



**HEALTHIER WORKPLACES | A HEALTHIER WORLD**

# **BUILDING VENTILATION DURING A PANDEMIC**

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Connecticut River Valley Local Section

Bernard L Fontaine, Jr., CIH, CSP, FAIHA

October 7, 2020

# Worldwide Distribution Map



COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)

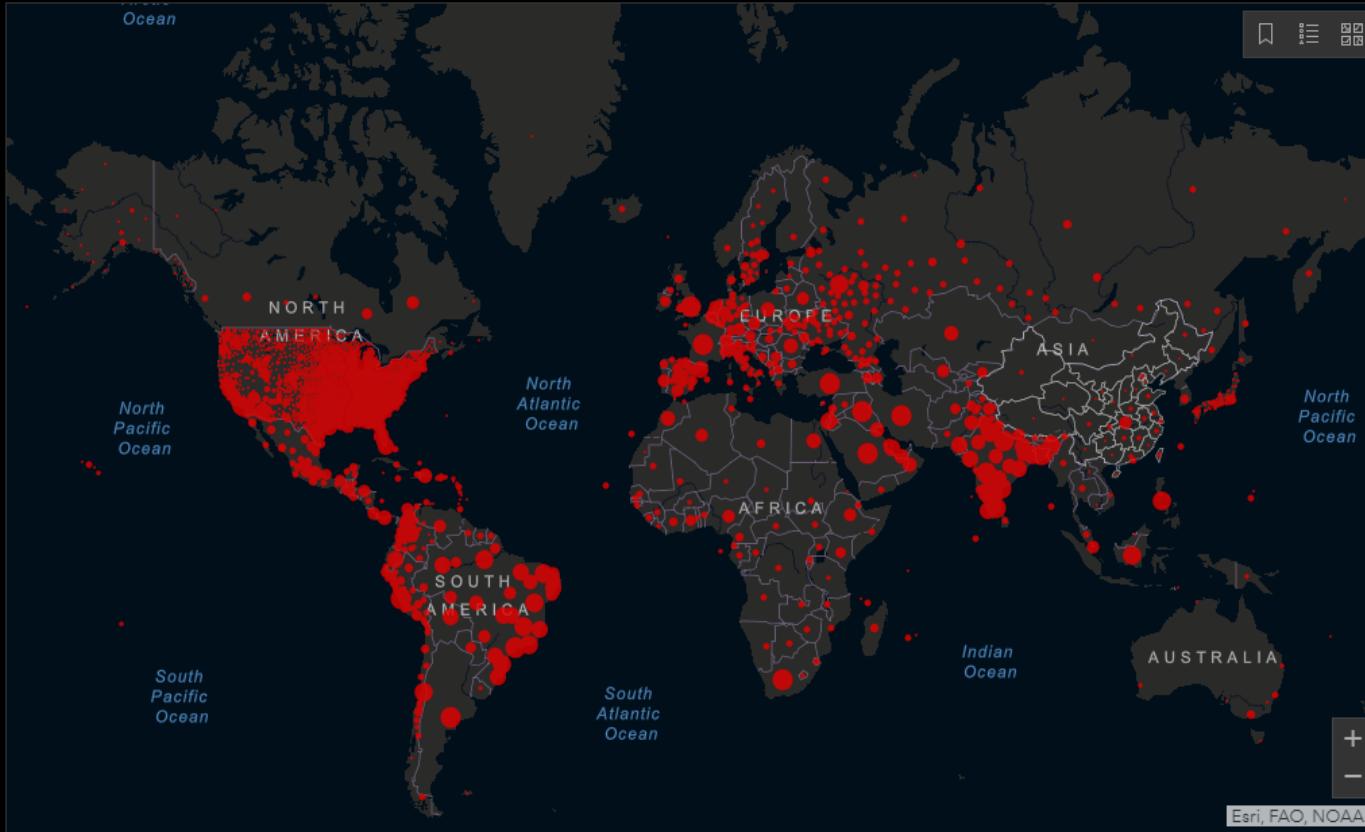


Global Cases

**31,352,177**

Cases by Country/Region/Sovereignty

6,858,138	US
5,562,663	India
4,558,040	Brazil
1,111,157	Russia
770,435	Colombia
768,895	Peru
700,580	Mexico
671,468	Spain
661,936	South Africa
640,147	Argentina
496,974	France
447,468	Chile
429,193	Iran
401,127	United Kingdom
352,178	Bangladesh



Global Deaths

**965,529**

199,890 deaths	US
137,272 deaths	Brazil
88,935 deaths	India
73,697 deaths	Mexico
41,877 deaths	United Kingdom
35,724 deaths	Italy
31,369 deaths	Peru

Global Deaths

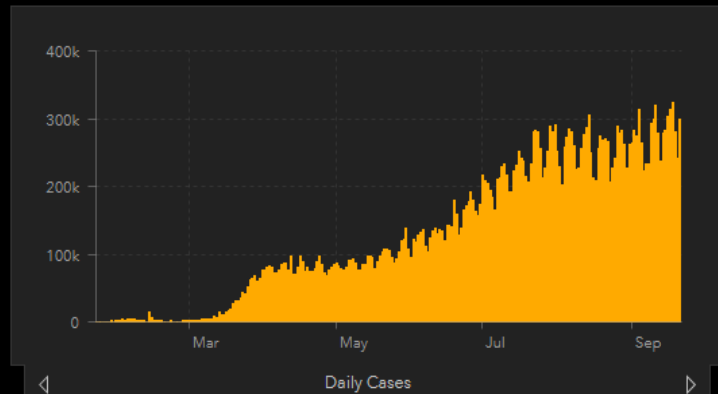
Global Recovered

US State Level

**Deaths, Recovered**

33,092 deaths, 76,218 recovered	New York US
16,069 deaths, 34,672 recovered	New Jersey US
15,127 deaths, 611,856 recovered	Texas US
15,072 deaths, recovered	California US
13,317 deaths, recovered	Florida US
9,317 deaths, 109,397 recovered	Massachusetts US
8,693 deaths, recovered	Illinois US

US Deaths, Recovered



**188**

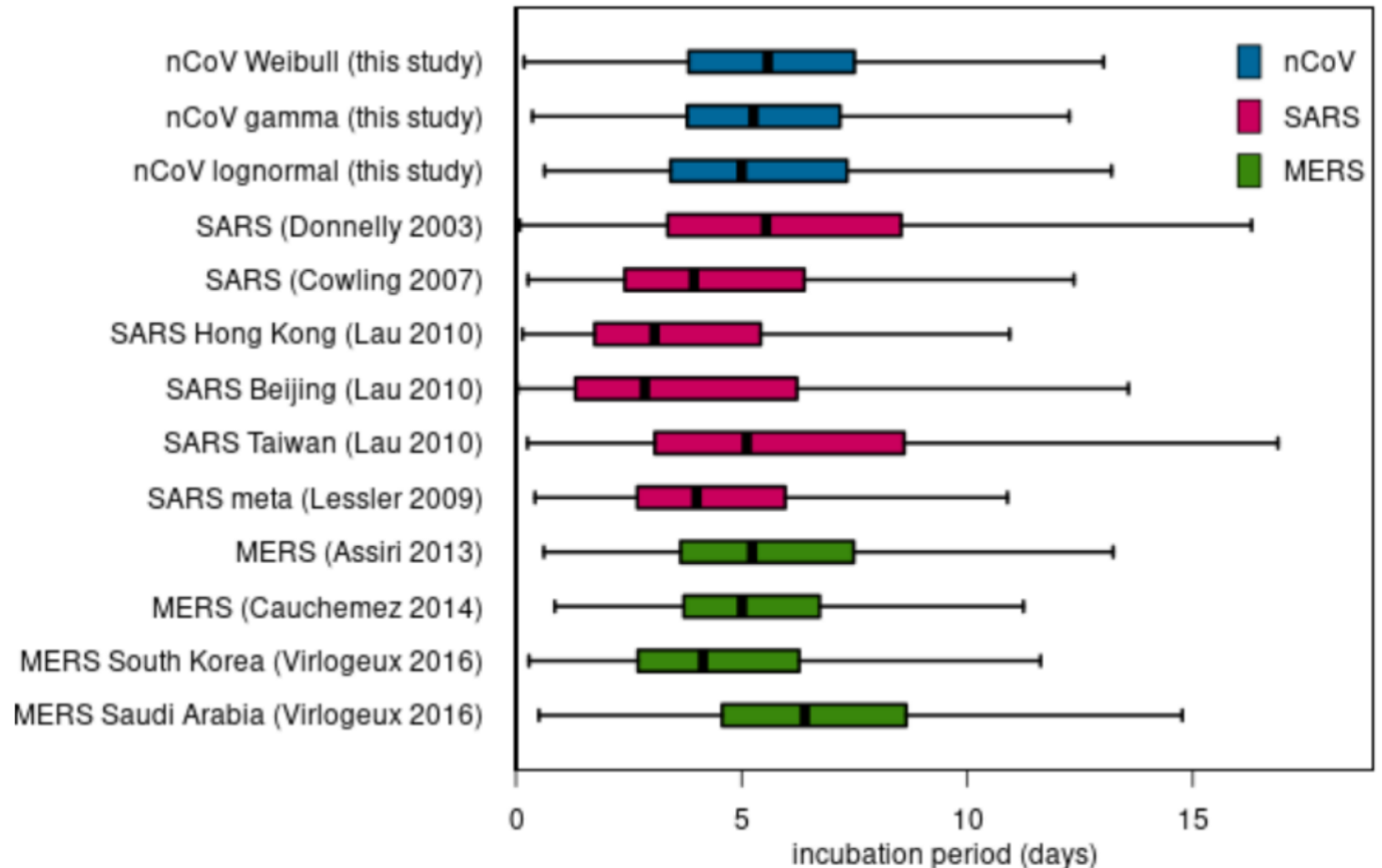
countries/regions

Lancet Inf Dis Article: [Here](#). Mobile Version: [Here](#). Data sources: [Full list](#). Downloadable database: [GitHub](#), [Feature Layer](#). Lead by [JHU CSSE](#). Technical Support: [Esri Living Atlas team](#) and [JHU APL](#). Financial Support: [JHU](#), [NSF](#), [Bloomberg Philanthropies](#) and [Stavros Niarchos Foundation](#). Resource support: [Slack](#), [Github](#) and [AWS](#). Click [here](#) to [donate](#) to the CSSE dashboard team, and other JHU COVID-19 Research Efforts. [FAQ](#). Read more in this [blog](#). [Contact US](#).



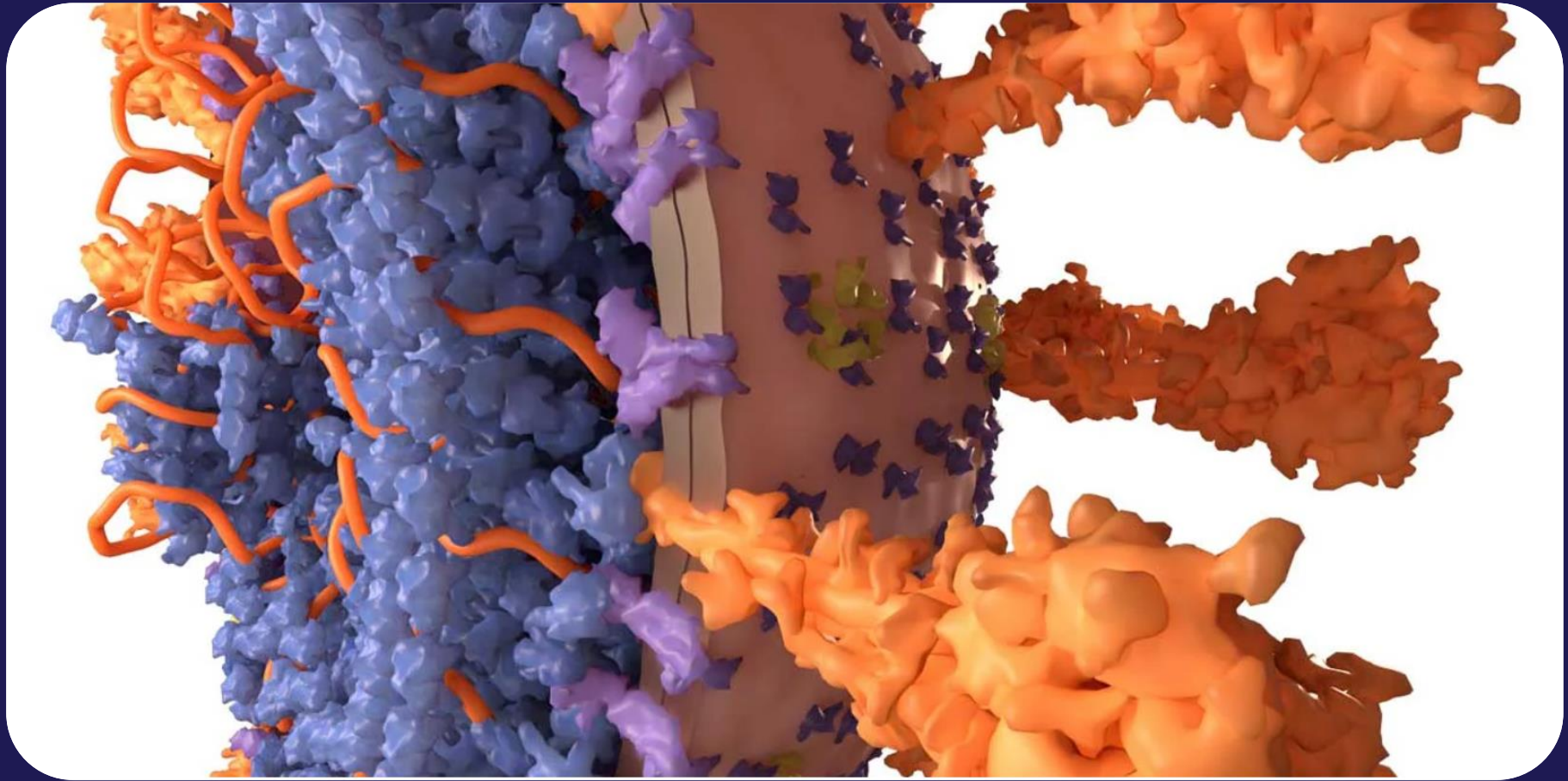
# Incubation Period

- Time from exposure to symptoms onset
- With COVID-19, symptoms may show up 2-14 days after exposure
- CDC indicates people are most contagious when clinically symptomatic
- Several studies show people also may be contagious before developing symptoms



# Symptoms of Exposure





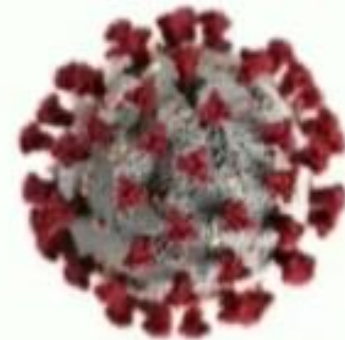
*Courtesy of Scientific American*

# SARS CoV-2 AEROSOLS

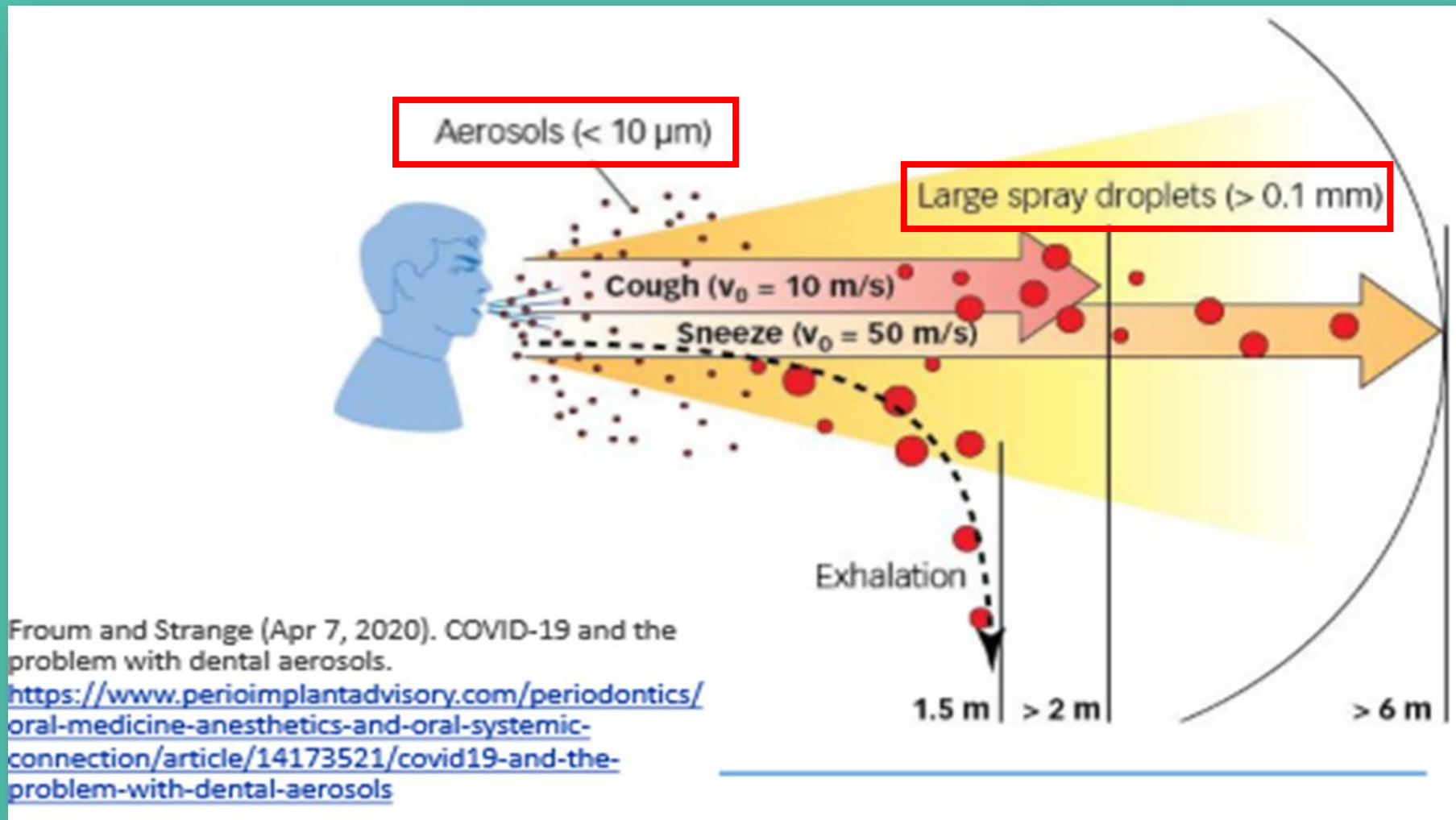
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# Aerosol Transmission

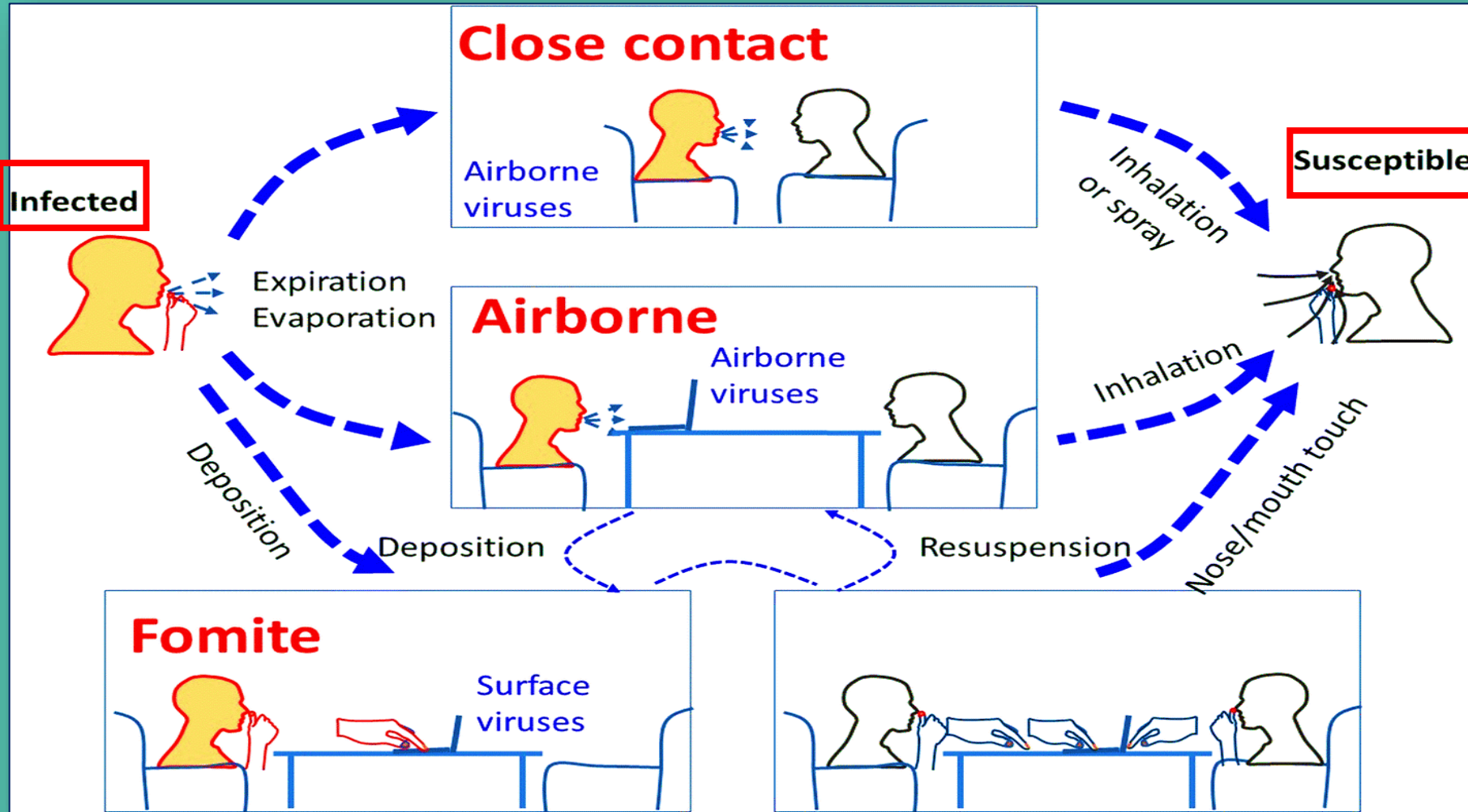
- **Transmission between people in close contact**
- **Transmission via particles that remain in the air over time and distance**
- **Infected surfaces**
- **Virus found in stool, blood, semen and ocular secretions; role in transmission unknown**
- **Animals (including domesticated) not major source of human infection**



# Aerosol Transmission

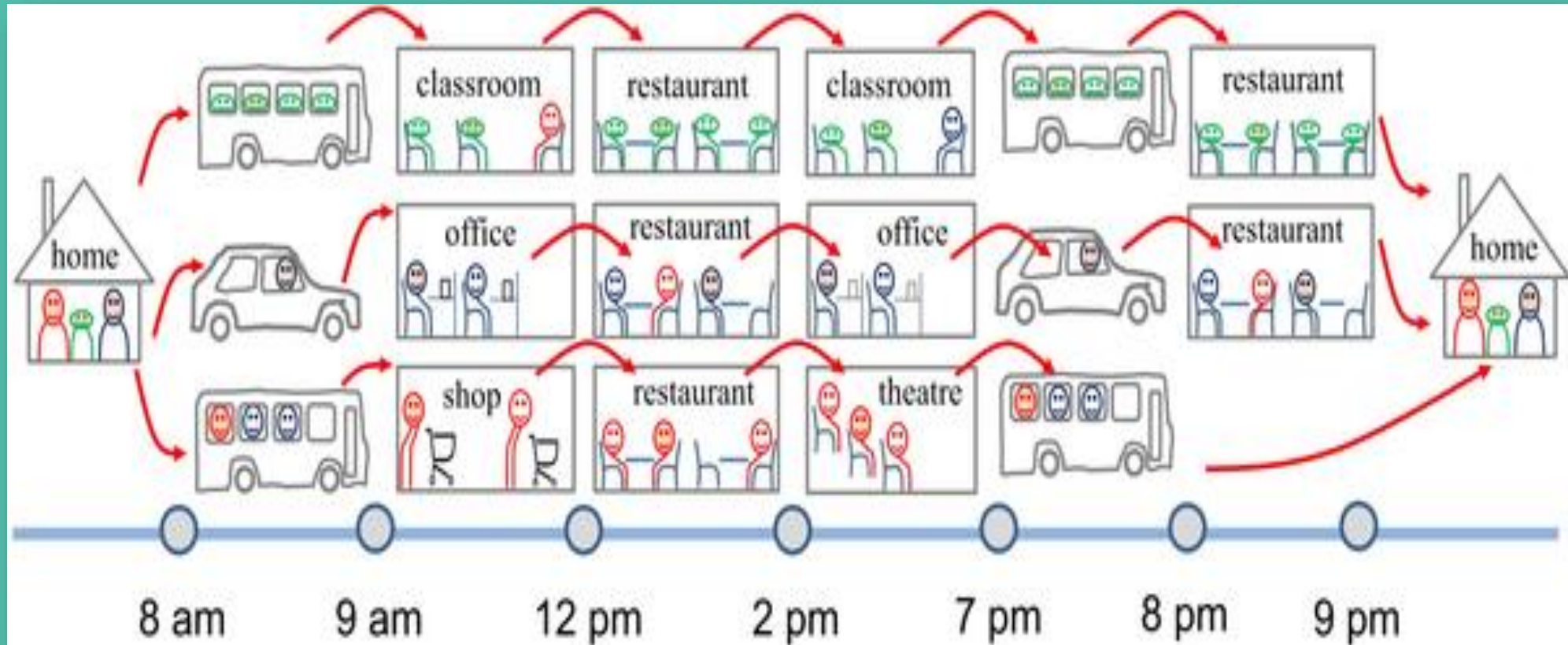


# Aerosol Transmission





# Aerosol Transmission



Gao X, Wei J, Lei H, Xu P, Cowling BJ, et al. (2016) Building Ventilation as an Effective Disease Intervention Strategy in a Dense Indoor Contact Network in an Ideal City. PLOS ONE 11(9): e0162481. <https://doi.org/10.1371/journal.pone.0162481>  
<https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0162481>

# Aerosol Transmission



## DISTANCE TRAVELED BY GERM DETERMINED

At Harvard University an experiment was carried on to determine the exact distance a germ may be thrown from a human mouth.

A room was thoroughly disinfected, all ornaments were removed and nothing but a fifteen foot table remained on which was placed bowls of culture media, one foot apart. A man breathed through his nose over the bowls. They were then put in a culture oven and heated but no germs were present. Next he washed his throat with a germ laden liquid, and stood at the end of the table and talked in an ordinary tone. The bowls were infected for a distance of four feet. Next he spoke in a loud tone, such as used by a lecturer. The bowls were infected for 10 feet. When he sneezed or coughed, they were infected for 12 feet.

Moral; wear your mask.

# Aerosol Generation

## Wells-Riley Model

$$P_{infection} = 1 - e^{-\frac{Iqpt}{Q}}$$

$P_{infection}$  = probability of infection

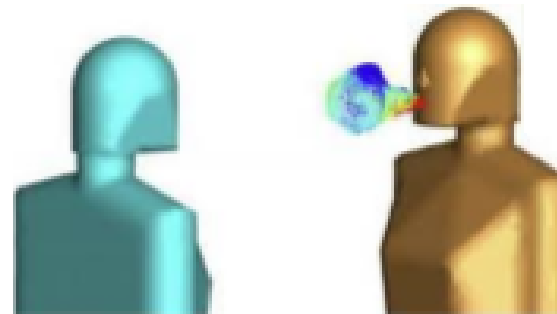
$I$  = Number of infector individuals

$q$  = rate of generation of infectious airborne particles

$p$  = pulmonary ventilation rate

$t$  = exposure time

$Q$  = clean air ventilation rate

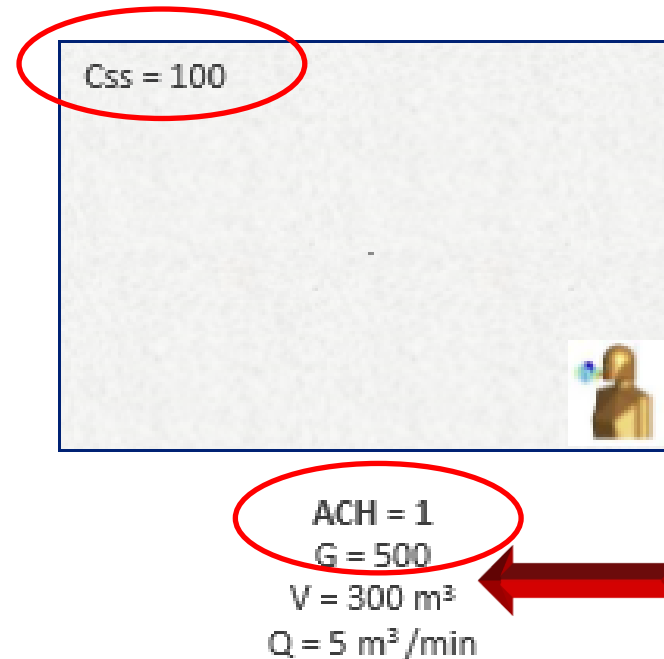
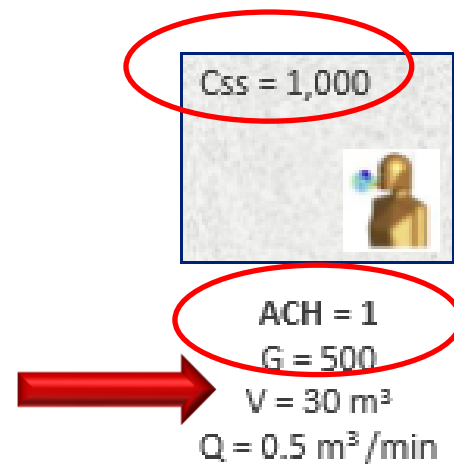


Azimi and Stephens. (2013). HVAC filtration for controlling infectious airborne disease transmission in indoor environments: Predicting risk reductions and operational costs. *Build Environ.* 2013 Dec; 70: 150–160.

# Aerosol Generation

## The Myth of Air Changes per Hour

$$C(t) = \frac{G}{Q} - \left(\frac{G}{Q} - C_o\right)e^{-\frac{Q}{V}t}$$

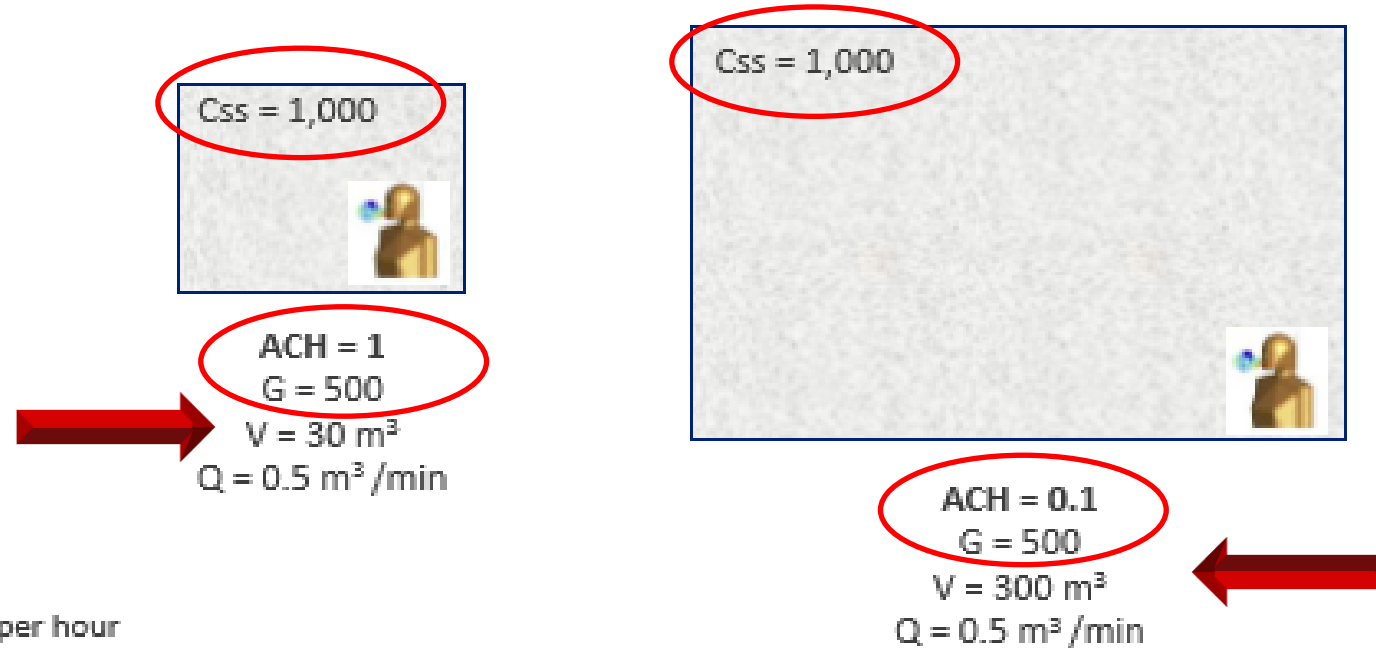


ACH = air changes per hour  
G = unitless theoretical rate of generation of infectious droplet nuclei  
V = room volume  
Q = clean/outside air flow rate  
 $C_{ss}$  = unitless steady state concentration in room of infectious droplet nuclei

# Aerosol Generation

## The Myth of Air Changes per Hour

$$C(t) = \frac{G}{Q} - \left(\frac{G}{Q} - C_o\right)e\left(-\frac{Q}{V}t\right)$$

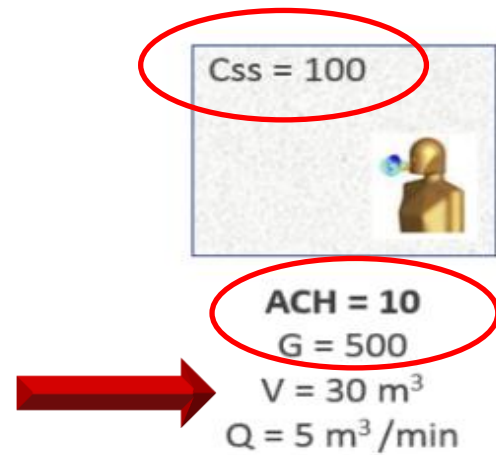


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# Aerosol Generation

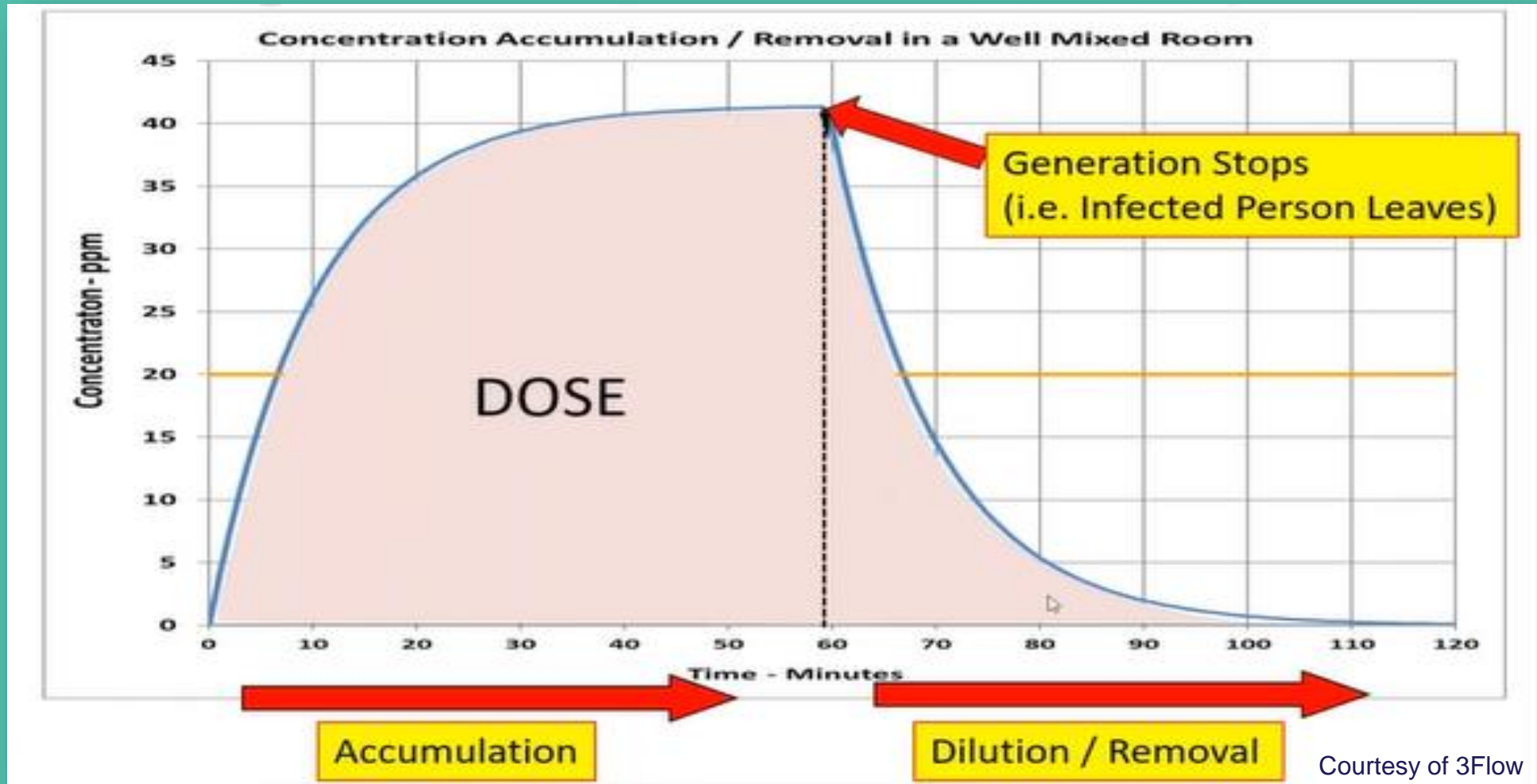
## The Myth of Air Changes per Hour

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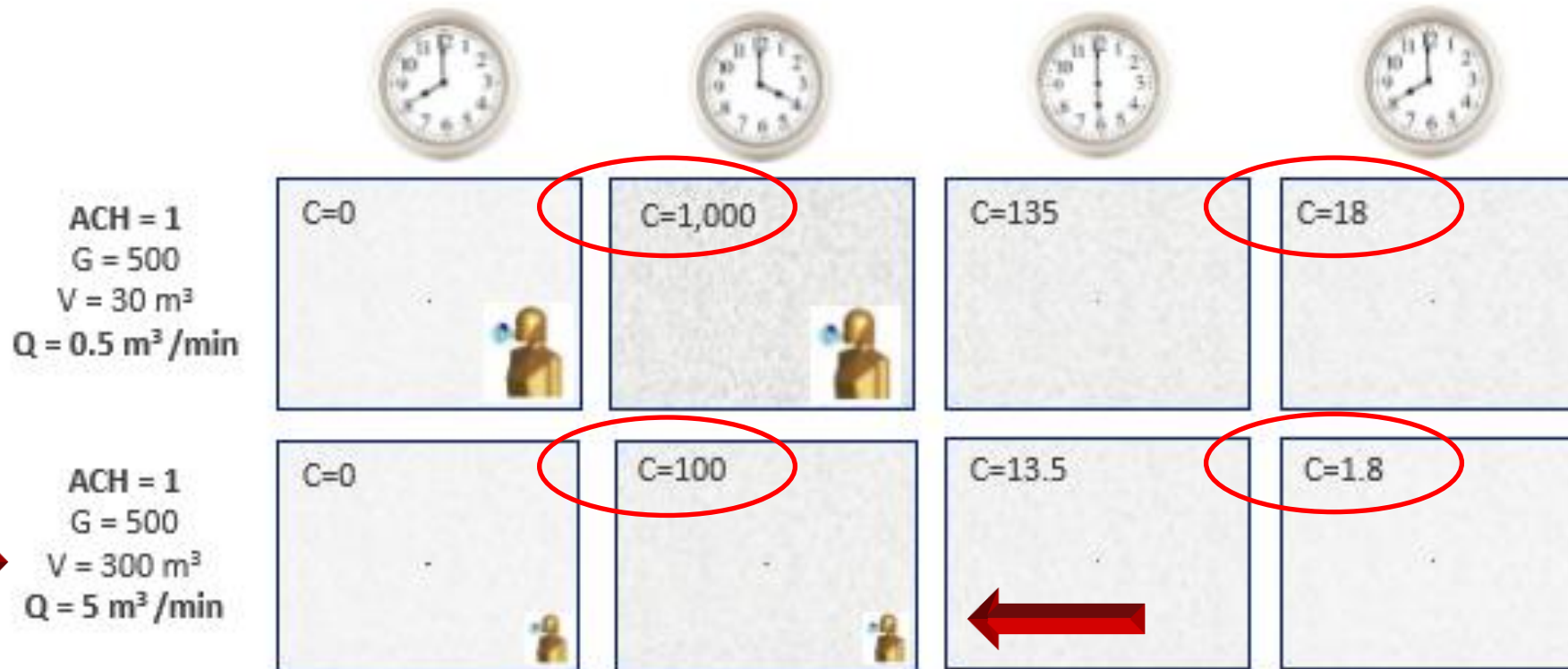
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# Aerosol Generation



# Aerosol Decay and Removal

## Rate of Decay/Removal





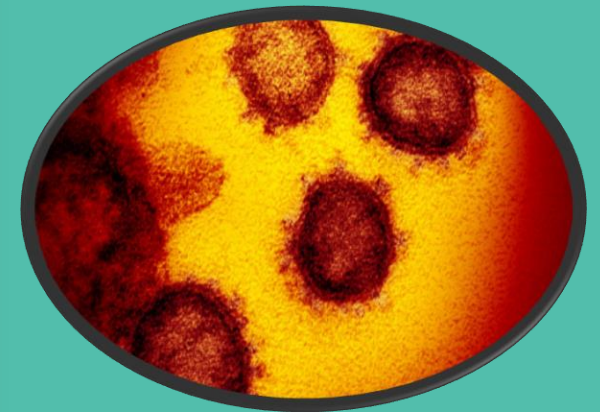
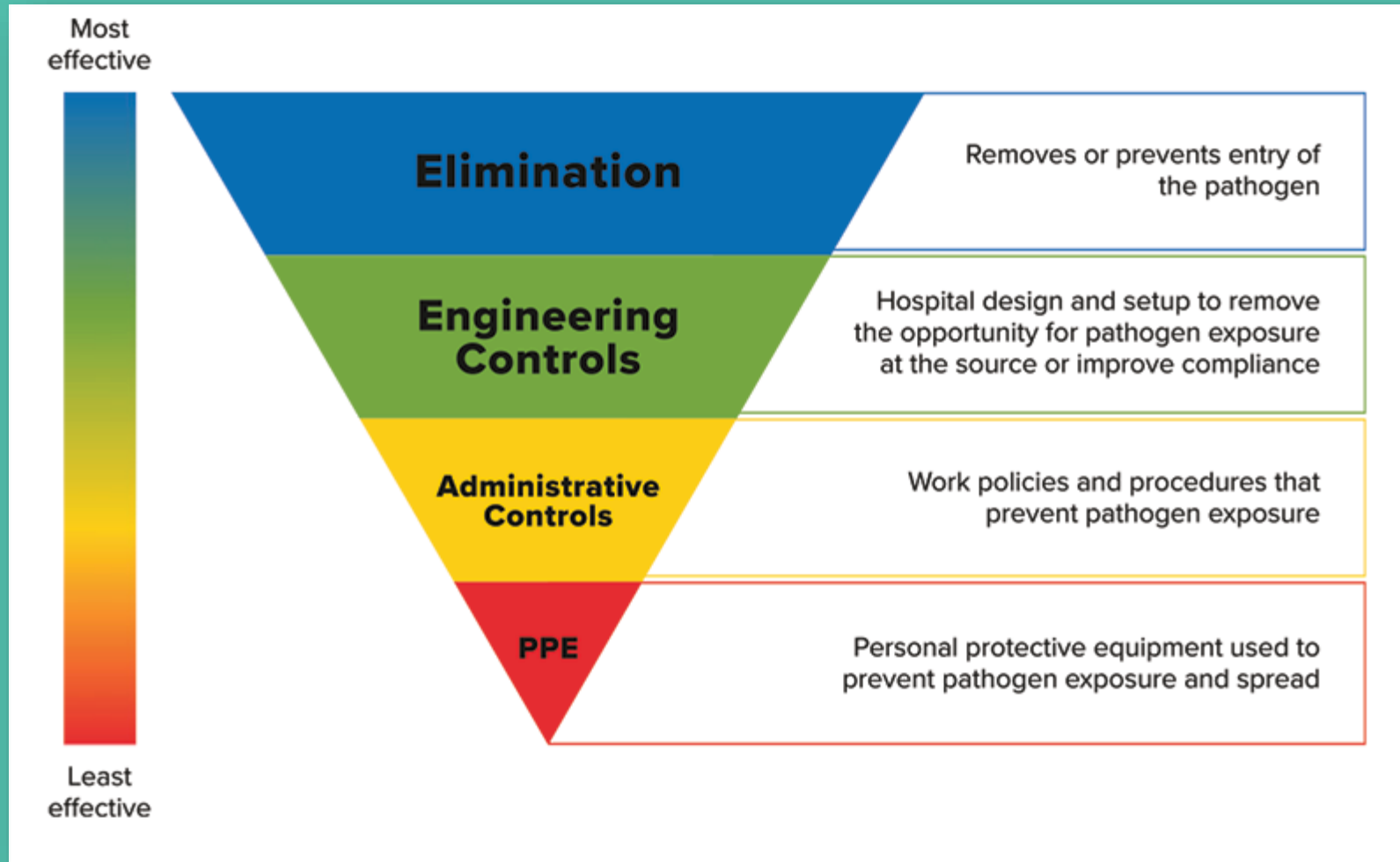
# Increasing Building Ventilation

Policy	Policy content	Attack rate, $\delta$	Time of peak infection, $T_p$ (day)	Percentage of peak infection, $\lambda_p$
Baseline		93.76%	154	24.90%
Policy A <sup>1</sup>	Homes, 0.7→5 ACH	52.05%	206	7.97%
Policy B	Classrooms, 2→5 ACH	93.19%	158	23.54%
Policy C	Offices, 1→5 ACH	92.63%	186	23.47%
Policy D	Restaurants, 15 ACH	92.80%	159	23.22%
Policy E	Shops, 1→5 ACH	93.48%	156	24.48%
Policy F	Public locations, 1.4→5 ACH	93.62%	155	25.63%
Policy G	Homes, 0.7→10 ACH	43.56%	211	6.30%
Policy H	Transportation, 4→10 ACH	92.76%	163	23.07%
Policy I	All locations, double	73.06%	290	10.61%
Policy J	Transportation, 4 ACH Other locations, 3 ACH	43.11%	464	3.86%
Policy K	All locations, 5 ACH	0.28%	1989	<0.01%
Policy L	All locations, 8 l/(s-person)	80.50%	319	12.95%
Policy M	All locations, 12 l/(s-person)	55.32%	587	4.79%
Policy N	Homes and classrooms, 5 ACH	43.49%	209	5.77%
Policy O	Homes and offices, 5 ACH	37.36%	426	3.88%
Policy P	Homes, classrooms and offices, 5 ACH	19.33%	1198	0.67%

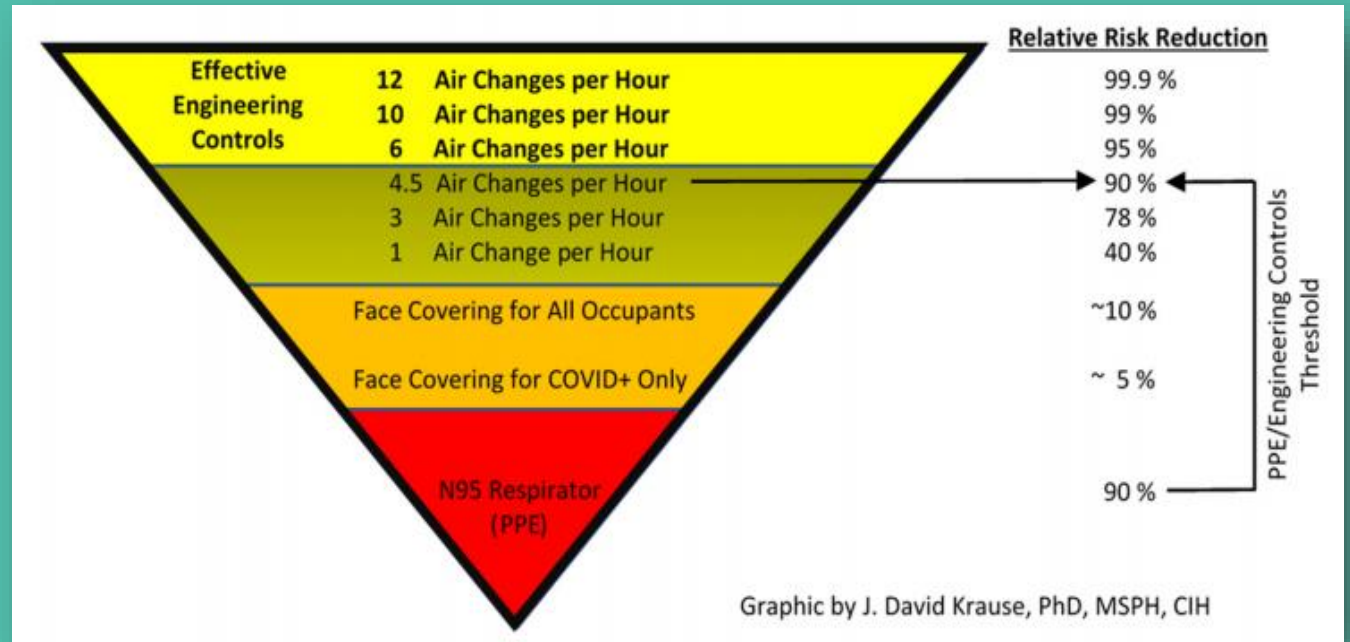
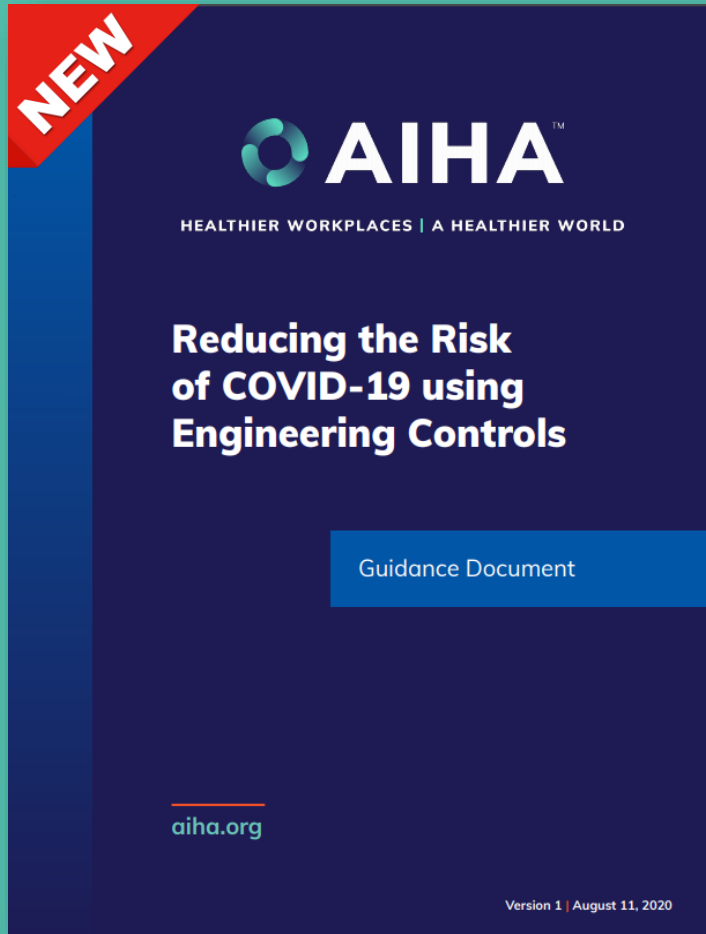
<sup>1</sup>Policy A (Homes, 0.75 ACH) means increasing ventilation rate in all homes from 0.7 ACH to 5 ACH.

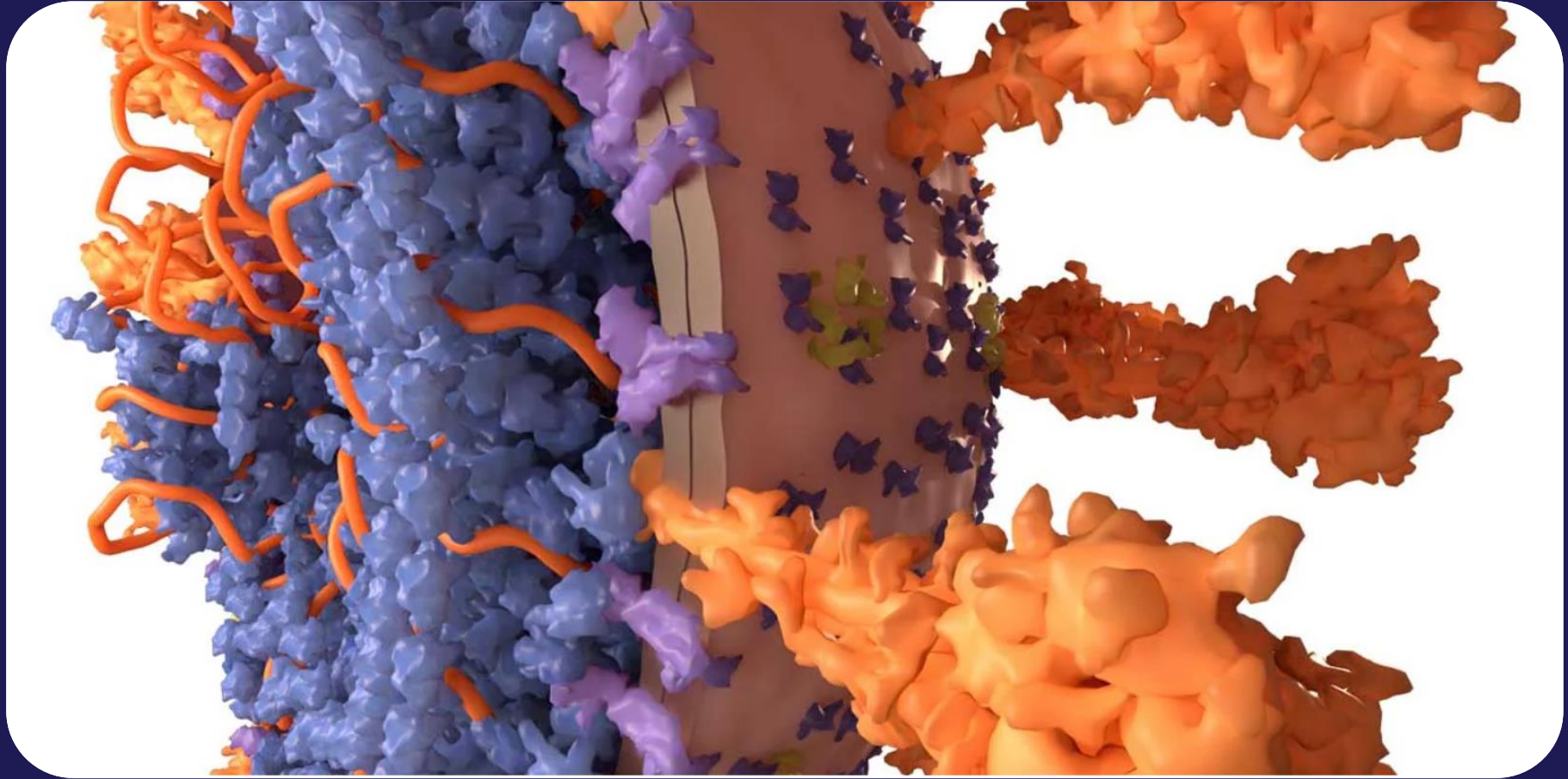
Gao X, Wei J, Lei H, Xu P, Cowling BJ, et al. (2016) Building Ventilation as an Effective Disease Intervention Strategy in a Dense Indoor Contact Network in an Ideal City. PLOS ONE 11(9): e0162481. <https://doi.org/10.1371/journal.pone.0162481>  
<https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0162481>

# Hierarchy of Infection Controls



# Hierarchy of Infection Controls





*Courtesy of Scientific American*

# BUILDING VENTILATION

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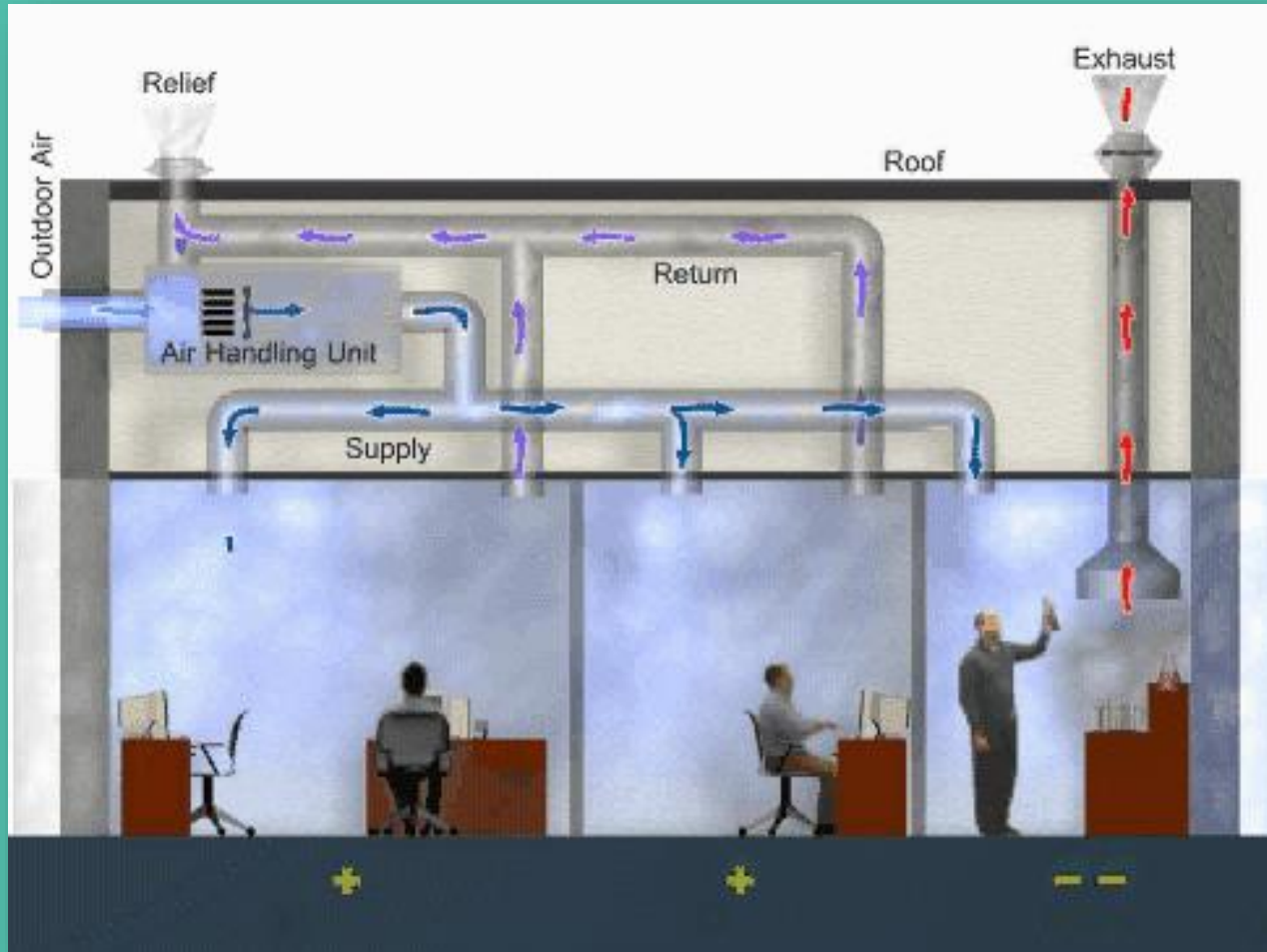
# Natural Building Ventilation

## What is building natural ventilation?

- Ventilation design relies on natural sources such as wind and temperature differences in order to flow fresh air through a building
- Best suited for open plan layouts and minimize noise pollution and external air
- Not suited for buildings with small spaces or buildings needing a constant air temperature
- Not suited for buildings that need to control for relative humidity



# Building Ventilation



- Fundamentals of IAQ in buildings
- Heating, ventilation and air-conditioning (HVAC)
- IAQ maintenance and housekeeping
- IAQ and energy efficiency
- Diagnosing and solving problems
- Renovation and new construction
- Managing for IAQ

[https://19january2017snapshot.epa.gov/indoor-air-quality-iaq/text-modules-indoor-air-quality-building-education-and-assessment-model\\_.html](https://19january2017snapshot.epa.gov/indoor-air-quality-iaq/text-modules-indoor-air-quality-building-education-and-assessment-model_.html)

# Building Ventilation

## What is building ventilation?

- Building ventilation circulates air throughout a built environment
- Outdoor ventilation or the heating, ventilating, and air-conditioning (HVAC) system of a building supplies and removes air naturally (windows) and/or mechanically to and from a space
- HVAC systems most often consist of mechanical parts which should provide air to building occupants at a comfortable temperature and humidity that is free of harmful concentrations of air pollutants



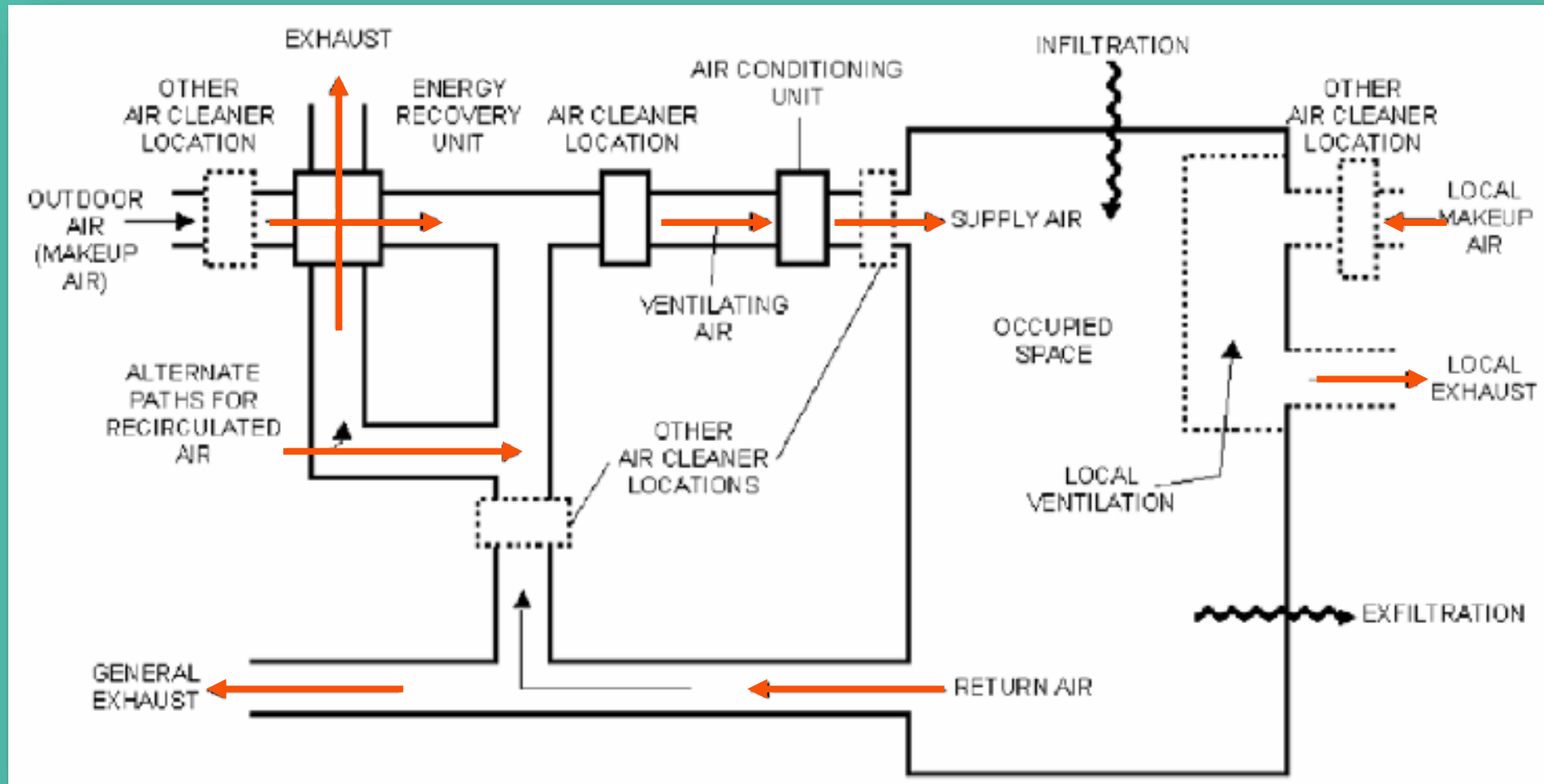
# Building Ventilation

## Prior to re-occupancy, review configuration of workspaces

- Ensure there is an adequate flow of fresh air to workspaces and optimize the ventilation system settings by:
  - Maximize fresh air through your ventilation system
  - Ensure restroom is under negative pressure
  - Ensure that the proper filtration is being used to control SARS-CoV-2 transmission
  - Clean and disinfect all HVAC intakes and returns daily
- ASHRAE updates for more information.
  - If pedestal, desk or hard mounted fans are used, minimize air from fans blowing from one person directly to another.
  - Fans may be useful to reduce the heat-related illness in plants



# Building Ventilation Diagram



# Building Ventilation

Gymnasium



Office and waiting room



Laboratory

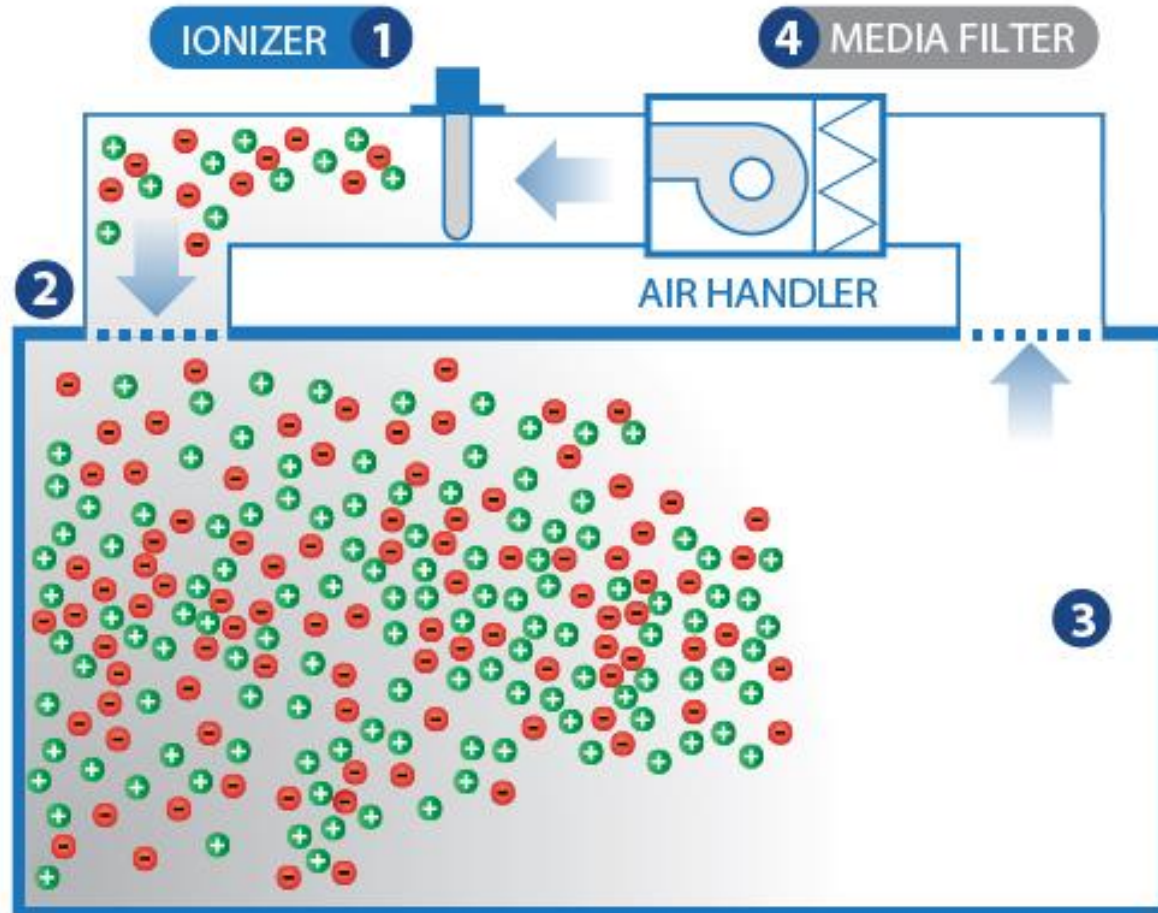
Classroom



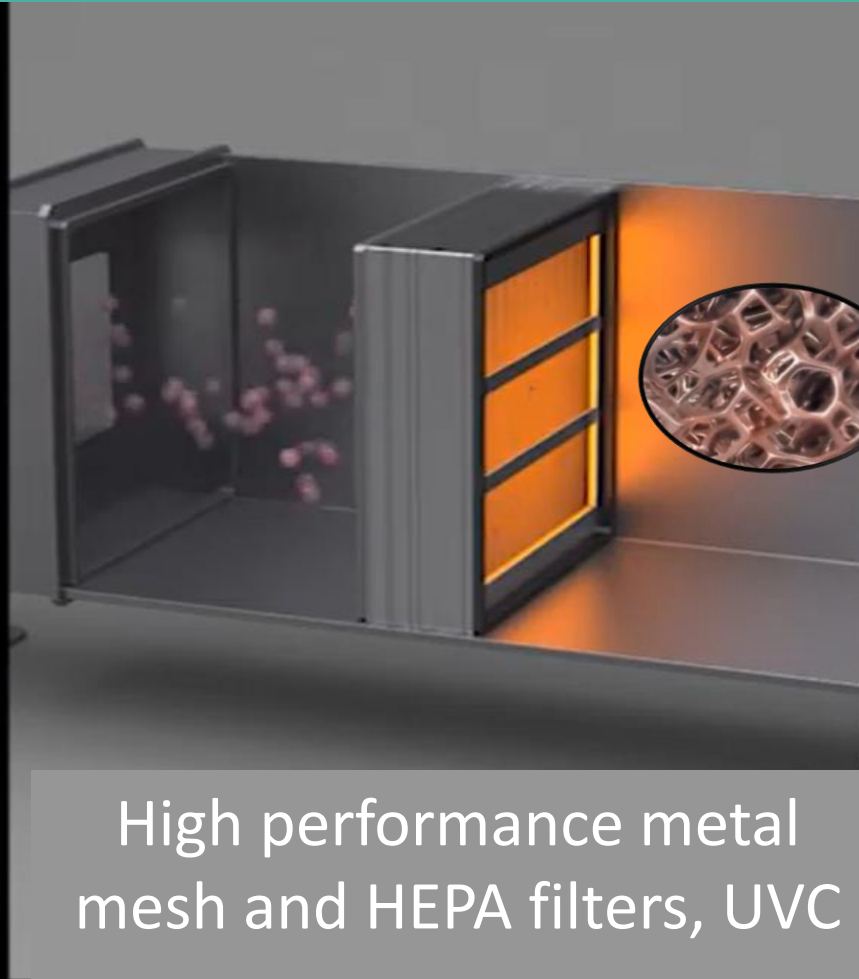
# Smoke Tubes for Ventilation Air Currents



# Building Ventilation



# Building Ventilation



# Building Ventilation

## Fluence (UV Dose) Required to Achieve Incremental Log Inactivation of Bacteria, Protozoa, Viruses and Algae

Revised, updated and expanded by  
Adel Haji Malayeri<sup>1</sup>, Madjid Mohseni<sup>1</sup>, Bill Cairns<sup>2\*</sup> and James R. Bolton<sup>2\*</sup>  
With earlier contributions by  
Gabriel Chevrefrils (2006)<sup>3</sup> and Eric Caron (2006)<sup>4</sup>  
With peer review by

Benoit Barbeau<sup>4</sup>, Harold Wright (1999)<sup>5</sup> and Karl G. Linden<sup>6</sup>

1. Department of Chemical and Biological Engineering, University of British Columbia, Vancouver, BC, Canada  
2. Trojan Technologies, London, ON, Canada  
3. Department of Civil and Environmental Engineering, University of Alberta, Edmonton, AB, Canada  
4. Chaire Industrielle-CRSNG en Eau Potable, Polytechnique Montreal, Montreal, QC, Canada  
5. Carollo Engineers, Boise, ID  
6. Department of Civil, Environmental and Architectural Engineering, University of Colorado-Boulder  
\*Corresponding authors: Bill Cairns (bcairns@trojanuv.com) and James Bolton (jb3@ualberta.ca)

### Introduction

#### Revision history

This paper represents the second revision of a compilation that goes back to 1999. The original compilation (Wright and Sakamoto 1999) was an internal document of Trojan Technologies. The first revision was published in 2006 (Chevrefrils et al. 2006). Data from the previous reviews have been included here. In addition, data from the past 10 years have been added and a new table for algae has been added. Two other reviews of the UV sensitivity of microorganisms have been published (Hijnen et al. 2006, Coohill and Sagripanti 2008).

#### Brief description and selection criteria for content of the tables

Tables 1-5 (only available in the downloaded magazine version) present a summary of published data on the ultraviolet (UV) fluence-response data for various microorganisms that are pathogens, indicators or organisms encountered in the application, testing of performance, and validation of UV disinfection technologies. The tables reflect the state of knowledge but include the variation in technique and biological response that currently exists in the absence of standardized protocols. Users of the data for their own purposes are advised to exercise critical judgment in how they use the data.

In most cases, the data are generated from low-pressure (LP) monochromatic mercury arc lamp sources for which the lamp fluence rate (irradiance) can be measured empirically and multiplied by exposure time (in seconds) to obtain an incident fluence onto the sample being irradiated; however, earlier data do not always contain the correction factors that

are now considered standard practice (Bolton and Linden 2003; Bolton et al. 2015a) in order to determine the average fluence delivered to the microorganisms within the irradiated sample. Such uncorrected data are marked and should be considered as upper limits, since the necessary corrections have not been made. Some data are from polychromatic medium pressure (MP) mercury arc lamps, and in some cases both lamp types are used. In a few cases, filtered polychromatic UV light is used to achieve a narrow band of irradiation around 254 nm. These studies are also designated as LP.

None of the data incorporate any impact of photorepair processes. Only the response to the inactivating fluence is documented. The references from which the data are abstracted must be carefully read to understand how the reported fluences are calculated and what the assumptions and procedures are in the calculations.

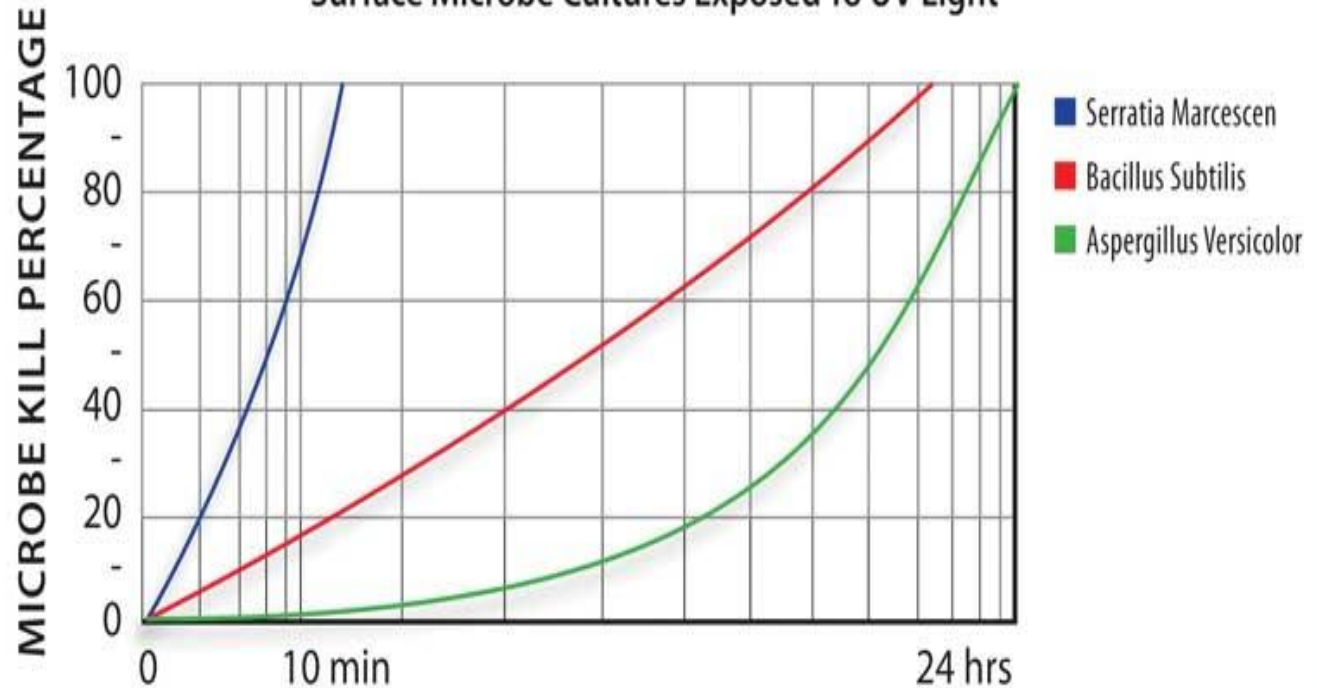
It is the intention of the authors and sponsors to keep this table dynamic, with periodic updates. Recommendations for inclusion in the tables, along with the reference source, should be sent to:

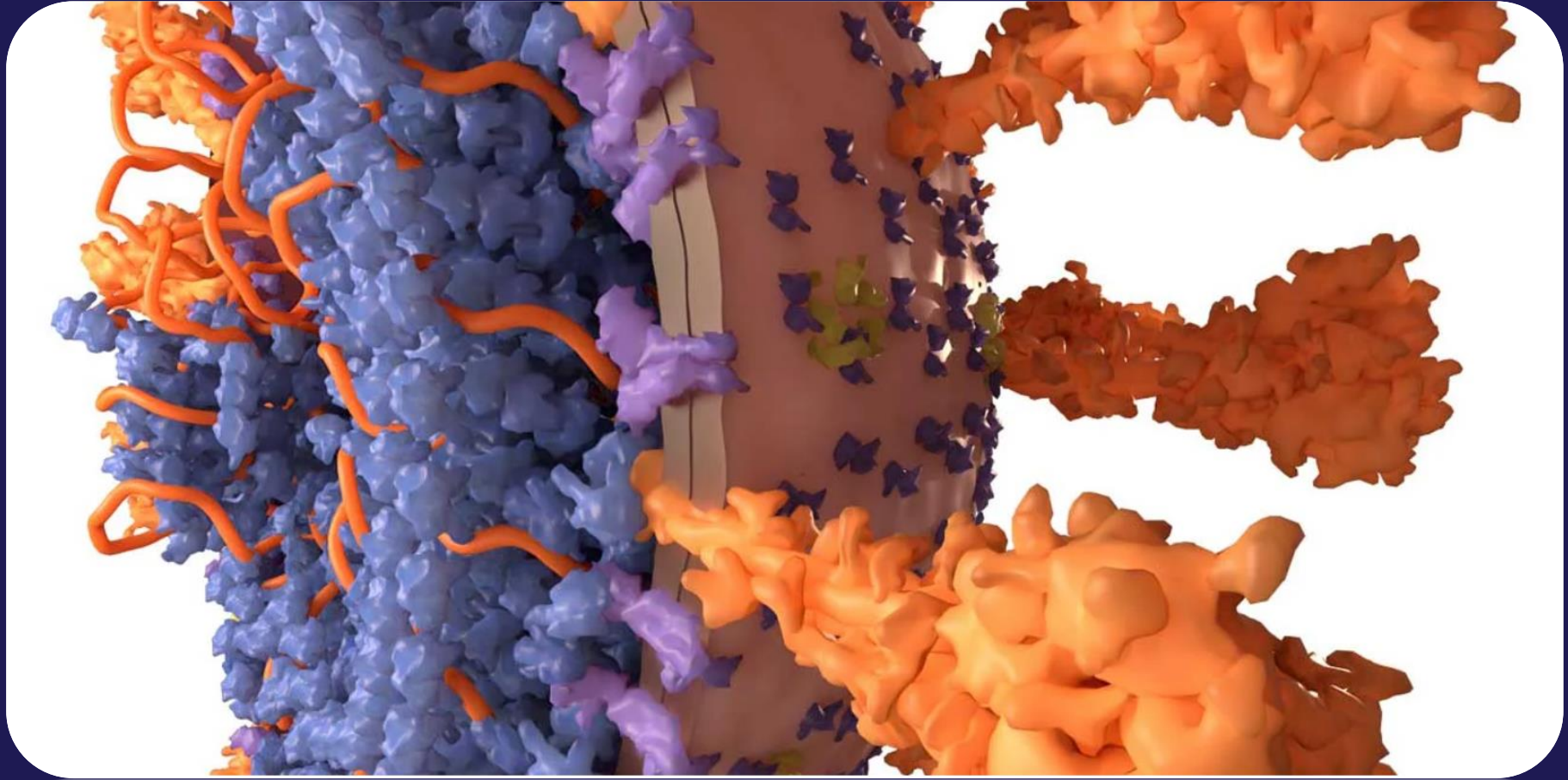
Dr. Bill Cairns, chief scientist  
Trojan Technologies Inc.  
3020 Gore Road  
London, ON, Canada N5V 4T7  
Email: bcairns@trojanuv.com

Prof. James R. Bolton  
Department of Civil and  
Environmental Engineering  
Edmonton, AB, Canada T6G 2W2  
Email: jb3@ualberta.ca

The selection criteria for inclusion are recommended as follows:

## UV Antimicrobial Effectiveness Surface Microbe Cultures Exposed To UV Light



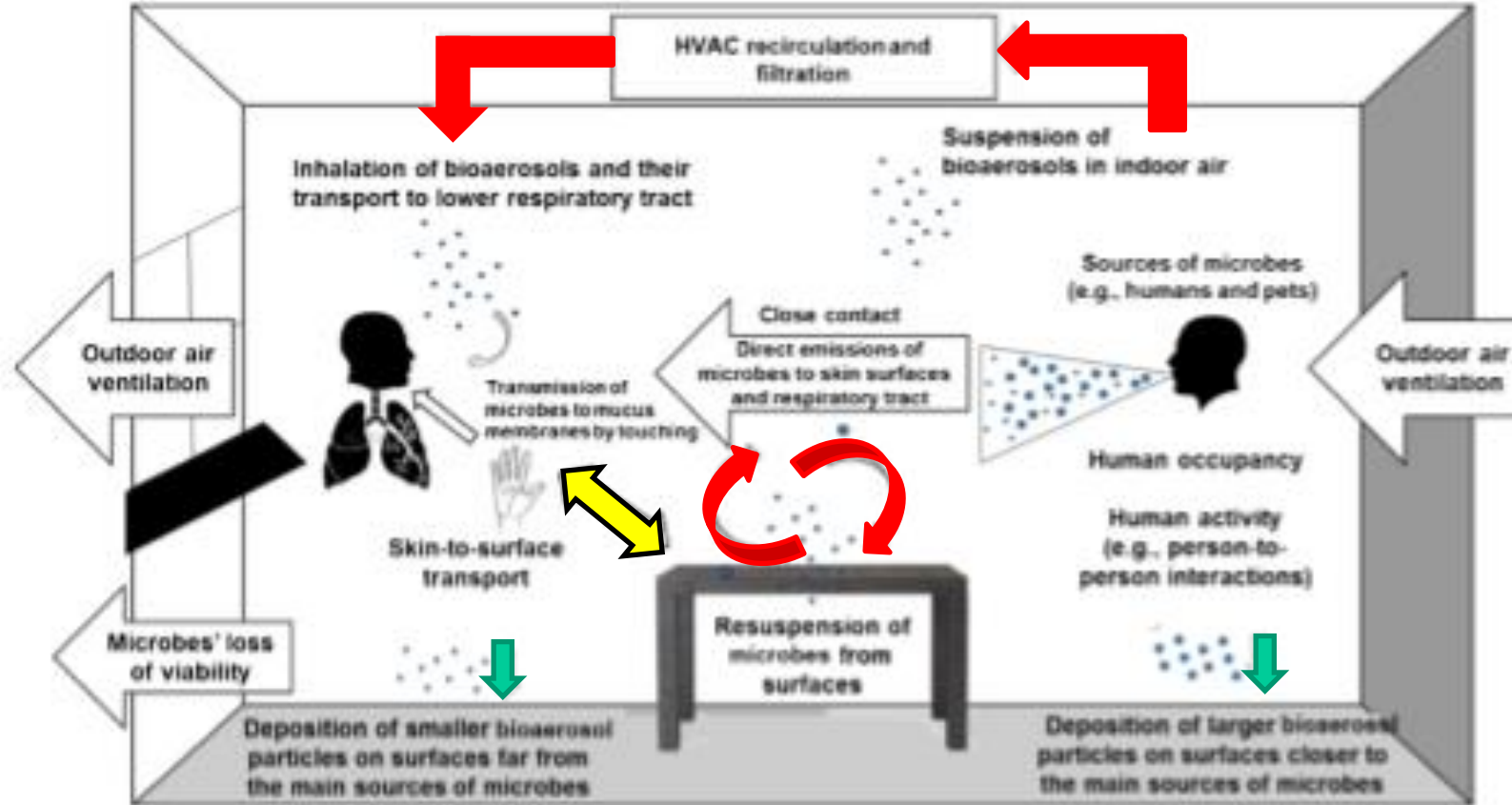


*Courtesy of Scientific American*

## AIRFLOW DISTRIBUTION

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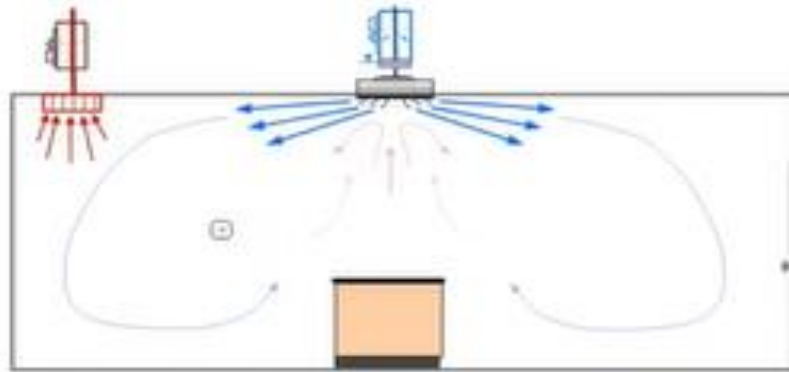
# Airflow Distribution



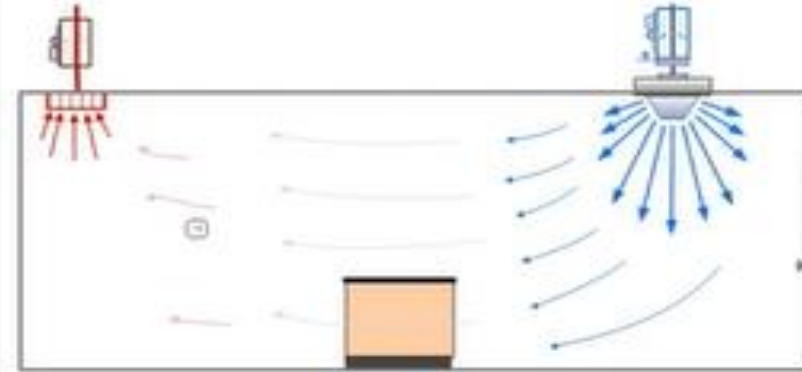
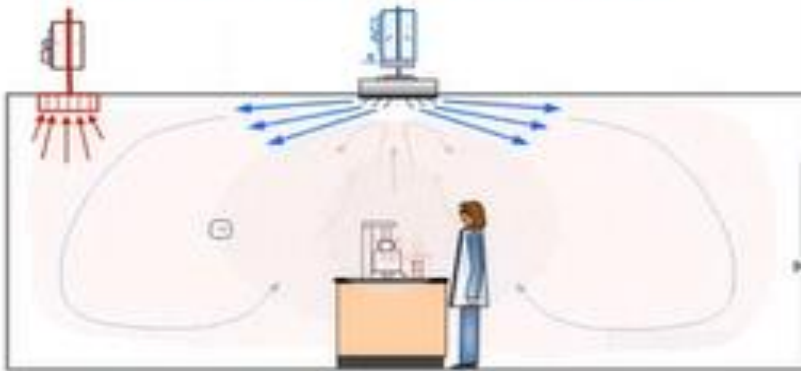
Stephens et al. (2019). Microbial Exchange via Fomites and Implications for Human Health. Current Pollution Reports volume 5, pages198–213(2019)



# Airflow Distribution



**Traditional Induction Diffuser**

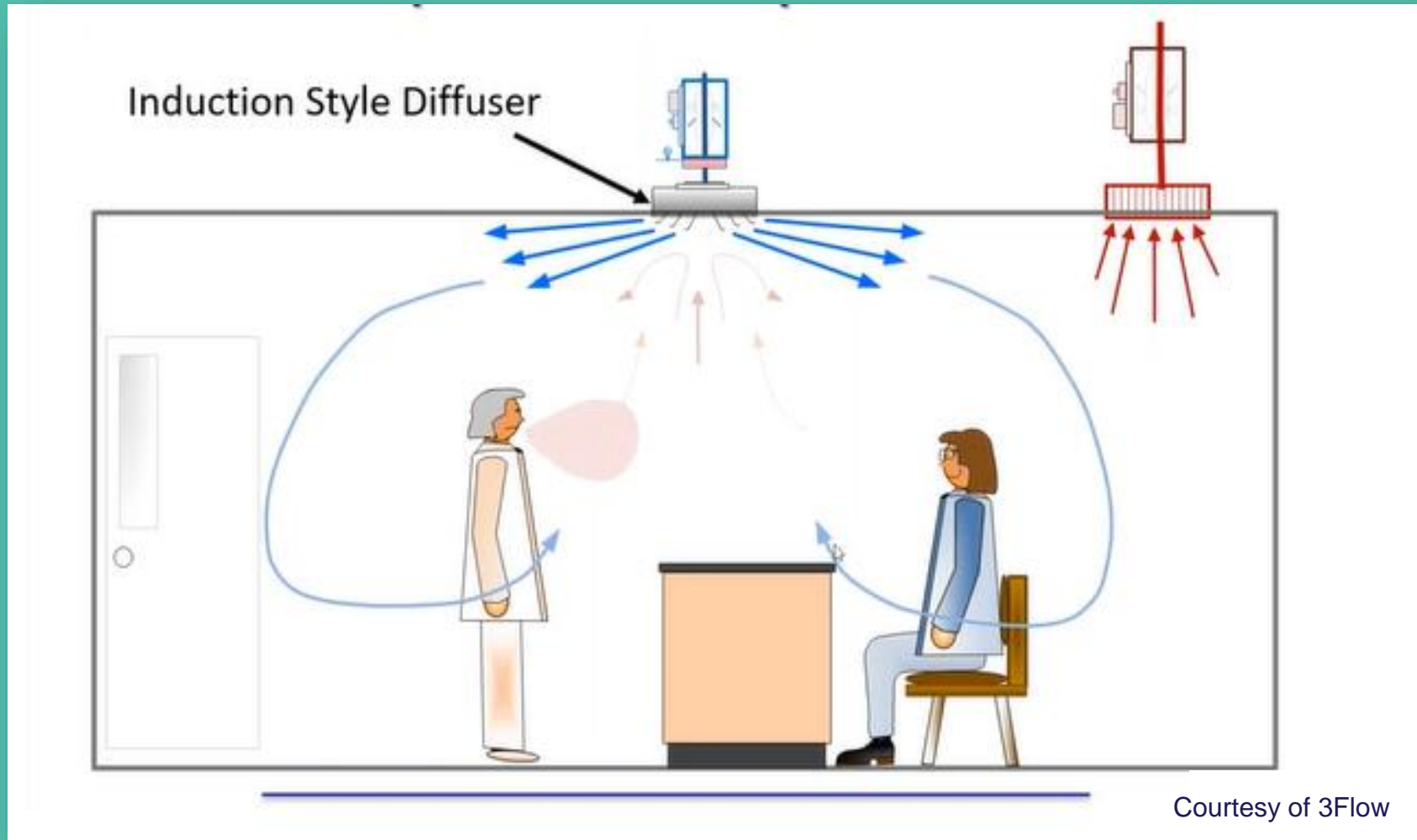


**Directional Displacement Diffuser**



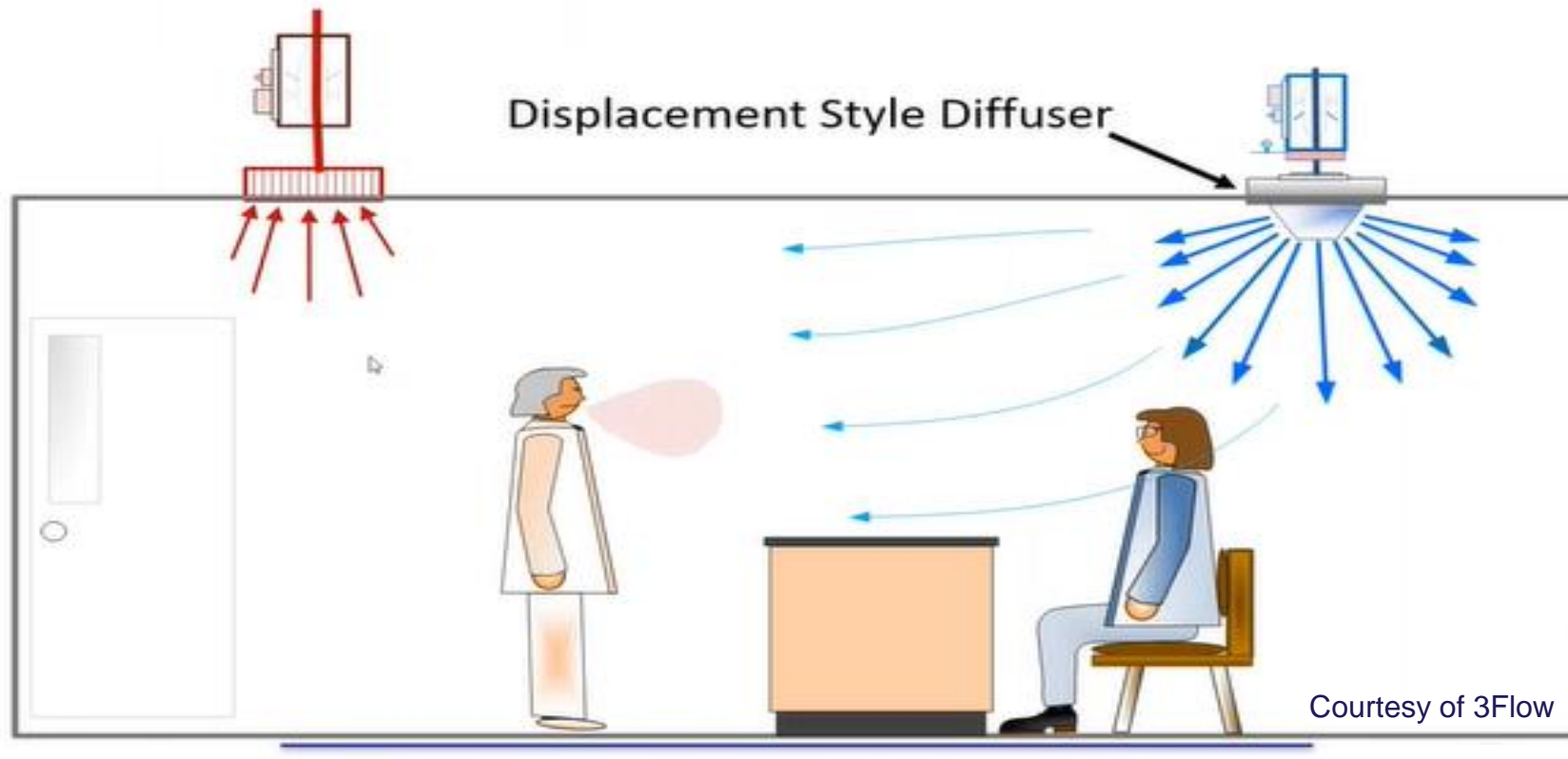
Courtesy of 3Flow

# Airflow Distribution

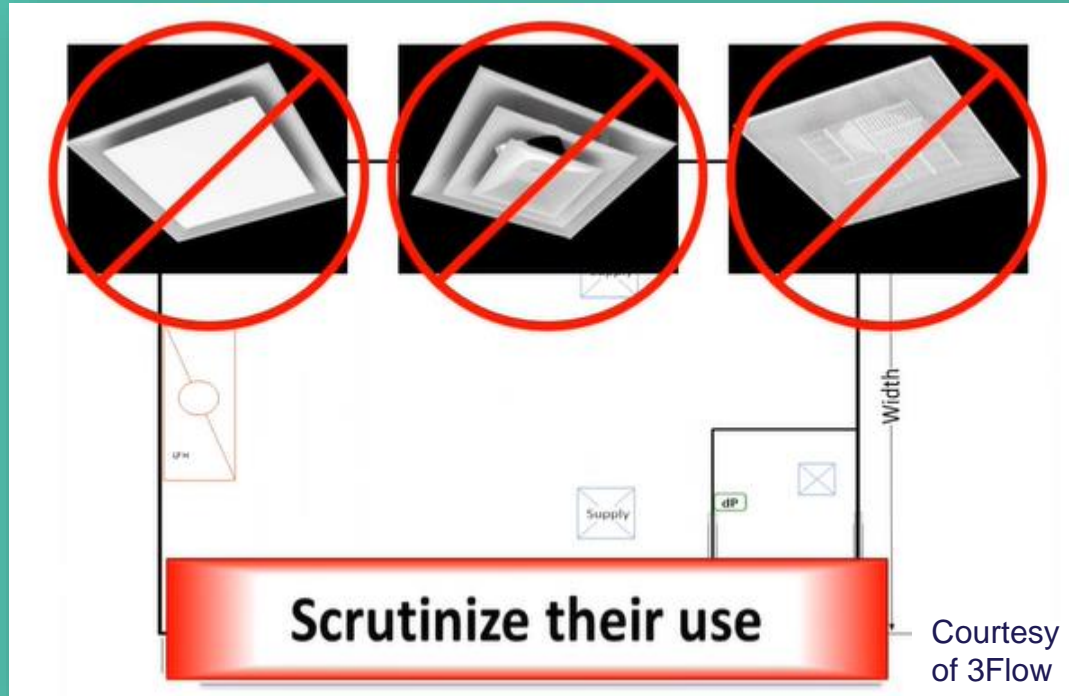


# Airflow Distribution

Exposure can be reduced through directional displacement and coupling supply and exhaust



# Airflow Distribution



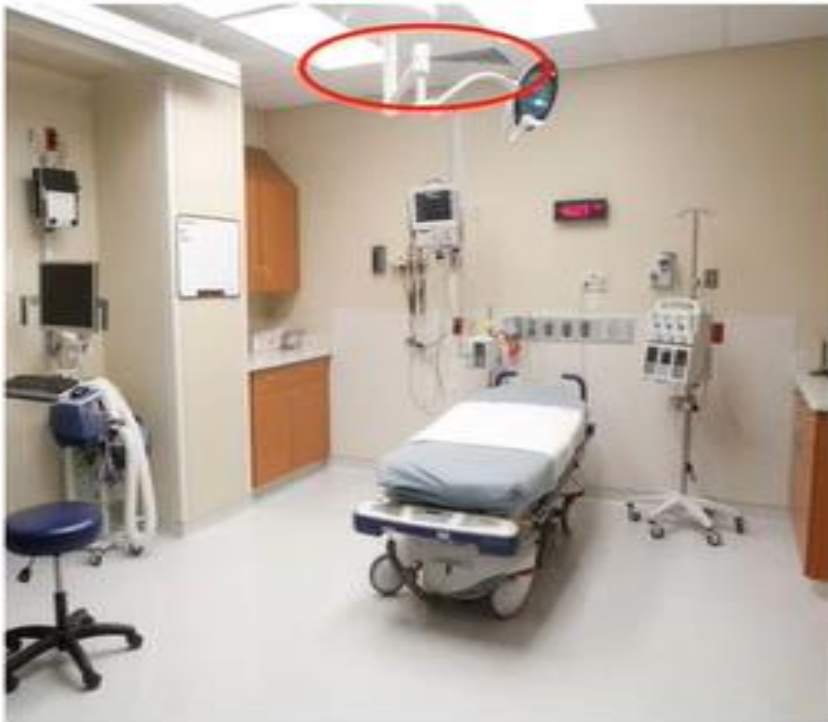
See any problems with the air supply and exhaust in these waiting rooms?



Courtesy of 3Flow

# Airflow Distribution

See any problems with the air supply and exhaust in these hospital procedure rooms?

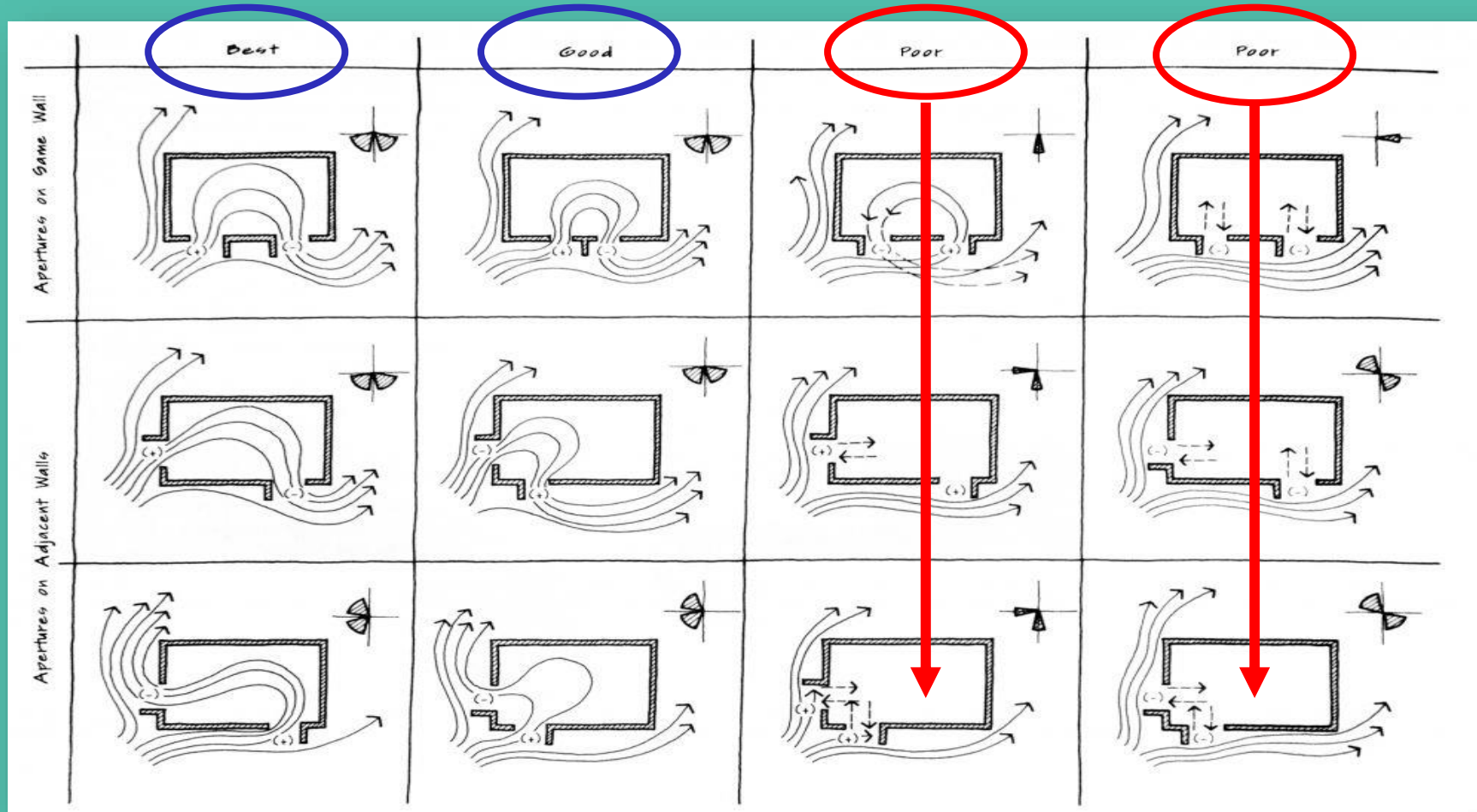


Courtesy of 3Flow

# NIST Multizone Airflow Dispersion Model

<b>Zone Geometry</b>	Volume 100 m <sup>3</sup>	Floor Area 40 m <sup>2</sup>	Wall Area 63.25 m <sup>2</sup>	Ceiling Area 40 m <sup>2</sup>	Other Surface Area 4 m <sup>2</sup>	Surface to Volume Ratio 1.5
<b>Infiltration</b>	Infiltration 0.5 1/h	Particle Penetration Coefficient 1				
<b>Ventilation System</b>	Supply Airflow Rate 360 sm <sup>3</sup> /h	Outdoor Air Intake Fraction 0	Return Airflow Rate 360 sm <sup>3</sup> /h	Local Exhaust Airflow Rate 0 sm <sup>3</sup> /h		
<b>System Filters</b>	Outdoor Air Filter None	Recirculation Air Filter MERV 8				
<b>Calculated Airflows</b>	Total Outdoor Air Change Rate 0.5 1/h	Outdoor Air Intake Rate 0 sm <sup>3</sup> /h	Recirculation Airflow Rate 360 sm <sup>3</sup> /h			
<b>Room Air Cleaner</b>	Maximum Airflow Rate 200 scfm	Fan Flow Fraction 1	Filter Efficiency 0.8	CADR 160 scfm		
<b>Particle Properties</b>	Name IV1	Diameter 1 μm	Density 1 g/cm <sup>3</sup>	Particle Deactivation On	Half-life 1.1 h	Decay Rate 0.63014 1/h
<b>Continuous Source</b>	Source On	Generation Rate 3.2 #/min	Generation Time Period Start 00:00 / End 24:00			
<b>Burst Source</b>	Source On	Burst Type Intermittent	Amount per Burst 45 #	Generation Time Period Start 00:01 / End 24:00	Burst Interval 10 min	
<b>Particle Deposition Velocities</b>	Floor 0.00371 cm/s	Walls 0.000326 cm/s	Ceiling 4.33e-8 cm/s	Other Surface 0 cm/s	Effective Deposition Rate 0.060848 1/h	
<b>Initial Concentrations</b>	Outdoor Air 0 #/m <sup>3</sup>	Zone Air 0 #/m <sup>3</sup>				
<b>Occupant Exposure</b>	Occupancy Time Period Start 07:00 / End 17:00	Occupancy Type Intermittent	Intermittent Occupancy Interval 60 min	Intermittent Occupancy Duration 10 min		
<b>RUN SIMULATION</b>						

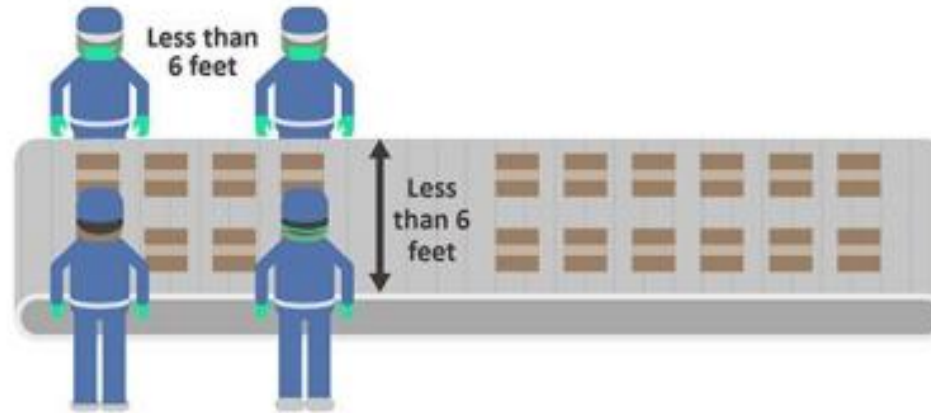
# Airflow Distribution



# Airflow Distribution

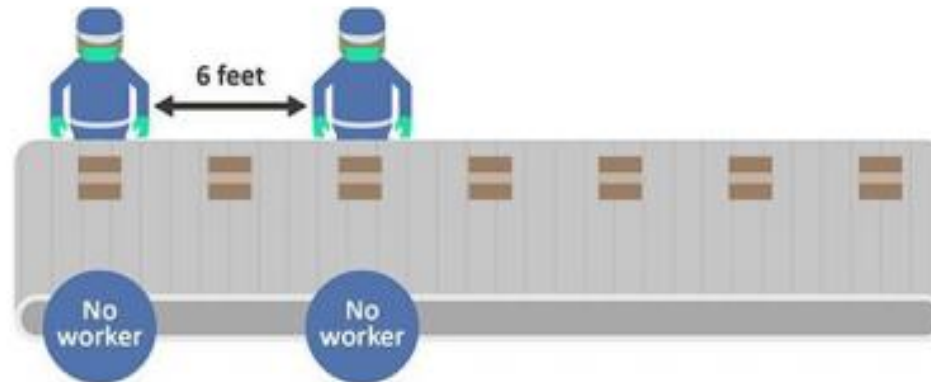
## Bad:

Workers are within six feet of one another, including at side-by-side or facing workstations.



## Good:

Workers are spaced at least six feet apart, not facing one another. Another setup may be used to achieve similar distancing between workers.

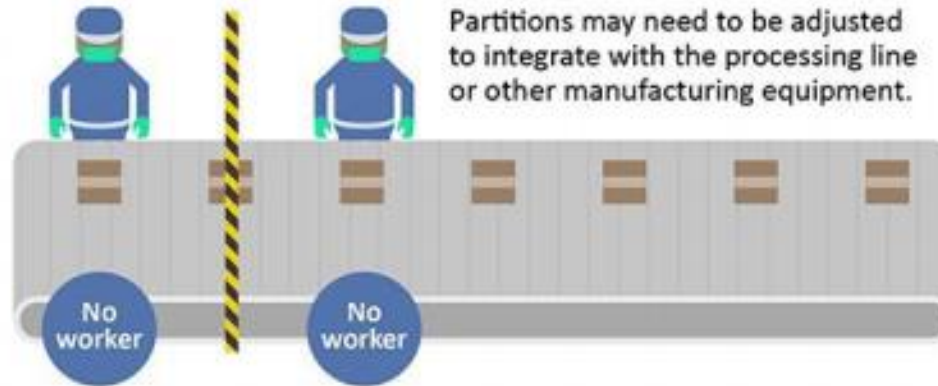




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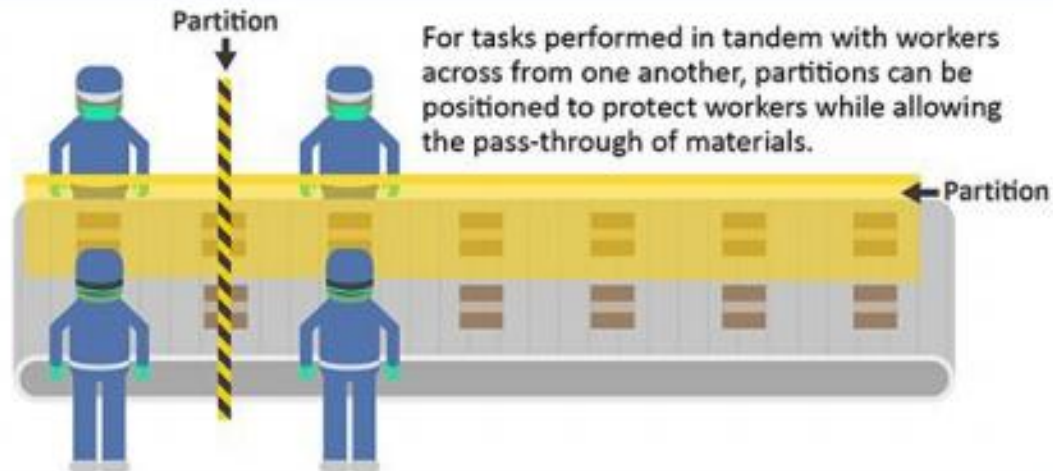
## Good:

Physical barriers, such as partitions, separate workers from each other.



## Good:

Physical barriers, such as partitions, separate workers from each other, including where workers need to perform tasks in tandem across from one another.



# Sneeze Guards and Partitions



# Ventilation for Industry

## Hierarchy of Controls

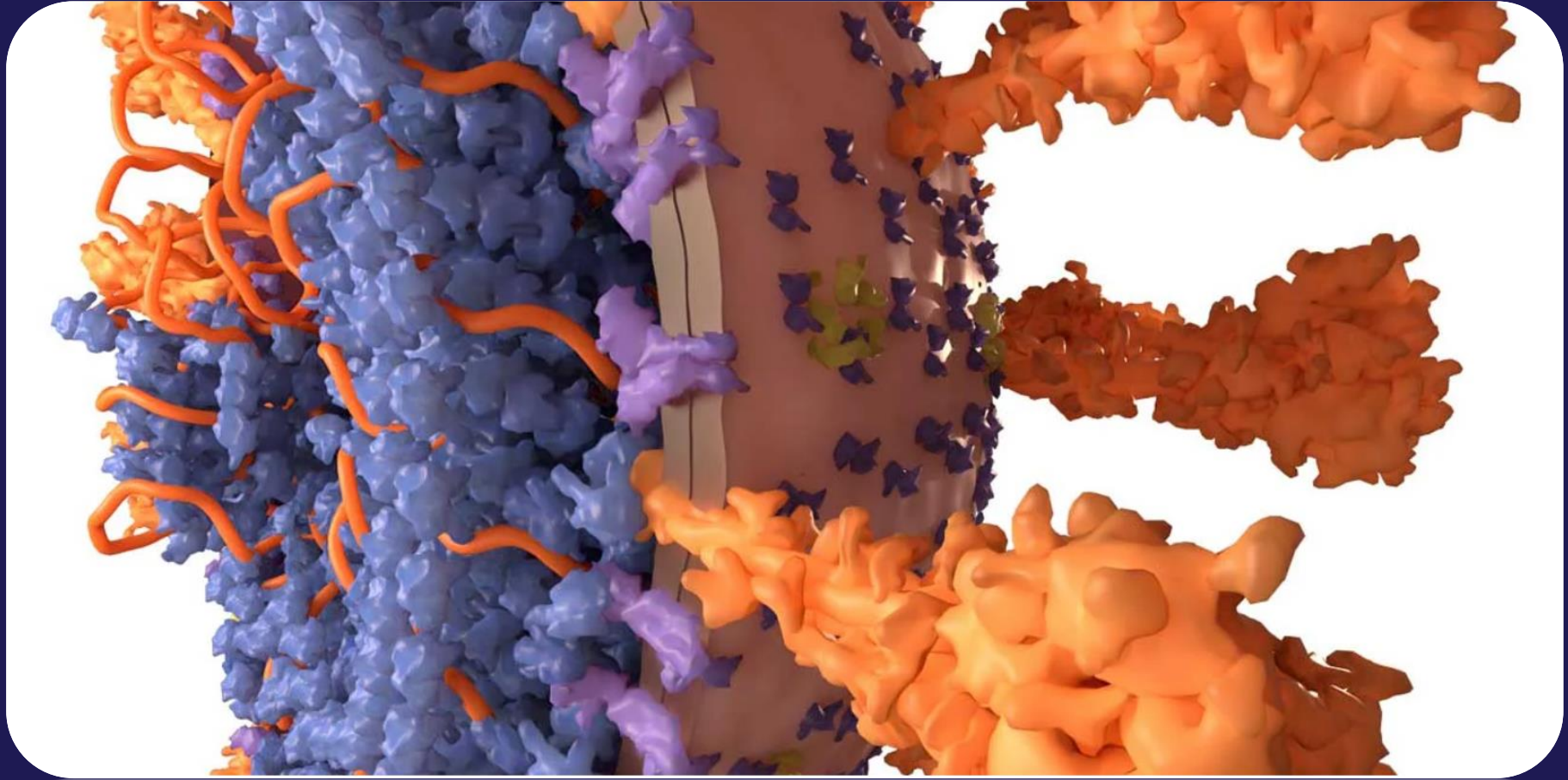
- Engineering Controls
  - General exhaust ventilation
  - Local exhaust ventilation
  - Fans
  - Air filtration
  - Building and room filtration
  - Ultraviolet germicidal irradiation
- Administrative Controls
- Personal Protective Equipment (PPE)
- Important suggested measures



White Paper  
on  
**Ventilation for  
Industrial Settings during  
the COVID-19 Pandemic**

by  
American Conference of Governmental Industrial Hygienists (ACGIH®)  
Industrial Ventilation Committee  
August 2020

[acgih.org](https://www.acgih.org)



*Courtesy of Scientific American*

# AIR FILTRATION

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# Air Filtration

## Regularly clean or replace HVAC system filters

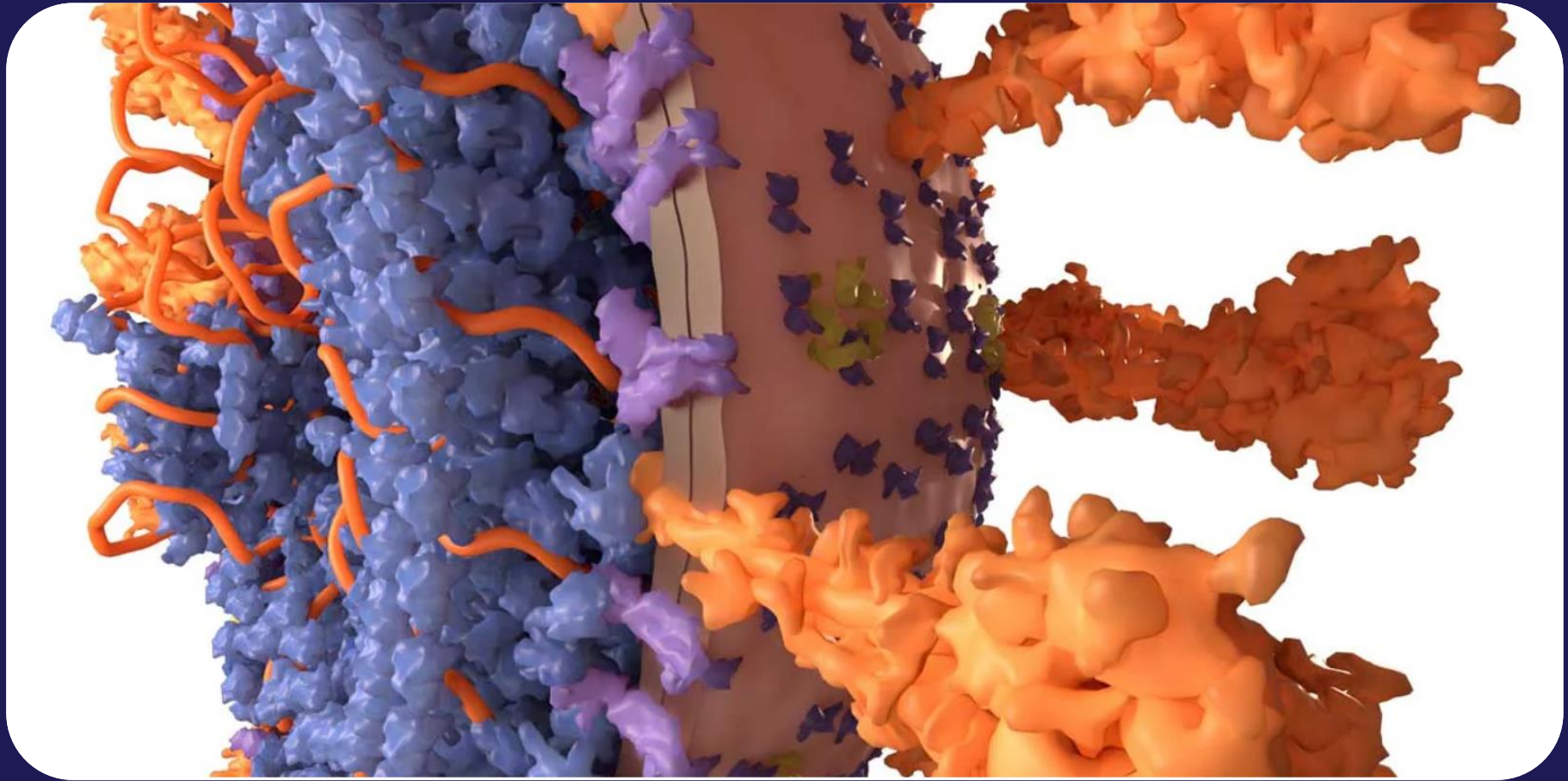
- Use the most efficient filters possible to maintain ability to supply adequate air flow
- Consider using stand alone portable HEPA units
- Change to MERV 13-14 or HEPA filter
- Ensure that filters are installed in the correct orientation relative to airflow, that they are the appropriate size, and that they are seated in the filter rack properly
- Minimize air flowing around filters instead of through them



# Air Filtration

## ASHRAE Standard 52.2-2017 -- Minimum Efficiency Reporting Value (MERV)

Std. 52.2 Minimum Efficiency Reporting Value (MERV)	Application Guidelines		
	Typical Controlled Contaminant	Typical Applications and Limitations	Typical Air Filter/Cleaner Type
16	0.30 to 1.0 $\mu\text{m}$ Particle Size	Hospital inpatient care	Bag Filters
15	All bacteria	General surgery	Nonsupported (flexible) microfine fiberglass or synthetic media. 300 to 900 mm (12 to 36 in.) deep, 6 to 12 pockets.
14	Most tobacco smoke	Smoking lounges	Box Filters
13	Droplet nuclei (sneeze)	Superior commercial buildings	Rigid style cartridge filters: 150 to 300 mm (6 to 12 in.) deep may use lofted (air laid) or paper (wet laid) media.
12	Cooking oil		
11	Most smoke		
10	Insecticide dust		
9	Copier toner		
8	Most face powder		
7	Most paint pigments		
12	1.0 to 3.0 $\mu\text{m}$ Particle Size	Superior residential	Bag Filters
11	Legionella	Better commercial buildings	Nonsupported (flexible) microfine fiberglass or synthetic media. 300 to 900 mm (12 to 36 in.) deep, 6 to 12 pockets.
10	Humidifier dust	Hospital laboratories	Box Filters
9	Lead dust		Rigid style cartridge filters: 150 to 300 mm (6 to 12 in.) deep may use lofted (air laid) or paper (wet laid) media.
8	Milled flour		
7	Coal dust		
6	Auto emissions		
5	Nebulizer drops		
4	Welding fumes		
8	3.0 to 10.0 $\mu\text{m}$ Particle Size	Commercial buildings	Pleated Filters
7	Mold	Better residential	Disposable, extended surface, 25 to 125 mm (1 to 5 in.) thick with cotton-polyester blend media, cardboard frame.
6	Spores	Industrial workplaces	Cartridge Filters
5	Hair spray	Paint booth inlet air	Graded density viscous coated cube or pocket filters, synthetic media.
4	Fabric protector		Throwaway
3	Dusting aids		Disposable synthetic media panel filters.
2	Cement dust		
1	Pudding mix		
0	Snuff		
0	Powdered milk		

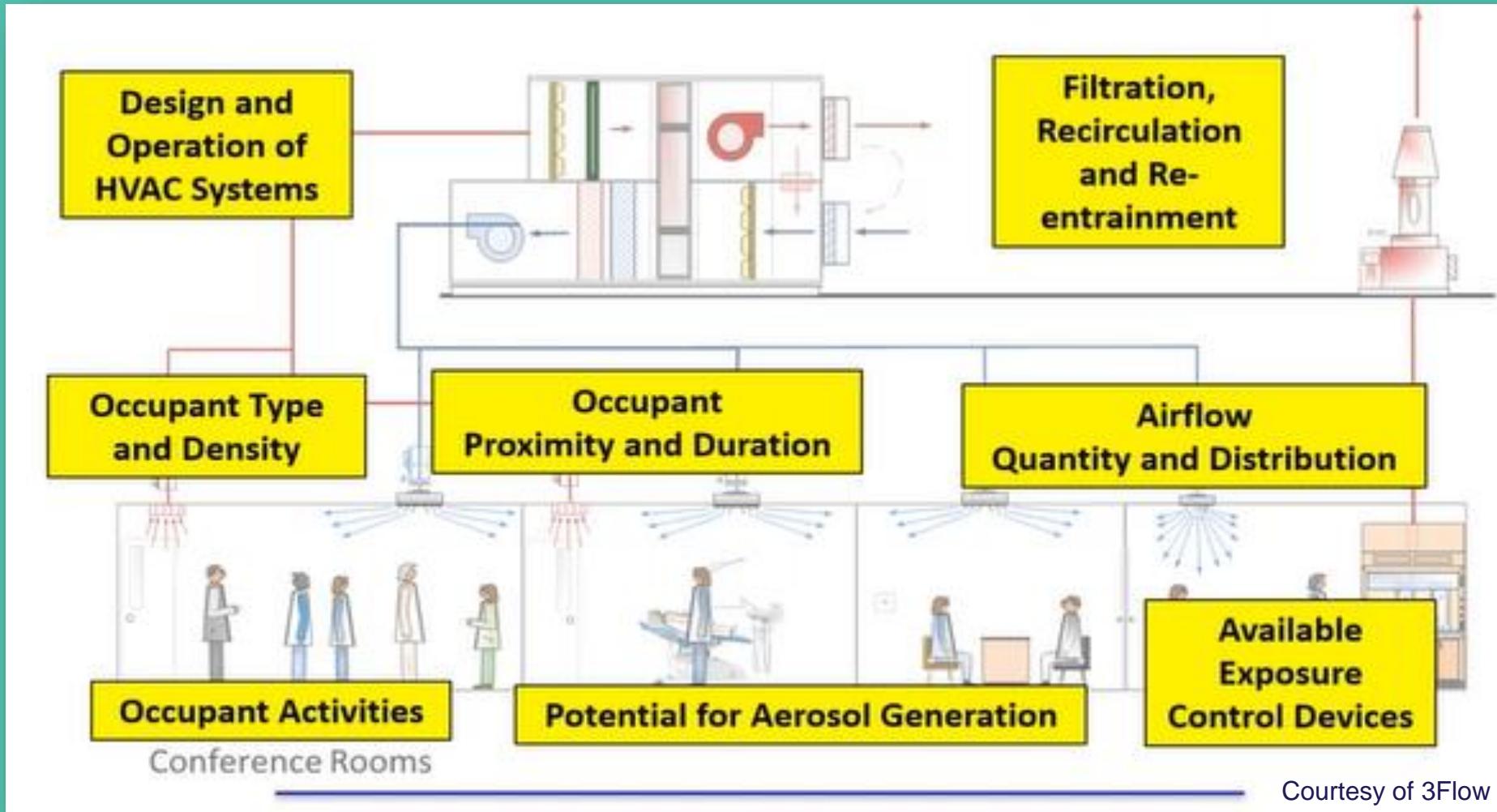


*Courtesy of Scientific American*

## **BUILDING VENTILATION CASE STUDY**

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# Building Ventilation Case Study





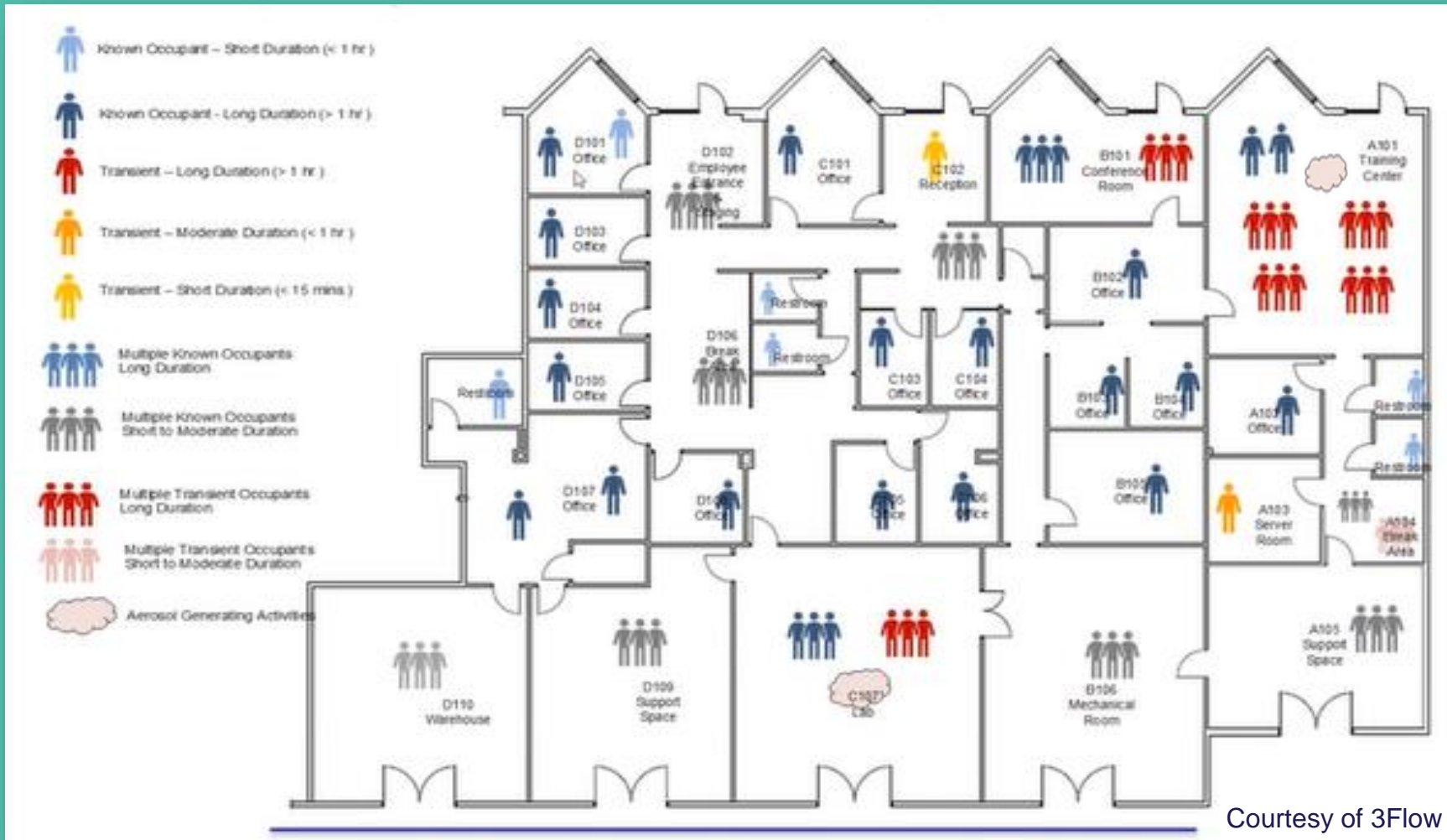
# Building Ventilation Case Study



# Building Ventilation Case Study



# Building Ventilation Case Study



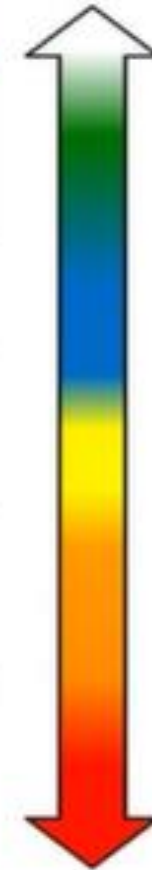
# Building Ventilation Case Study

Space	Space Type	Space Risk Ratings																			Weighting and Rating		
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Weighted Score	Risk Band	
A101	Training Center	1	2	2	2	3	4	4	4	2	1	0	3	2	3	4	4	4	3	4	0	158	3
A102	Office	0	0	1	2	3	0	0	0	0	1	0	3	2	2	4	4	4	3	4	0	123	1
A103	Server Room	0	0	0	0	1	1	2	0	0	1	0	3	2	2	4	4	4	3	4	0	139	1
A104	Break Area	0	1	1	4	0	0	0	0	2	1	2	3	2	2	4	4	4	3	4	0	175	1
A105	Lab Support Space	0	0	1	2	0	0	0	0	0	0	2	3	2	2	4	4	4	3	4	0	91	1
B101	Conference Room	2	2	3	3	2	2	4	2	3	1	2	3	2	2	4	4	4	3	4	0	331	3
B102	Office	0	0	0	0	0	0	0	0	0	0	2	3	2	2	4	4	4	3	4	0	77	0
B103	Office	0	0	1	1	3	0	0	0	0	0	2	3	2	2	4	4	4	3	4	0	99	1
B104	Office	0	0	0	0	0	0	0	0	0	0	2	1	2	2	4	4	4	3	4	0	77	0
B105	Office	0	0	1	2	2	0	0	0	0	0	2	3	2	2	4	4	4	3	4	0	95	1
B106	Mechanical Room - Assembly	0	1	1	2	2	1	1	1	2	1	2	3	2	2	4	4	4	3	4	0	216	2
C101	Office	0	0	1	2	3	0	0	0	0	1	0	3	2	2	4	4	4	3	4	0	123	1
C102	Reception	2	2	2	3	3	2	3	0	2	0	2	3	2	3	4	4	4	3	4	0	227	2
C103	Office	0	0	1	2	3	0	0	0	0	1	0	3	2	2	4	4	4	3	4	0	123	1
C104	Office	0	0	1	2	3	0	0	0	0	1	0	3	2	2	4	4	4	3	4	0	123	1
C105	Office	0	0	1	2	3	0	0	0	0	1	0	3	2	2	4	4	4	3	4	0	123	1
C106	Office	0	0	1	2	3	0	0	0	0	1	0	3	2	2	4	4	4	3	4	0	123	1
C107	Lab	0	2	1	2	2	2	1	2	2	2	0	0	1	0	0	2	4	2	2	0	216	2
D001	Office	0	0	3	3	3	1	3	1	1	1	0	3	2	2	4	4	4	3	4	0	234	2
D002	Staging	0	1	1	3	1	0	0	0	0	1	1	3	2	3	4	4	4	3	4	0	133	1
D003	Office	0	0	1	2	3	0	0	0	0	1	0	3	2	2	4	4	4	3	4	0	123	1
D004	Office	0	0	1	2	3	0	0	0	0	1	0	3	2	2	4	4	4	3	4	0	123	1
D005	Office	0	0	1	2	3	0	0	0	0	1	0	3	3	2	4	4	4	3	4	0	125	1
D006	Break Area	0	2	2	3	0	0	0	0	0	1	1	3	3	2	4	4	4	3	4	0	137	1
D007	Office (Cubed)	0	0	0	0	0	0	0	0	0	0	2	3	2	2	4	4	4	3	4	0	77	0
n=106	n=106	n	n	1	7	3	n	n	n	n	n	n	3	7	7	4	4	4	3	4	n	133	1

Courtesy of 3Flow

# Building Ventilation Case Study

Risk Band	Description	Attributes
0	Negligible	<ul style="list-style-type: none"><li>• Vacant Space</li><li>• ≤ 1 Occupant</li><li>• Very Limited Access</li><li>• Proper HVAC Operation</li></ul>
1	Low	<ul style="list-style-type: none"><li>• ≤ 1 Known Occupant</li><li>• Limited to no Visitors</li><li>• Proper HVAC Operation</li></ul>
2	Moderate	<ul style="list-style-type: none"><li>• Known Occupants</li><li>• Limited Visitors w/Short Duration</li><li>• Adequate Spacing</li><li>• Proper HVAC Operation</li></ul>
3	High	<ul style="list-style-type: none"><li>• Known Occupants</li><li>• Limited Visitors w/ Extended Duration</li><li>• Mixed Social Space and Close Contact</li><li>• Ventilation Issues</li></ul>
4	Extreme (Special)	<ul style="list-style-type: none"><li>• Known Occupants</li><li>• Numerous, Frequent Visitors w/Extended Duration</li><li>• Close Personal Contact</li><li>• Aerosol Generating Procedures</li><li>• Ventilation Issues</li></ul>

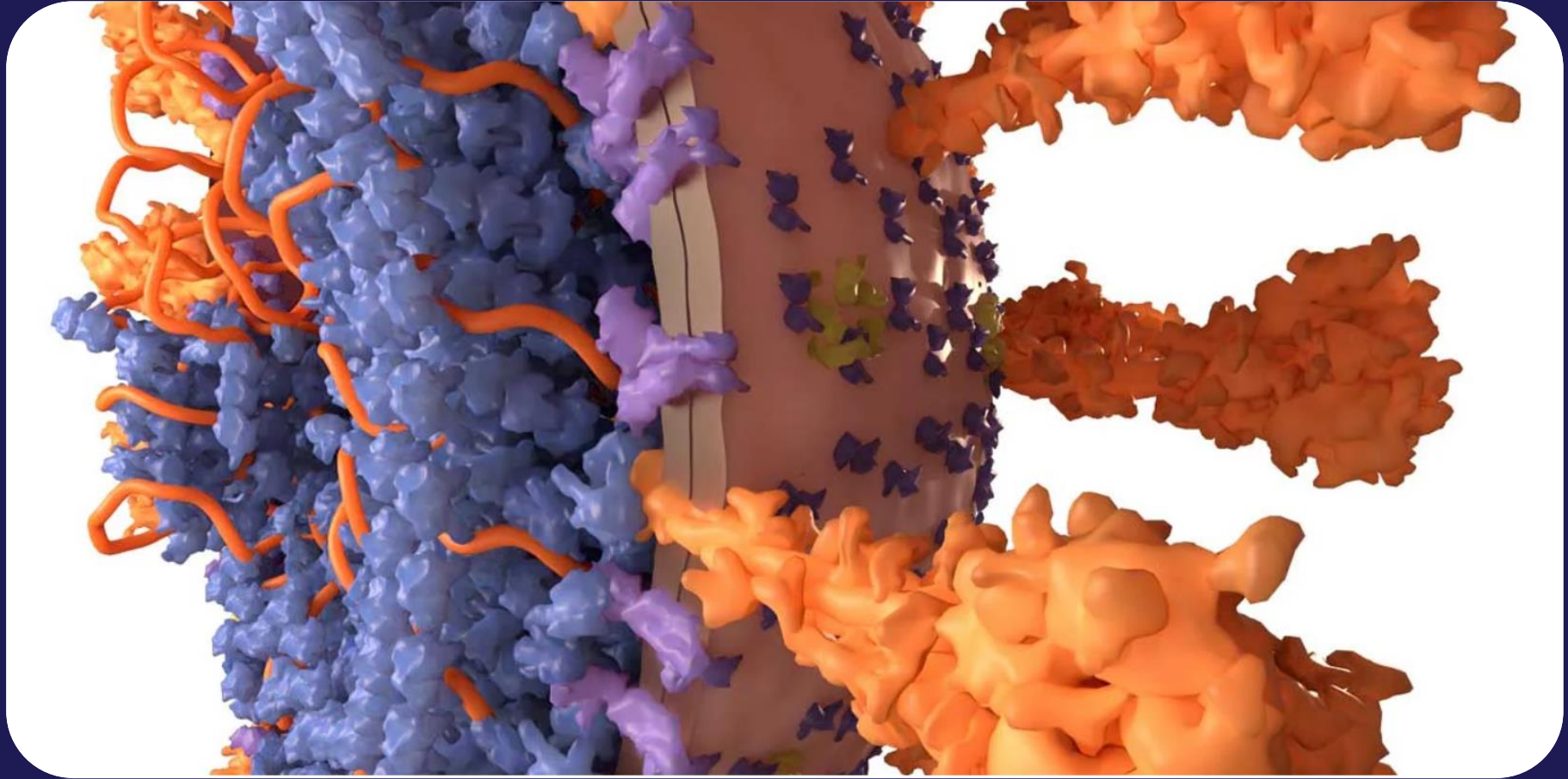


Courtesy of 3Flow

# Building Ventilation Case Study



Courtesy of 3Flow




*Courtesy of Scientific American*

## REFERENCE MATERIALS

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# Reference Materials



**STANDARD**



**ANSI/ASHRAE Standard 62.1-2016**  
(Supersedes ANSI/ASHRAE Standard 62.1-2013)  
Includes ANSI/ASHRAE addenda listed in Appendix K

## Ventilation for Acceptable Indoor Air Quality

See Appendix K for approval dates by the ASHRAE Standards Committee, the ASHRAE Board of Directors, and the American National Standards Institute.

This Standard is under continuous maintenance by a Standing Standard Project Committee (SSPC) for which the Standards Committee has established a documented program for regular publication of addenda or revisions, including procedures for timely, documented, consensus action on requests for change to any part of the Standard. The change submittal form, instructions, and deadlines may be obtained in electronic form from the ASHRAE website ([www.ashrae.org](http://www.ashrae.org)) or in paper form from the Senior Manager of Standards. The latest edition of an ASHRAE Standard may be purchased from the ASHRAE website ([www.ashrae.org](http://www.ashrae.org)) or from ASHRAE Customer Service, 1791 Tullie Circle, NE, Atlanta, GA 30329-2305. E-mail: [orders@ashrae.org](mailto:orders@ashrae.org). Fax: 678-539-2129. Telephone: 404-636-8400 (worldwide), or toll free 1-800-527-4723 (for orders in US and Canada). For reprint permission, go to [www.ashrae.org/permissions](http://www.ashrae.org/permissions).

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**STANDARD**


**ANSI/ASHRAE Standard 55-2017**  
(Supersedes ANSI/ASHRAE Standard 55-2013)  
Includes ANSI/ASHRAE addenda listed in Appendix N

## Thermal Environmental Conditions for Human Occupancy

See Appendix N for approval dates.

This Standard is under continuous maintenance by a Standing Standard Project Committee (SSPC) for which the Standards Committee has established a documented program for regular publication of addenda or revisions, including procedures for timely, documented, consensus action on requests for change to any part of the Standard. The change submittal form, instructions, and deadlines may be obtained in electronic form from the ASHRAE website ([www.ashrae.org](http://www.ashrae.org)) or in paper form from the Senior Manager of Standards. The latest edition of an ASHRAE Standard may be purchased from the ASHRAE website ([www.ashrae.org](http://www.ashrae.org)) or from ASHRAE Customer Service, 1791 Tullie Circle, NE, Atlanta, GA 30329-2305. E-mail: [orders@ashrae.org](mailto:orders@ashrae.org). Fax: 678-539-2129. Telephone: 404-636-8400 (worldwide), or toll free 1-800-527-4723 (for orders in US and Canada). For reprint permission, go to [www.ashrae.org/permissions](http://www.ashrae.org/permissions).

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**STANDARD**


**ANSI/ASHRAE/ASHI Standard 170-2017**  
(Supersedes ANSI/ASHRAE/ASHI Standard 170-2013)  
Includes ANSI/ASHRAE/ASHI addenda listed in Appendix C

## Ventilation of Health Care Facilities

See Appendix C for approval dates by the ASHRAE Standards Committee, the ASHRAE Board of Directors, the ASHRAE Technology Committee, and the American National Standards Institute.

This Standard is under continuous maintenance by a Standing Standard Project Committee (SSPC) for which the Standards Committee has established a documented program for regular publication of addenda or revisions, including procedures for timely, documented, consensus action on requests for change to any part of the Standard. The change submittal form, instructions, and deadlines may be obtained in electronic form from the ASHRAE website ([www.ashrae.org](http://www.ashrae.org)) or in paper form from the Senior Manager of Standards. The latest edition of an ASHRAE Standard may be purchased from the ASHRAE website ([www.ashrae.org](http://www.ashrae.org)) or from ASHRAE Customer Service, 1791 Tullie Circle, NE, Atlanta, GA 30329-2305. E-mail: [orders@ashrae.org](mailto:orders@ashrae.org). Fax: 678-539-2129. Telephone: 404-636-8400 (worldwide), or toll free 1-800-527-4723 (for orders in US and Canada). For reprint permission, go to [www.ashrae.org/permissions](http://www.ashrae.org/permissions).

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**STANDARD**


**ANSI/ASHRAE Standard 52.2-2017**  
(Supersedes ANSI/ASHRAE Standard 52.2-2012)  
Includes ANSI/ASHRAE addenda listed in Appendix H

## Method of Testing General Ventilation Air-Cleaning Devices for Removal Efficiency by Particle Size

See Informative Appendix H for approval dates by the ASHRAE Standards Committee, the ASHRAE Technology Committee, and the American National Standards Institute.

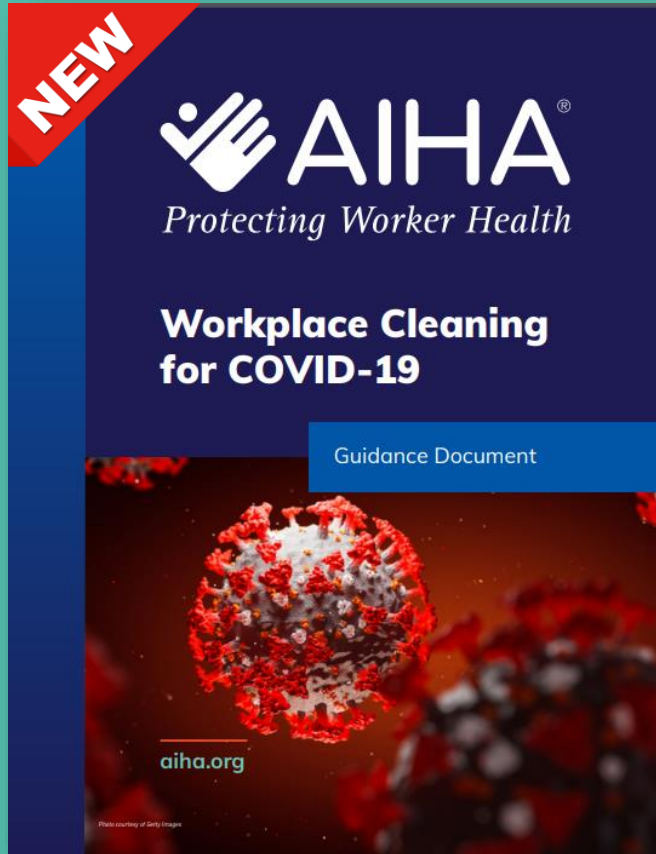
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# Reference Materials



**NEW**

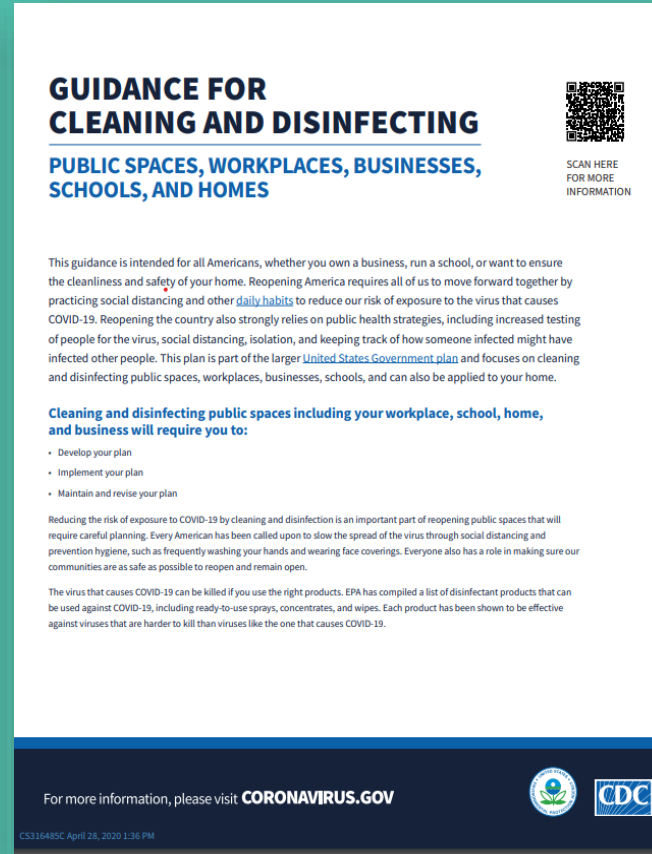
**AIHA**  
Protecting Worker Health

**Workplace Cleaning for COVID-19**

Guidance Document

aiha.org

Photo courtesy of Getty Images



**GUIDANCE FOR CLEANING AND DISINFECTING**

**PUBLIC SPACES, WORKPLACES, BUSINESSES, SCHOOLS, AND HOMES**

SCAN HERE FOR MORE INFORMATION

This guidance is intended for all Americans, whether you own a business, run a school, or want to ensure the cleanliness and safety of your home. Reopening America requires all of us to move forward together by practicing social distancing and other [daily habits](#) to reduce our risk of exposure to the virus that causes COVID-19. Reopening the country also strongly relies on public health strategies, including increased testing of people for the virus, social distancing, isolation, and keeping track of how someone infected might have infected other people. This plan is part of the larger [United States Government plan](#) and focuses on cleaning and disinfecting public spaces, workplaces, businesses, schools, and can also be applied to your home.

**Cleaning and disinfecting public spaces including your workplace, school, home, and business will require you to:**

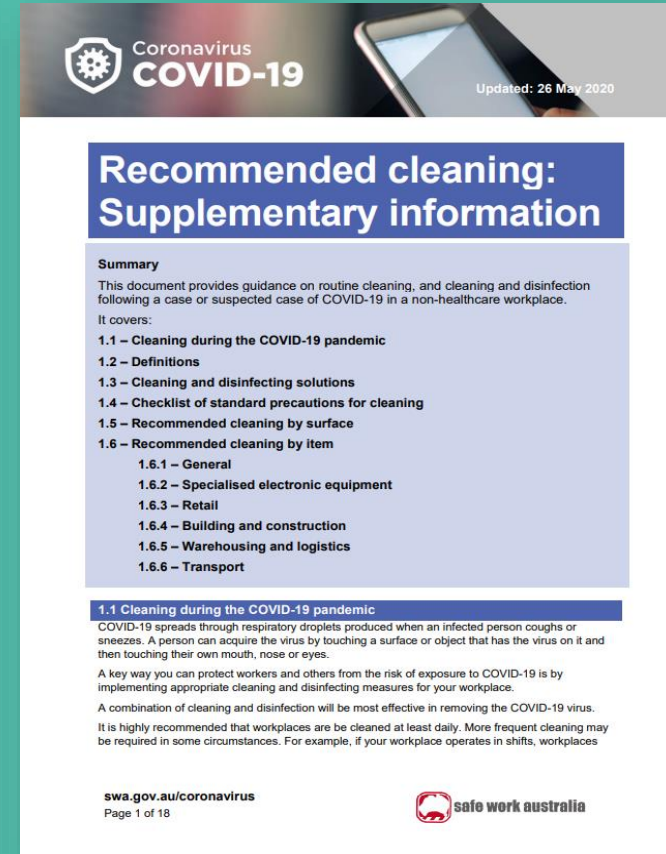
- Develop your plan
- Implement your plan
- Maintain and revise your plan

Reducing the risk of exposure to COVID-19 by cleaning and disinfection is an important part of reopening public spaces that will require careful planning. Every American has been called upon to slow the spread of the virus through social distancing and prevention hygiene, such as frequently washing your hands and wearing face coverings. Everyone also has a role in making sure our communities are as safe as possible to reopen and remain open.

The virus that causes COVID-19 can be killed if you use the right products. EPA has compiled a list of disinfectant products that can be used against COVID-19, including ready-to-use sprays, concentrates, and wipes. Each product has been shown to be effective against viruses that are harder to kill than viruses like the one that causes COVID-19.

For more information, please visit [CORONAVIRUS.GOV](#)

CS316485C April 28, 2020 1:36 PM



Coronavirus COVID-19

Updated: 26 May 2020

**Recommended cleaning: Supplementary information**

**Summary**

This document provides guidance on routine cleaning, and cleaning and disinfection following a case or suspected case of COVID-19 in a non-healthcare workplace. It covers:

- 1.1 – Cleaning during the COVID-19 pandemic
- 1.2 – Definitions
- 1.3 – Cleaning and disinfecting solutions
- 1.4 – Checklist of standard precautions for cleaning
- 1.5 – Recommended cleaning by surface
- 1.6 – Recommended cleaning by item
  - 1.6.1 – General
  - 1.6.2 – Specialised electronic equipment
  - 1.6.3 – Retail
  - 1.6.4 – Building and construction
  - 1.6.5 – Warehousing and logistics
  - 1.6.6 – Transport

**1.1 Cleaning during the COVID-19 pandemic**

COVID-19 spreads through respiratory droplets produced when an infected person coughs or sneezes. A person can acquire the virus by touching a surface or object that has the virus on it and then touching their own mouth, nose or eyes.

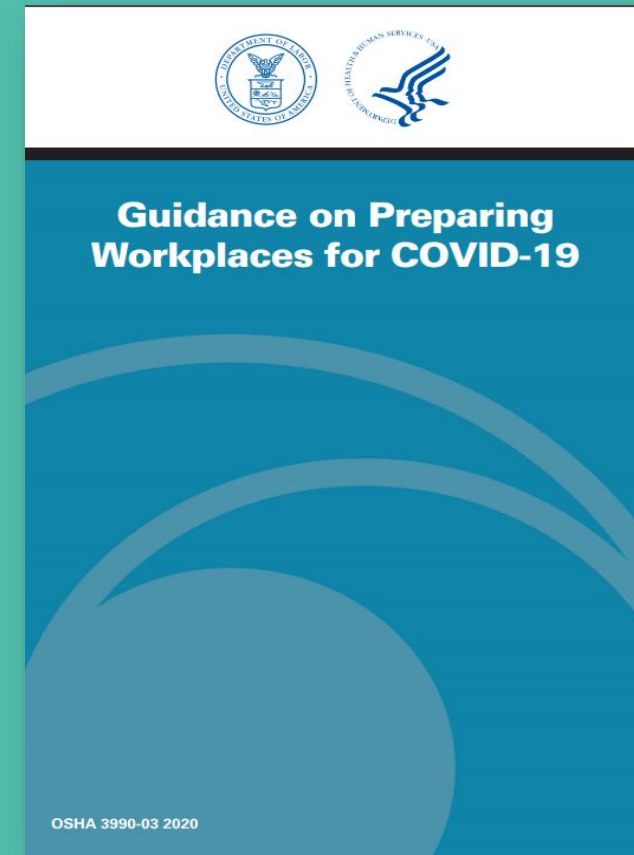
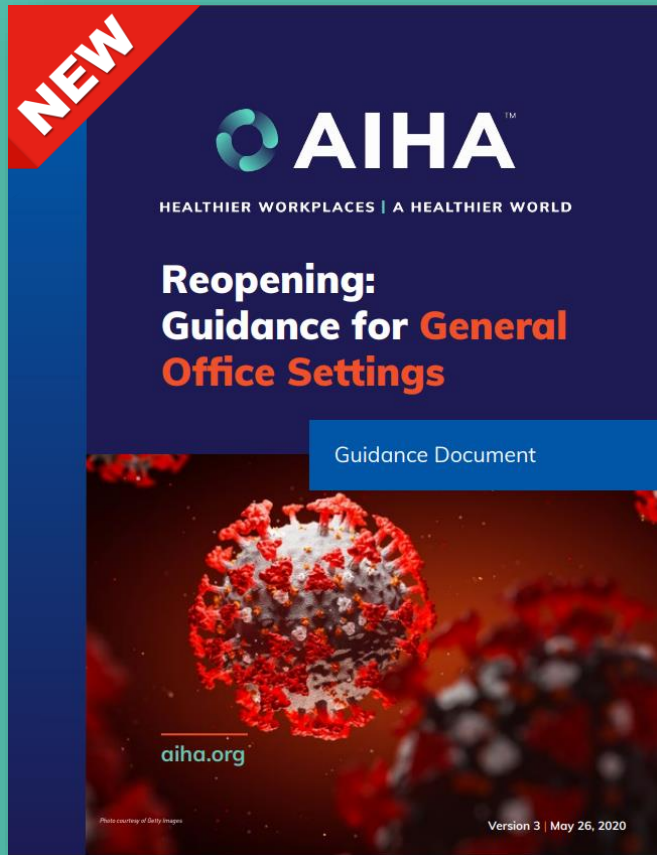
A key way you can protect workers and others from the risk of exposure to COVID-19 is by implementing appropriate cleaning and disinfecting measures for your workplace.

A combination of cleaning and disinfection will be most effective in removing the COVID-19 virus. It is highly recommended that workplaces are cleaned at least daily. More frequent cleaning may be required in some circumstances. For example, if your workplace operates in shifts, workplaces

swa.gov.au/coronavirus  
Page 1 of 18

safe work australia

# Reference Materials



# Reference Materials

