

CONTACT PRECAUTIONS

In addition to Standard Precautions

Visitors - Report to Nurses' Station Before Entering Room

BEFORE CARE

1. Private room preferred. Cohort with same disease if necessary.



2. Perform hand hygiene.



3. Wear gown to enter the room. Discard gowns in the room. Do not reuse.



4. Wear gloves when entering room. Change after contact with infective material.



DURING CARE

1. Limit transport of patient/resident to essential purposes only. Infective material must be contained prior to transport.



2. Limit use of noncritical care equipment to a single patient/resident. If it must be shared between rooms, disinfect on removal from the room.



AFTER CARE

1. Discard linen in a container in the room until it can be taken to soiled utility room, laundry or other designated area.



2. Discard trash in the room until it can be taken to soiled utility room or other designated area.



3. Perform hand hygiene.



Infections or Conditions Requiring Contact Precautions

- Abscess, draining, major
- Anthrax, environmental: aerosolizable spore-containing powder or other substance (contact and airborne precautions until decontamination of environment complete)
- Bronchiolitis (see respiratory infections in, infants and young children)
- Clostridium, *C. difficile* (see Gastroenteritis, *C. difficile*)
- Congenital rubella
- Conjunctivitis, acute viral (acute hemorrhagic)
- Diphtheria, cutaneous
- Furunculosis, staphylococcal (infants and young children)
- Gastroenteritis
 - C. difficile*
- Rotavirus
- Hepatitis, viral-Type A (diapered or incontinent patients)
- Herpes simplex (Herpesvirus hominis)
 - Mucocutaneous, disseminated or primary, severe
 - Neonatal
- Herpes zoster (varicella-zoster) (shingles), disseminated disease in any patient, localized disease in immunocompromised patient until disseminated infection ruled out (contact and airborne precautions)
- Human metapneumovirus
- Impetigo
- Influenza, Avian (e.g., H5N1, H7N9 strains), need to contact seasonal influenza guidance (contact and droplet precautions)
- Lice, head (pediculosis)
- Monkeypox (contact and airborne precautions)
- Multidrug-resistant organisms (MDROs), infection or colonization (e.g., MRSA, VRE, VISA/VRSA, ESBLs, resistant *S. pneumoniae*)
- Parainfluenza virus infection, respiratory in infants and young children
- Pediculosis (lice)
- Pneumonia
 - Adenovirus (contact and droplet precautions)
 - B. cepacia* in patients with CF, including respiratory tract colonization
- Poliomyelitis
- Pressure ulcer (decubitus ulcer, pressure sore) infected, major
- Respiratory infectious disease, acute (if not covered elsewhere), infants and young children
- Respiratory syncytial virus infection, in infants, young children and immunocompromised adults
- Ritter's disease (staphylococcal scalded skin syndrome)
- Scabies
- Scalded skin syndrome, staphylococcal
- Severe acute respiratory syndrome (SARS) (contact, airborne and droplet precautions)
- Smallpox (variola; see vaccinia for management of vaccinated persons) (contact and airborne precautions)
- Staphylococcal disease (*S. aureus*)
 - Scalded skin syndrome
 - Skin, wound or burn, major
- Streptococcal disease (group A streptococcus), skin, wound or burn, major (contact and droplet precautions)
- Tuberculosis (*M. tuberculosis*), extrapulmonary, draining lesion (contact and airborne precautions)
- Vaccinia (vaccination site, adverse events following vaccination)
 - Blepharitis or conjunctivitis
 - Eczema vaccinatum
 - Fetal vaccinia
 - Generalized vaccinia
 - Progressive vaccinia
- Secondary bacterial infection (e.g., *S. aureus*, group A beta hemolytic streptococcus)
- Varicella zoster (contact and airborne precautions)
- Viral hemorrhagic fevers due to Lassa, Ebola, Marburg, Crimean-Congo fever viruses (contact and droplet precautions)
- Wound infections, major