYPES (A–D) × PATIENT RISK GROUPS • CLASS I–V DERIVATION • PERMIT TRIGGERS

Current version — Oct 31, 2026
Update history: healthcarefacilityhub.org/icra-matrix/
Standards: ASHE ICRA 2.0 (2022) • CDC EIC • NFPA 241

STEP 1: CONSTRUCTION ACTIVITY TYPES (A–D) — DUST & SCALE POTENTIAL

Activity Type	Operational Scope	Representative Hospital Examples	Dust Control Profile
Type A Non-Invasive	Work that does not generate dust or require cutting walls/ceilings. System visual inspections.	Limited ceiling-tile lifts (1-2 tiles for visual check), clean plumbing fixtures, painting without sanding, electrical trim checks.	Zero dust generation. Immediate replacement of tiles before leaving.
Type B Small Scale	Small-scale, short-duration work creating minimal dust. Localized access.	Above-ceiling data cabling runs, limited drywall cutting/removal (<1 sheet), controlled hand sanding, minor cove base or flooring patch.	Minimal dust. Engineering controls; never used for construction/demo.
Type C Moderate Scale	Large-scale or longer-duration tasks generating moderate-to-heavy dust or vibration.	Floor, wall, or casework removal; new drywall hanging/finishing; single-room renovation; multi-shift tasks; significant vibration or noise.	Active dust containment: poly barriers, sealed diffusers, neutral/neg air.
Type D Major Demo	Major demolition or active new construction activities. Heavy demolition.	Mechanical system component replacement; partition demolition/construction; multi-room renovation; large new wing build-out.	Critical deck-to-deck barriers, continuous negative pressure, HEPA exhaust.

STEP 2: PATIENT RISK GROUPS — CLINICAL VULNERABILITY

Risk Group	Clinical / Functional Space Description	Governing Healthcare Locations (Exact Article Grounding)
Low Risk	Non-patient areas where clinical care is not delivered.	Public spaces, administrative offices, physical plant rooms, mechanical rooms physically off clinical units.
Medium Risk	Patient care support zones and outpatient staging areas.	Waiting areas, sterile processing dirty side (decontamination), hospital kitchens, pharmacy general distribution zone.
High Risk	Direct patient care environments and acute treatment units.	Inpatient rooms, Emergency Department (ED), diagnostic imaging suites, clinical laboratories, medication preparation rooms.
Highest Risk	Invasive care, sterile processing clean areas, or severely immunocompromised patients.	Operating Rooms (OR), Intensive Care Units (ICU), Bone Marrow / Organ Transplant, Oncology, clean-side Sterile Processing (SPD), sterile compounding pharmacy, invasive interventional imaging.

STEP 3: ASHE ICRA 2.0 ASSIGNMENT MATRIX (TABLE 3)

Patient Risk Group Affected	Type A (Non-Invasive)	Type B (Small-Scale)	Type C (Moderate Dust)	Type D (Major Demo)
Low Risk Group	**Class I**	**Class II**	**Class II**	**Class III** (Permit Req)
Medium Risk Group	**Class I**	**Class II**	**Class III** (Permit Req)	**Class IV** (Permit Req)
High Risk Group	**Class I**	**Class III** (Permit Req)	**Class IV** (Permit Req)	**Class V** (Permit Req)
Highest Risk Group	**Class III** (Permit Req)	**Class IV** (Permit Req)	**Class V** (Permit Req)	**Class V** (Permit Req)

MANDATORY PERMIT TRIGGERS (ASHE Table 3):
Formal infection control permit & multi-disciplinary approval required for:

- **Class III resulting from Type C work**
- **ALL Class IV assignments** (regardless of activity type)
- **ALL Class V assignments** (regardless of activity type)

Always post matrix result and executed permit on the containment exterior.

ENVIRONMENTAL HAZARD BUMP RULES:
Discovery of environmental hazards (sewage, mold, asbestos, gray water, or black water) triggers immediate mandatory escalation:

- Low & Medium Risk Zones → **Bump to Class IV**
- High & Highest Risk Zones → **Bump to Class V**

Escalation applies regardless of initial work activity type or scope.

Table 4 Surrounding Unit Spread & Escalation: Review areas adjacent to, above, and below containment. If surrounding units will experience fugitive dust, acoustic vibration, or HVAC pressure fluctuations, Table 4 forces additional controls or higher effective class. *Field Rule:* Any Class III task for Type C (Medium risk) or Type D (Low risk) that cannot be completely isolated from occupied clinical circulation must adopt Class IV negative air exhaust.

Minimum Controls by Class (ASHE Table 5 Summary)

HVAC ISOLATION • BARRIER CONSTRUCTION • CONTINUOUS DIFFERENTIAL PRESSURE VERIFICATION

Current version — Oct 31, 2026
Update history: healthcarefacilityhub.org/icra-matrix/
Enforcement: The Joint Commission EC.02.06.05 • CMS CoP

OPERATIONAL CONTROLS BY PRECAUTION CLASS (TABLE 5)

CLASS I — Non-Invasive Maintenance

CLASS I

- **Scope:** Non-invasive work only. No active dust generation.
- **Barriers:** No physical barriers required. Do not block patient care flow.
- **Controls:** Replace displaced ceiling tiles before vacating space.
- **HVAC:** Normal room ventilation; no diffuser isolation needed.

CLASS II — Limited Dust Engineering Tasks

CLASS II

- **Scope:** Limited dust under standing approved engineering precautions.
- **STRICT PROHIBITION:** Never use Class II for construction or renovation.
- **Barriers:** Drop cloths, localized HEPA tents, or misting during cuts.
- **Controls:** Adhesive walk-off mats at entry. Seal return diffusers during work.

CLASS III — Active Dust Containment & Diffuser Isolation

CLASS III

- **Barriers:** Airtight ≥ 6-mil polyethylene containment, sealed at seams and floor transitions. Seal access doors with non-residue tape.
- **HVAC Isolation:** Isolate or cap supply and return diffusers so dust does not enter HVAC and space never goes positive relative to corridor.
- **Ventilation:** Minimum 6–10 ACH. Maintain neutral to negative pressure. Inward airflow verified daily via chemical smoke tube or ΔP gauge.
- **Housekeeping:** Hard-lidded, wipe-down waste containers; adhesive walk-off mats per policy. Damp mop or HEPA-vacuum when not fully contained.

CLASS IV — Critical Barriers, Negative Pressure & HEPA Exhaust

CLASS IV

- **Critical Barriers:** Critical barriers per NFPA 241 sealed to the structural deck when ceiling is open. Rigid stud-and-poly or temporary walls (≥ 6-mil flame-retardant poly, NFPA 701 compliant). Fire-rated penetrations and firestop as required. Gaps sealed without releasing dust. Small tasks may use HEPA ECUs.
- **Continuous Negative Air:** Dedicated negative air machines (NAMs) maintaining continuous ≥ 12 ACH and differential pressure ≤ -0.020" w.g. (-2.5 Pa).
- **Monitoring:** Continuous digital differential pressure monitor alarming when pressure drops below -0.020" w.g. Exterior visible indicator required.
- **Exhaust Rules:** Dedicated outdoor exhaust ≥ 25 ft from building intakes/entrances/windows (may omit HEPA). Indoor exhaust MUST be 99.97% HEPA-scrubbed & verified. Zero tie-ins to shared return or bathroom exhaust.
- **PPE & Transit:** Shoe covers, clean clothing (cover suits or HEPA vacuuming), wipe-down waste totes, adhesive mats. Optical particulate sampling as required.

CLASS V — Constructed Dedicated Anteroom & Cascading Containment

CLASS V

- **Containment Architecture:** All Class IV critical barrier specifications PLUS constructed dedicated anteroom for personnel transition, PPE change, and cart wipe-down. All anteroom wall and ceiling penetrations sealed airtight.
- **Cascading Negative Pressure:** Staged pressure cascade (Work Zone < Anteroom < Clean Hospital Corridor). Both zones maintained ≤ -0.020" w.g.
- **PPE Protocol:** Disposable coveralls mandatory inside work zone. Coveralls must be removed and discarded inside anteroom prior to clean corridor exit.
- **Application:** Major demolition/renovation adjacent to Bone Marrow Transplant, OR suites, ICU, or oncology (Type D in High/Highest, Type C in Highest).

CONTINUOUS NEGATIVE PRESSURE & CONTAINMENT VERIFICATION MATRIX

Precaution Class	Physical Barrier Specification	Ventilation & Airflow (ACH)	Differential Pressure & Monitoring Protocol
Class I & II	No barrier (Class I) or drop cloths / localized HEPA tent (Class II). Adhesive walk-off mats at entry.	Existing room ventilation. Cap returns during work.	**Neutral.** Visual inspection log. *Prohibited for demolition or active construction.*
Class III	Airtight ≥ 6-mil polyethylene containment, sealed seams & floor transitions. Isolate supply/return diffusers.	**Minimum 6–10 ACH**	**Neutral to Negative.** Inward airflow verified daily via chemical smoke tube or ΔP gauge.
Class IV	Critical barriers to structural deck; rigid walls or ≥ 6-mil flame-retardant poly (NFPA 701). Gaps sealed.	**Minimum ≥ 12 ACH** Dedicated NAMs.	**Continuous ≤ -0.020" w.g. (-2.5 Pa).** Digital differential monitor alarming on loss of vacuum. Visible external indicator.
Class V	Class IV deck-to-deck barriers plus constructed dedicated anteroom. Sealed penetrations. Staging area.	**Minimum ≥ 12 ACH** Cascading air pressure.	**Continuous Logging (≤ -0.020" w.g.).** Cascade: Work Zone < Anteroom < Corridor. Disposable coveralls removed in anteroom.

Table 6 Decommissioning Gate: Critical barriers for Class III (Type C), IV, and V must NEVER be dismantled until: (1) dust trades complete, (2) NAMs run ≥ 2-hour continuous flush, (3) terminal HEPA vac and disinfectant wet wipe completed, (4) HVAC released only after particulate baseline verified, and (5) joint physical sign-off executed by Infection Preventionist and Facilities Engineering.