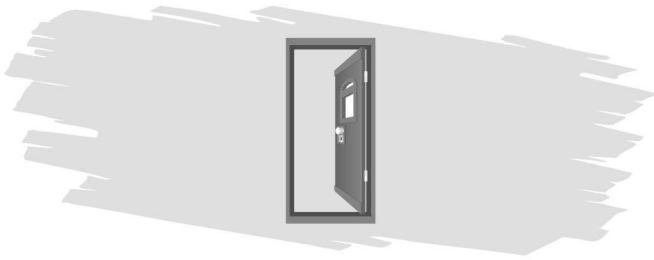
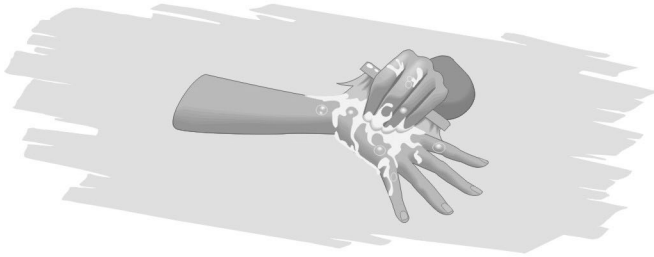


Contact Precautions



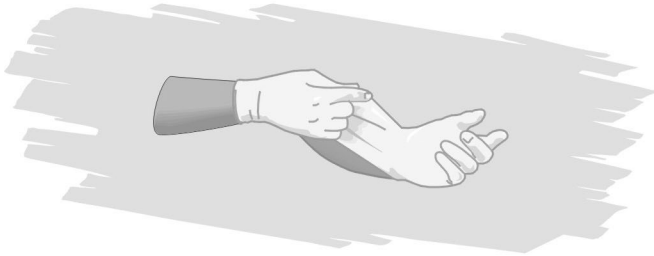
Patient Placement

- ✓ Door may remain open
- ✓ Private room preferred
- ✓ Maintain a distance of at least 1 meter (3 feet) between patients if sharing a room



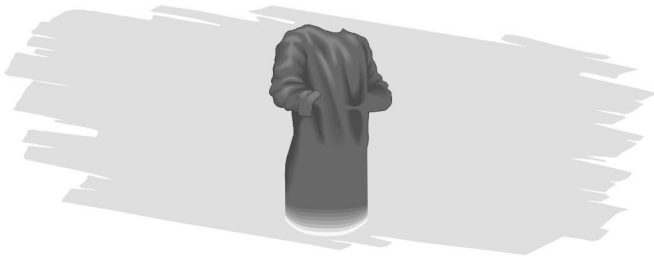
Hand Cleansing

- ✓ Using antimicrobial soap or alcohol gel
- ✓ After removing gloves and gown
- ✓ When leaving room



Gloves

- ✓ If in contact with patient or environment
- ✓ Remove before leaving room



Gown

- ✓ If in contact with patient or environment
- ✓ Remove gown before leaving room



Dedicate Patient Care Equipment

- ✓ Disinfect all equipment removed from room
- ✓ Do not take patient chart into room



Patient Transport

- ✓ Inform receiving department

CONTACT PRECAUTIONS ARE REQUIRED FOR: (SEE POLICY 30-10)

Disease/Organism Known or Suspected	Paediatrics	Adults
<i>Clostridium difficile</i> (See Infection Control Manual policy 30-50, Reference Table)	Contact	Contact
Conjunctivitis, acute viral	Contact/Droplet	Standard Precautions if hygiene is good. Contact if poor hygiene or non-compliant.
Cystic Fibrosis patients with: -Burkholderia cepacia -Multidrug Resistant Pseudomonas aeruginosa	Contact/Droplet	Standard Precautions if hygiene is good. Contact/Droplet if poor hygiene or non-compliant.
Diarrhea - acute infectious	Contact	Contact
Extended-spectrum Beta lactamases (ESBL)	Contact	Contact
Hepatitis A, E	Contact	Standard Precautions if continent and hygiene is good. Contact if incontinent, non-compliant or soiling the environment.
Herpes simplex	Contact/Droplet - all neonates Contact/Droplet - if disseminated	Contact/Droplet - if disseminated.
Herpes Zoster (shingles)	Standard Precautions. Do not share a room with a varicella-susceptible patient. Consider adding contact precautions for cases of extensive localized zoster that can't be covered.	Standard Precautions. Do not share room with a varicella-susceptible patient. Consider adding contact precautions for cases of extensive localized zoster that can't be covered.
Impetigo/Furunculosis	Contact - if not contained by dressing otherwise Standard Precautions.	Contact - if not contained by dressing otherwise Standard Precautions.
Influenza	Contact/Droplet	Contact/Droplet
Lice (until 24 hours after appropriate therapy)	Contact	Contact
Meningitis, unknown etiology (until 24 hours after appropriate therapy)	Contact/Droplet	Droplet
Methicillin-resistant <i>Staphylococcus aureus</i> (MRSA) (see Infection Control Manual policy 30-50, Reference Table)	Contact Add Droplet if MRSA is in sputum or trach secretions or in nasal carriage with upper respiratory symptoms.	Contact Add Droplet if MRSA is in sputum or trach secretions or in nasal carriage with upper respiratory symptoms.
Parainfluenza virus	Contact/Droplet	Standard Precautions
Respiratory Syncytial Virus (RSV)	Contact/Droplet	Standard Precautions
Rhinovirus (common cold)	Contact/Droplet	Standard Precautions
Scabies - (until 24 hours after appropriate therapy)	Contact	Contact
<i>Streptococcus</i> grp A (necrotizing fasciitis)	Contact until 24 hours of appropriate antibiotic therapy. Contact if drainage not contained by dressings.	Contact until 24 hours of appropriate antibiotic therapy. Contact if drainage not contained by dressings.
Vancomycin-resistant <i>Enterococci</i> (VRE) (see Infection Control Manual policy 30-50, Reference Table)	Contact Pay special attention to environmental cleaning.	Contact Pay special attention to environmental cleaning.
Varicella (Chickenpox)	Contact/Airborne Susceptible staff and visitors <u>not</u> to enter.	Contact/Airborne Susceptible staff and visitors <u>not</u> to enter.
Wounds	Contact if drainage not contained by dressings.	Contact if drainage not contained by dressings.

For more information see Infection Control Manual policy 30-50, Reference Table.