

Policy Applies to:

All staff employed by Mercy Hospital. Credentialed Specialists, students and patients will be supported to meet policy requirements.

Related Standards:

- Ngā Paerewa Health and Disability Services Standard NZS 8134:2021
- EQulP 1.5.2 Infection Prevention and Antimicrobial Stewardship

Rationale:

To provide information on the prevention and management of communicable diseases and outlines measures to prevent transmission of communicable diseases.

Cultural Considerations:

Nil cultural considerations for the transmission information of infectious diseases, however, there are for the application of the guidance contained within this policy. For many patients particularly Māori, whānau support is extremely important. Whānau should be included (where indicated by the patient) in any infectious disease finding and education that is offered by Mercy staff. Whānau will be instrumental in helping the patient process the information and the psychological impact of that information.

Definitions:

Communicable diseases: are also known as infectious diseases or transmissible diseases.

An infectious disease is transmissible (from person to person) by direct contact with an infected individual or by contact with discharge (blood, urine, etc.) from an individual or by indirect means (as by a vector).

Abbreviations:

IPC - Infection Prevention and Control

CVAD - Central Venous Access Devices

MDRO - Multidrug Resistant organism

Objectives:

- To provide a safe environment for patients, healthcare workers and the environment
- To assist in the formulation of an infection prevention and control plan when patients have/or are suspected to have a communicable disease
- To provide a risk management response when patients have a communicable disease.

Implementation:

- Pre-admission patient assessment, screening and alert notification
- IPC patient assessments e.g., respiratory illnesses, MDRO screening and testing, declared infections
- Post admission patient monitoring
- Focus on staff awareness of policy through area meetings
- Clinical education, annual IPC competency

Evaluation:

- Infection Prevention and Control monthly board reporting
- IPC Committee bi-monthly meeting minutes
- Patient isolation management checklist.
- Incident forms

Requires Isolation

When isolation facilities are limited, the following isolation room prioritisation for patients with a MDRO is recommended; it should be used in conjunction with a risk assessment:

- Carbapenem Resistant Enterobacteriaceae (CRE)
- Vancomycin Resistant Enterococcus (VRE)
- Multi-resistant gram negative species (MRGN) e.g. *Acinetobacter.baumanii* and *Pseudomonas aeruginosa*
- ESBL-other (Extended spectrum beta lactamase – *Kleb.pneumo*, *Kleb.oxytoca*, *Enterobacter cloacae* etc.)
- mMRSA (Multi resistant Methicillin-Resistant *Staphylococcus aureus*)

For non MDRO colonisation or infections, patients are assessed Isolation risk assessment for isolation facility consideration:

Isolation risk assessment includes a clinical assessment of the risk factors of the patient and the organism.

Risk factors of the patient

- Current or recent (within 48 hrs) incontinence of faeces or urine
- Urinary catheter
- Open or draining wound/s
- Compromised hygiene practices
- Enterostomies
- mMRSA - respiratory infection

Risk factors of the organism

- The relative persistence of the organism on environmental surfaces
- Pathogenicity when combined with patient risk factors
- Outbreak situation

Associated Documents

Appendix 1 – Infectious Disease Patient Management

Internal

- MDRO policy
- Isolation policy
- Standard Precautions policy
- Personal Protective Equipment- IPC policy
- Infectious Disease Staff Management

External

- Communicable Disease Control Manual, Ministry of Health, 2012
- Guidelines for the Control of Methicillin-resistant *Staphylococcus aureus* in New Zealand, Ministry of Health 2002
- Guidelines for the Control of Multidrug-resistant organisms in New Zealand, Ministry of Health, 2007
- Guidelines for Tuberculosis Control in New Zealand, 2010
- Guidelines for the Management of Norovirus Outbreaks In Hospitals and Elderly Care Institutions, Ministry of Health, January 2009
- List of Diseases Notifiable to the Medical Officer of Health, Ministry of Health, 2017.
- Lippincott, Management of Infectious Diseases and Organisms, February 20, 2019
- Infection Prevention and Control and Management of Carbapenemase-producing Enterobacteriaceae, Guidelines for health care providers in New Zealand acute and residential care facilities, Ministry of Health, 2018

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Abscess				
• Draining, major	Contact	Pus	Until drainage stops or can be contained by dressing	*The dressing does not adequately contain pus
• Draining, minor	Standard	Pus	Duration of illness	Contained in dressings
• Not draining	Standard			
Acquired Immune Deficiency Syndrome (AIDS) & HIV+ Patients (Notifiable disease)	Standard	Blood, body fluids and tissues	Always	A patient may require specific isolation for superimposed infections
Adenovirus Infection in Young Children	Contact & Droplet	Respiratory secretions and faeces	Duration of illness	Patients with the same infection can cohort. Surgical masks may be required if aerolisation of faecal matter is possible
Agranulocytosis	Protective		Duration of illness	Consult on-call haematologist
Amoebiasis (Dysentery, amoebic liver abscess) (<i>Entamoeba histolytica</i>)	Standard	Faeces, pus, respiratory secretions	Duration of illness	"see Gastroenteritis" if diarrhoea is present
Amoebic Meningo - Encephalitis (<i>Naegleria spp</i> etc) (Notifiable disease)	Standard	Infected food and water *Rarely person to person		Oro-anal transmission
Anthrax (All types-Notifiable disease)				
• Pulmonary	Standard	Respiratory secretions	Duration of illness	

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
<ul style="list-style-type: none"> Cutaneous 	Standard	Drainage from lesion	Duration of illness	Contact precautions if a large amount of uncontained drainage. Hand wash with soap & water to reduce spore count
<ul style="list-style-type: none"> Aerosolisable spore-containing powder 	Airborne, Contact	Powder	Until the environment is decontaminated	Contact Medical Officer of Health and Police for advice
Arboviral Diseases (ALL types-Notifiable disease) <ul style="list-style-type: none"> Dengue Fever, Yellow Fever, Ross River, West Nile, Zika, Tick Fever, Encephalitis 	Standard	Organ transplant, breast milk, blood placenta membrane, blood Mosquito, sand flies or tick bites	Duration of illness	The majority of human infections are asymptomatic or may result in a non-specific flu-like syndrome
Ascariasis (Roundworm) (Notifiable disease)	Standard	Ingestion of eggs via contaminated soil, vegetation or water	2-15 days, duration of illness	
Aspergillosis	Standard	Inhalation of spores or contaminated aerolised water supply	Duration of illness variable	Immunocompromised patients are at risk during construction/renovation/in the event of a faulty ventilation system
Bed Sores (Decubitus Ulcers: Pressure sores) <ul style="list-style-type: none"> Major, Staphylococcal or Streptococcal 	Contact	Pus, etc.	Until drainage stops or can be contained by dressing	Major = drainage not able to be contained by a dressing. Swab for bacterial growth
<ul style="list-style-type: none"> Minor 	Standard	Pus, etc.		Must be contained in an occlusive dressing

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Blastomycosis <ul style="list-style-type: none"> North American, pulmonary or cutaneous 	Standard	Spores of contaminated wood or soil	21-106 days	
Boils <ul style="list-style-type: none"> Furuncle, carbuncle, furunculosis 	Standard	Any secretions	Variable	Commonly caused by <i>Staphylococcus aureus</i> , see " <i>Staphylococcus aureus</i> " if appropriate
Botulism (Notifiable disease)	Standard	Ingestion of spores and contaminated food	Variable	
Bronchiolitis see "Respiratory Syncytial Virus"				
Bronchitis: <ul style="list-style-type: none"> Adults 	Standard	Respiratory secretions	Duration of illness	Use a mask as per Standard Precautions
<ul style="list-style-type: none"> Young children 	Contact	Respiratory secretions	Duration of illness	Use a mask as per Standard Precautions
Brucellosis (Notifiable disease)	Standard	Infected animals or their excretions	7 days	If draining lesions are present, Contact Precautions are required
<i>Burkholderia (Pseudomonas) cepacia</i>	Standard	Respiratory secretions		Patients must not cohort with Cystic fibrosis patient who is not colonised or infected with <i>B.cepacia</i> . Patients with Cystic fibrosis who are not infected or colonised with <i>B.cepacia</i> and who are visiting a <i>B.cepacia</i> -positive patient should wear a mask within 1 metre of the patient.

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Burns				
• Extensive	Protective		Until minor	
• Extensive with sepsis	Contact	Pus etc.	Duration of illness	
• Minor	Standard		Until healed	Minor = non-expressive wound or wound secretions that can be contained with occlusive dressings
<i>Campylobacter</i> (Notifiable disease) See "gastroenteritis"				
Candidiasis	Standard			
Carbapenemase Resistant Enterobacteriaceae (CRE – a type of MDRO)	Contact	Secretions and excretions	Variable	Contact IPC Nurse, seek Clinical Microbiology input, consider infectious diseases consultation for further advice if required
Cat-Scratch Fever	Standard	Animal bite or scratch site,	7-14 days	
Cellulitis (no wounds or exudate)	Standard		Duration of illness or until 24 hours after the start of treatment	See specific causative organism for further information
Chancroid	Standard			Sexually transmitted
Chickenpox See "Varicella"				
<i>Chlamydia trachomatis</i>				
• Conjunctivitis	Standard	Pus	Duration of illness	

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
<ul style="list-style-type: none"> Genital 	Standard	Genital secretions	Duration of illness	
<ul style="list-style-type: none"> Pneumonia ≤ 3 months of age 	Standard	Respiratory secretions	Duration of illness	
<i>Chlamydia pneumoniae</i>	Standard	Respiratory secretions	Duration of illness	
Cholera (<i>Vibrio cholera</i>) See "Gastroenteritis"				
<i>Clostridium botulinum</i> See "Botulism"				
<i>Clostridium difficile</i> See "Gastroenteritis"				
<i>Clostridium perfringens</i> (Notifiable disease) <ul style="list-style-type: none"> Food poisoning 	Standard	Vomit Diarrhoea		
<ul style="list-style-type: none"> Gas gangrene wound infection etc. 	Standard	Pus		Contact precautions if wound drainage is extensive
Common Cold <ul style="list-style-type: none"> Adults 	Standard	Respiratory secretions		Practise respiratory hygiene.
<ul style="list-style-type: none"> Young children 	Contact	Respiratory secretions	Duration of illness	Refer to Respiratory Infectious Diseases

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Congenital Rubella See "Rubella"				
Conjunctivitis <ul style="list-style-type: none"> Bacterial, Chlamydial, Gonococcal 	Standard	Pus	24-72 hours	Infectious until 24 hours post-effective antimicrobial treatment
<ul style="list-style-type: none"> Acute viral, acute haemorrhagic 	Contact	Pus	Duration of illness	
Coronavirus <ul style="list-style-type: none"> Non-pandemic strains SARS-CoV2 (COVID19) (Notifiable disease) 	Contact & Droplet	Respiratory secretions/droplets/ particles . direct contact with mouth/nose/eyes contaminated with virus containing respiratory fluids	Duration of symptoms 5-10 days	Infectious 48 hours prior to onset of symptoms. Immunocompromised people have longer infectious periods usually 14 days or longer
<ul style="list-style-type: none"> SARS – CoV (Severe Acute Respiratory Disease) (Notifiable disease) MERS – CoV MER (Middle East Respiratory Syndrome) (Notifiable disease) 	Contact & Airborne			
Coxsackie Virus See "Enteroviral Infection"				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
<i>Creutzfeldt-Jakob disease (including vCJD) Burkholderia cepacia</i> See "CJD policy" (Notifiable disease)	Standard	Inoculation and contact with all fluids and tissues, especially the brain, spinal fluid	Duration of hospitalisation	Special methods required for decontamination and sterilisation of surfaces and objects contaminated by neural tissue
Croup See "Respiratory infections in infants and small children".				
Cryptosporidiosis See "Gastroenteritis"				
Cytomegalovirus (CMV) <ul style="list-style-type: none"> Immunosuppressed and neonatal 	Standard	Contact with saliva, blood, urine and sexual secretions	3-8 weeks	No additional precautions for pregnant HCWs. Single room required for patient protection
Decubitus Ulcers See "Bedsore"				
Dengue Fever See "Arbovirus"				
Dermatitis <ul style="list-style-type: none"> Extensive, including Staphylococcal & Streptococcal 	Standard	Pus etc.	Duration of illness	If weeping dermatitis is unable to be contained, swab to determine cause. Apply precautions for specific organism

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Diarrhoea See "Gastroenteritis"				
Diphtheria (All types Notifiable disease) <ul style="list-style-type: none"> Cutaneous 	Contact	Skin lesions	Until 2 swabs taken 24 hours apart, at least 24 hours after cessation of antibiotics, are negative	Remain in isolation until cultures are returned negative. Swabs of skin lesions.
<ul style="list-style-type: none"> Pharyngeal 	Droplet	Respiratory secretions		Remain in isolation until cultures are returned negative Swabs of throat and nose
Ebola Virus See "Viral haemorrhagic fevers"				
Echovirus See "Enteroviral infection"				
<i>E.coli</i> See "Gastroenteritis"				
Encephalitis, viral Also see specific aetiologic agents	Standard	Faeces, skin lesions	Duration of illness	Single room
<i>Entamoeba histolytica</i> See "Gastroenteritis"				
Enterococcus See "MDRO policy" and "vancomycin resistant" if relevant				Contact Infection Prevention & Control Nurse for further advice re management

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Enterocolitis, (<i>C.difficile</i>) See “Gastroenteritis”				
Enteroviral Infections <ul style="list-style-type: none"> Hand foot and mouth, Pleurodynia, Coxsackie virus 	Standard	Respiratory secretions, faeces	Duration of illness Lives for long periods on surfaces, respiratory shedding 1-3 weeks Faecal shedding for months	Use Contact Precautions for diapered or incontinent children (for the duration of illness) and to control institutional outbreaks Use <u>Droplet and Contact</u> for those with active respiratory illness
Epiglottitis (<i>Notifiable disease</i>) (<i>Haemophilus influenzae</i>)	Droplet	Respiratory secretions	For 24 hours after start of antibiotics	
Epstein-Barr Virus - including infectious mononucleosis, glandular fever	Standard	Respiratory secretions, saliva, pus	Until 24 hours after the start of therapy	
Erysipelas See “Streptococcal disease”				
Erytherma infections See “Parvovirus B19”				
<i>Escherichia coli</i> See “Gastroenteritis”				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
ESBL –Extended Spectrum Beta-lactamase See “MDRO policy and risk assessments for nurses” <ul style="list-style-type: none"> E.coli 	Standard	Faeces	For the duration of admission	Use apron and gloves for personal hygiene cares, Contact Precautions for patients unable to maintain hygiene
<ul style="list-style-type: none"> Other e.g. <i>Kleb. Pneumo</i>, <i>E.cloacae</i>, <i>E. faecalis</i> 	Contact	Faeces	Duration of admission	Contact infection prevention & control nurse for further advice
Food Poisoning <i>See also “Gastroenteritis”</i>				
Furunculosis <i>See “Staphylococcal infection”</i>				
Gas Gangrene	Standard	Pus	Duration of illness	

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Gastroenteritis – <i>contact precautions for diarrhoea until a diagnosis is laboratory-confirmed</i>, then follow disease-specific advice. If a patient is incontinent or requires assistance with hygiene cares, Enteric and droplet precautions MUST be used. Sporidical cleaning product is required.				
Gastroenteritis <ul style="list-style-type: none"> Adenovirus (enteric) Botulism (Notifiable disease) <i>Campylobacter</i> species (Notifiable disease) Cholera (<i>Vibrio cholerae</i>) (Notifiable disease) <i>Clostridium difficile</i> (<i>enterocolitis</i>) <i>Clostridium perfringens</i> (Notifiable disease) <i>Cryptosporidium</i> species (Notifiable disease) <i>Entamoeba histolytica</i> <i>E.coli</i> (enteropathogenic, or O157:H7 and other shiga toxin) 	If symptomatic with diarrhoea and or vomiting Enteric AND Droplet	Faeces or Vomitus	Until 48 hours symptom free	<ul style="list-style-type: none"> Assess need to discontinue antibiotics. Environmental cleaning with sporidical products. Respiratory mask for attending a patient with, or cleaning of, someone with vomiting diarrhoea and for cleaning the toilet or vomit / diarrhea. When leaving room wash hands with soapy water followed by antimicrobial alcohol hand cleanser. “Clearance” tests are not required as toxin excretion commonly continues after diarrhoea has resolved. Isolation to continue until 48 hours symptom free.

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
producing strains (Notifiable disease) <ul style="list-style-type: none"> <i>Giardia lamblia</i> (Giardiasis) Norovirus Rotavirus <i>Salmonella species</i> (including <i>S.typhi</i>). <i>Shigella species</i>. Staphylococcal (Notifiable disease) Typhoid Fever <i>Vibrio spp.</i> including <i>V.cholerae</i> Viral if not covered elsewhere <i>Yersinia enterocolitica</i> (Notifiable disease) 				<ul style="list-style-type: none"> If institutional outbreak is likely notifiable the senior nurse of the area and IPC Nurse. Out of hours, notify senior nurse on call. For Notifiable disease notify IPC Nurse and/or MOH of suspected or confirmed nosocomial infections (staff or patients). See outbreak policy. Prolonged shedding may occur in immunocompromised.
German Measles See "Rubella"				
Giardia See "Gastroenteritis"				
Glandular Fever See "Epstein Barr virus"				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Gonorrhoea <ul style="list-style-type: none"> Adults 	Standard	Pus	Until treated	Some cases have been associated with Campylobacter.
<ul style="list-style-type: none"> New-born (eye) (<i>Notifiable disease</i>) 	Contact	Pus	2-7 days	
Granuloma inguinale e.g., Donovanosis, granuloma venereum)	Standard	Genital Sores	Until healed and treated	Usually secondary infection of Chlamydia
Guillain-Barre Syndrome	Standard		Varies	Not infectious. Autoimmune condition.
<i>Haemophilus influenzae, type b (HiB)</i> <i>(Notifiable disease)</i>	Contact And Droplet	Respiratory secretions	Until 24 hours after initiation of treatment	
Haemorrhagic Fevers see "Viral Haemorrhagic fevers"				
Hand, Foot & Mouth Disease See "Enteroviral infection"				
Hansens Disease See "Leprosy"				
Hepatitis, Viral <i>(All types: Notifiable disease)</i> <ul style="list-style-type: none"> A, E, G 	Standard	Faeces	7 days after onset of jaundice	<ul style="list-style-type: none"> Contact Precautions if diapered or incontinent

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
	Contact (if incontinent/diapered)	(blood/body fluids for Hep G)		<ul style="list-style-type: none"> Children < 3yrs: keep in Contact Precautions during hospitalization. Children 2-14 years: Contact Precautions for 2 weeks after onset of symptoms
<ul style="list-style-type: none"> B (acute or chronic) 	Standard	Blood/body fluids, sexual contact	Acute: 45-160 days	
<ul style="list-style-type: none"> C 			14 days	
<ul style="list-style-type: none"> D (only seen with Hep B) 			14-63 days	
Herpangina See "Enteroviral infection"				
Herpes Simplex Virus (I & II)	Contact	Contact with lesion secretions	Until lesions are dry and crusted, 2-14 days	
<ul style="list-style-type: none"> Encephalitis 				
<ul style="list-style-type: none"> Mucocutaneous, disseminated, or severe primary infection, (skin, oral or genital) 				
<ul style="list-style-type: none"> Recurrent localised lesions (e.g. cold sores, genital herpes) 	Standard			
Herpes Zoster (Shingles) See "Zoster"				
Histoplasmosis	Standard	Inhalation of fungal spores	1-3 weeks	

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Hookworm (<i>Ancylostoma sp</i>)	Standard	Infectious larvae		
Human Immunodeficiency Virus (HIV) (Notifiable disease) See "Acquired Immune Deficiency Syndrome"	Standard	Breast milk, blood, sexual contact	Variable	
Human metapneumovirus	Contact and droplet	Respiratory secretions (cough/sneezing) Close contact and environment	3-6 days	
Hydatid Disease (Notifiable disease)	Standard	Contact with infected animals, via dog to person.	variable	
Impetigo Also known as school sores	Contact	Draining lesions	1-3 days	Isolate until 24 hours after start of therapy
Infectious Mononucleosis See "Epstein-Barr Virus"				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Influenza <ul style="list-style-type: none"> Seasonal Pandemic influenza <p>(Notifiable disease for non-seasonal influenza and pandemic strains)</p>	Droplet and contact	Respiratory secretions, environment	Duration of illness Isolate for min 5 days post-onset of symptoms and antiviral commencement Or as directed by Medical officer of Health in pandemic	<p>Keep doors closed. Patient to wear surgical mask when transported out of room. Use chemoprophylaxis and/or vaccine to control or prevent outbreaks.</p> <p>Respiratory mask, eye protection for aerosoling procedures i.e. intubation, nebulising, chest physiotherapy.</p> <p>Arrange transfer to a facility with negative pressure room capability ASAP.</p> <p>Avoid placement with high-risk patients. Patients with same organism may share room</p> <p>Refer to Infection Prevention and Control Nurse, and Clinical Microbiologist for management</p> <p>Refer to Infection Prevention and Control Nurse, and Clinical Microbiologist for management</p>

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Jakob-Creutzfeldt Disease See "Creutzfeldt- Jakob Disease"				
<i>Klebsiella pneumonia</i> Carbapenemase (KPC) see "MDRO policy"	Contact	Contact with blood and body fluids, patient environment	Varies	Refer to Infection Prevention and Control Nurse, and Clinical Microbiologist for management
Lassa Fever See "Viral haemorrhagic fevers"				
Legionnaires Disease (Notifiable disease) <ul style="list-style-type: none"> Pontiac fever Legionella pneumophila 	Standard	Contaminated aerolised water, hot water systems, water storage systems	2-10 days	
Leprosy (Notifiable disease) <ul style="list-style-type: none"> Hansen disease 	Standard	Blood and urine	1-5 years	<p>Precautions until 24 hrs after commencing therapy</p> <p>Precautions until 24 hrs after commencing therapy</p>
Leptospirosis (Notifiable disease)	Standard	Infected soil/water to mucous membranes	Duration of hospitalisation	

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Lice: (Pediculosis) <ul style="list-style-type: none"> Nits (capitis), Body (corporis) Pubic (genital) 	Contact	Linen, clothing Faeces	8-9 days	Precautions until 24 hrs after commencing therapy
			1-2 weeks	
			6-10 days	
Listeriosis (Notifiable disease) <ul style="list-style-type: none"> Listeria 	Standard	Faecal	1 day -3 weeks	
Lyme Disease	Standard	Tickborne	1-32 days	
Malaria (Notifiable disease)	Standard	Blood, body fluids, respiratory secretions	7 days to many months	
Marburg Virus See "Viral haemorrhagic fevers".				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Measles (Notifiable disease) <ul style="list-style-type: none"> Rubeola Morbilli – English Measles 	Airborne	Respiratory secretions inhaled and contact with environment	<p><u>Incubation</u> is 7-18 days after exposure, commonly 12 -14 days.</p> <p>(This is extended to 7 - 21 days if immunoglobulin given)</p> <p><u>Infectious period</u> is 5 days before onset of rash & 5 days after onset of rash (onset of rash counted as day 1)</p>	<p>Susceptible staff should not provide direct patient care</p> <p>Exposed <u>susceptible patients</u> should be isolated in airborne precautions from 7 - 18 days after the first exposure</p> <p>Post-exposure vaccine within 72 hours</p> <p>Transfer to a facility with negative pressure facility ASAP</p>
Measles (German) See “Rubella”				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Meningitis Bacterial <ul style="list-style-type: none"> <i>Haemophilus influenzae</i> <i>Neisseria meningitides</i> (meningococcal) (Notifiable disease) <i>Streptococcus pneumoniae</i> (pneumococcal) 	Droplet	Contact with secretions	1-10 days Precautions until 24 hours after effective antimicrobials.	
Viral	Standard			Contact Precautions for infants, young children
Meningococcal Infection (Notifiable disease) <ul style="list-style-type: none"> Invasive disease (meningitis, septicaemia, pneumonia etc.) 	Droplet	Respiratory secretions including aerosols produced by procedures		Use respiratory mask for aerosol producing procedures, e.g., CPR, intubation, extubation, chest physiotherapy
Middle East Respiratory Syndrome (MERS CoV) See "Corona Virus"				
Methicillin- Resistant <i>S.aureus</i> (MRSA) see MDRO policy	Standard			
Monkeypox (Notifiable disease)	Airborne, Contact		Until lesions are crusted	Contact Medical Officer of Health Respirator mask, eye wear, gown, gloves
Mucormycosis	Standard	Pus		

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Multidrug-Resistant Organism (MDRO) (e.g. MRSA, Vancomycin-resistant Enterococcus, ESBL's, multi-resistant E.coli, multiresistant bacteria)	Contact Or standard See individual causative organism	Pus, urine, etc. (depends on site of infection)	Until off antibiotics and culture negative for mMRSA. Colonisation lifelong	Contact Infection Prevention and Control Nurse for further details See MDRO policy Contact Clinical Microbiologist for antibiotic prophylaxis for surgery assistance
Mumps (Notifiable disease)	Droplet	Respiratory secretions	9 days after onset of swelling	Susceptible staff should not provide direct patient care when immune caregivers are available.
Mycobacteria, Non-tuberculosis <ul style="list-style-type: none"> Wound Pulmonary 	Standard	Pus		
Mycobacterium tuberculosis See "Tuberculosis"				
<i>Mycoplasma pneumoniae</i>	Droplet	Respiratory secretions	Duration of illness	
Necrotising Enterocolitis	Standard	Faeces	Duration of illness	Use contact precautions for symptomatic diapered or incontinent persons or to control institutional outbreaks
<i>Neisseria meningitidis</i> See "Meningococcal Infection"				
Nocardiosis	Standard	Pus		

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Norovirus (Norwalk agent) See "Gastroenteritis"				
Parainfluenza Respiratory in infants and young children	Contact	Respiratory secretions	Duration of illness	
Parvovirus B19	Droplet		Duration of hospitalisation when chronic disease occurs in the immune-deficient patient. Otherwise maintain precautions for 7 days	
Pediculosis See "lice"				
Pertussis (whooping cough) Notifiable disease and suspicion	Droplet		For 5 days after commencing antibiotic therapy	Post-exposure chemoprophylaxis (e.g. erythromycin) for household contacts and staff on public health advice
Pharyngitis		Respiratory secretions	Duration of illness	Viruses have been associated with this syndrome
<ul style="list-style-type: none"> Adults 	Standard			
<ul style="list-style-type: none"> Young children 	Contact			
Pinworm (<i>Enterobius vermicularis</i>)	Standard			

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Plague (Notifiable disease)				
• Bubonic	Standard	Pus	3 days after onset of treatment	
• Pneumonic	Droplet	Respiratory secretions		48 hours antimicrobial prophylaxis for exposed HCW
Pleurodynia See "Enteroviral Infections"				
Pneumonia				
• Adenovirus • Infants & young children • Mycoplasma	Droplet and contact	Respiratory secretions	Duration of illness	
• <i>Burkholderia cepacia</i> in cystic fibrosis (infection or colonisation)	Contact			Do not cohort in room with other cystic fibrosis patients who are not colonised or infected with the same strain.
• <i>Burkholderia cepacia</i> in patients without CF • Chlamydia • Fungal • Bacterial not listed elsewhere • <i>Legionella</i> species • <i>S.aureus</i>	Standard			Infectious until 24 hours after treatment is started
• Meningococcal See "Meningococcal infection"				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
<ul style="list-style-type: none"> Multidrug-resistant bacteria See "MDRO policy" & specific causative organism				
Pneumococcal <ul style="list-style-type: none"> <i>Pneumocystis carinii</i> <i>Pseudomonas cepacia</i> See "Burkholderia cepacia" <ul style="list-style-type: none"> <i>Staphylococcus aureus</i> 	Standard	Respiratory secretions	Duration of illness	Avoid placement in same room as immunocompromised patient
Poliomyelitis (Notifiable disease)	Contact	Faeces		
Prion Disease See "Creutzfeldt-Jakob Disease"				
Psittacosis	Standard	Respiratory secretions		
Q Fever (Notifiable disease; Rickettsial disease)	Standard	Respiratory secretions		
Rabies (Notifiable disease)	Standard	Respiratory secretions	Duration of illness	
Rat-Bite Fever (<i>Streptobacillus moniliformis</i> or <i>Spirillum minus</i>)	Standard			
Relapsing Fever (<i>Borrelia spp</i>)	Standard	Blood	Duration of illness	

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Respiratory Infectious Diseases (if not covered elsewhere) <ul style="list-style-type: none"> Adults 	Standard	Respiratory secretions	Duration of illness	
<ul style="list-style-type: none"> Infants and young children 	Contact			
Respiratory Syncytial Virus <ul style="list-style-type: none"> Infants, children and Immunosuppressed adults 	Contact		Duration of illness	
Reye Syndrome	Standard		Duration of illness	
Rheumatic Fever (Notifiable disease)	Standard			
Rhinovirus <ul style="list-style-type: none"> Adults Young children 	Droplet	Respiratory secretions	Duration of illness	Contact precautions with copious secretions
Ringworm	Standard			It may be desirable to segregate a child for 24 hours after treatment is commenced
Ritter's Disease (Staphylococcal scalded skin syndrome)	Contact	Lesion drainage	Duration of illness	
Roseola infantum (exanthema subitum; caused by HHV-6)	Standard		Duration of illness	
Ross River Virus (Notifiable disease)	Standard	Blood		

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Rotavirus See "Gastroenteritis"				
Rubella (Notifiable disease) <ul style="list-style-type: none"> Congenital 	Contact	Respiratory secretions	During any admission in the first year of life unless nasopharynx and urine are virus culture-negative after 3 months of age	Non immune/susceptible staff, should not provide direct patient care when immune caregivers are available
<ul style="list-style-type: none"> Acquired 	Droplet		7 days after onset of rash	
Rubeola See "Measles"				
Salmonellosis See "Gastroenteritis".				
SARS See "Corona Virus"				
Scabies	Contact	Infested area	24 hours after started treatment	
Scalded Skin Syndrome See "Ritter's Disease"				
Schistosomiasis (Notifiable disease)	Standard			
Severe Acute Respiratory Syndrome (SARS) See "Corona Virus"				
Shigellosis See "Gastroenteritis"				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Shingles See "Zoster"				
Smallpox (Notifiable disease)	Airborne and Contact	Lesion material and respiratory secretions	Duration of illness plus 10 days after resolution of fever, provided respiratory symptoms are absent or improving	<p>Notify Medical Officer of Health as soon as diagnosis is suspected</p> <p>Non-vaccinated staff should not provide direct patient care when immune caregivers are available.</p> <p>All HCW must wear respiratory masks</p> <p>Post-exposure vaccine protective if given within 4 days of contact.</p>
Staphylococcal Disease (<i>S.aureus</i>) <ul style="list-style-type: none"> Skin, wound or burn infection: Major 	Contact	Pus, wound secretions	Duration of illness	<ul style="list-style-type: none"> Major = dressing does not contain exudate Minor = dressing contains exudate Contact precautions if incontinent/diapered Infants and young children should be in Contact Precautions
<ul style="list-style-type: none"> Skin, wound or burn infection: Minor Enterocolitis Furunculosis Pneumonia or draining lung abscess Toxic Shock Syndrome 	Standard			
<ul style="list-style-type: none"> MRSA <p>See MDRO policy, see "MRSA", "Methicillin resistant <i>S.aureus</i>", "Multidrug resistant <i>S.aureus</i>"</p>				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
<ul style="list-style-type: none">Scalded skin syndromeSee “Ritter’s Disease”				
Streptococcal Disease (Group A Streptococcus)				
<ul style="list-style-type: none">Skin, wound, burn infection: Major	Contact	Pus	Until minor	<ul style="list-style-type: none">Major = dressing does not contain exudateMinor = contains exudate
<ul style="list-style-type: none">Skin, wound, burn infection: MinorEndometritis (puerperal sepsis)ErysipelasRheumatic fever(Notifiable disease)	Standard	Pus	Until healed	
		Vaginal discharge	Duration of illness or until 24 hours starting treatment	
		Respiratory secretions		
<ul style="list-style-type: none">Pharyngitis (infants, young children)Pneumonia (infants, young children)	Droplet	Respiratory secretions		
<ul style="list-style-type: none">Scarlet fever (infants, young children)Serious invasive disease (e.g. necrotising fasciitis, toxic shock syndrome)		Respiratory secretions, pus		
		Respiratory secretions		

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Streptococcal Disease (Group B Streptococcus) <ul style="list-style-type: none"> • Neonatal 	Standard	Faeces		
Strongyloidiasis	Standard	Faeces	-	Respiratory secretions may be infectious in some patients
Syphilis <ul style="list-style-type: none"> • Skin, mucous membranes, including 1^o, 2^o & congenital syphilis 	Standard	Lesions, blood	24 hours after commencing therapy	
<ul style="list-style-type: none"> • Latent or antibody positive only 		Blood		
Tapeworm, e.g. <i>Taenia solium</i> (pork) (Notifiable disease)	Standard	Faeces		
Tetanus (Notifiable disease)	Standard		Duration of illness	
Tinea See “Ringworm”				
TORCH See “Herpes simplex, syphilis, toxoplasmosis, specific cause”				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Toxic Shock Syndrome <ul style="list-style-type: none"> Staphylococcal. See "Staphylococcal infection" <ul style="list-style-type: none"> "Streptococcal" See "Streptococcal infection"				
Toxoplasmosis	Standard	Faeces		
Trachoma, acute	Standard	Purulent exudate	Duration of illness	
Trichinosis (Notifiable disease)	Standard			
Trichomonas	Standard			
Trichuris (Whipworm)	Standard			
Tuberculosis (<i>M.tuberculosis</i>) (ALL Types - Notifiable disease) <ul style="list-style-type: none"> Extrapulmonary draining lesions including scrofula 	Airborne and Contact	Pus	Duration of illness	
<ul style="list-style-type: none"> Extrapulmonary lesions, not draining 	Standard			
<ul style="list-style-type: none"> Meningitis 				(use airborne precautions if evidence of pulmonary disease)
<ul style="list-style-type: none"> Skin test positive, no evidence of active disease 				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
<ul style="list-style-type: none"> Pulmonary (lung) and laryngeal disease 	Airborne	Airborne droplet nuclei	Usually, 2-3 weeks after effective treatment is begun, & after 3 consecutive sputum smears (on different days) are negative	Transfer to a facility with a negative pressure ventilation room. <i>(negative pressure facility not available at Mercy hospital)</i>
Tularaemia	Standard			
Typhoid Fever See "Gastroenteritis"				
<i>Typhus (endemic and epidemic)</i> <i>(Notifiable disease)</i>	Standard	Blood	Duration of illness	
Vaccinia (smallpox vaccination site, draining)	Standard (Contact for extensive or disseminated disease)	Wound drainage	Until lesions dry and crusted, scabs separated	Only vaccinated staff have contact with active vaccination sites and care for persons with adverse vaccinia events. If unvaccinated, only staff without contraindication to the vaccine to provide care
Vancomycin Resistant Enterococcus See "Enterococcus"	Contact	Faecal	For length of hospitalisation	Colonisation is lifelong

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Varicella (Chickenpox)	Airborne and Contact	Respiratory secretions. Lesion secretions	Until all lesions are crusted	<p>Transfer to a facility with a negative-pressure room. <i>negative pressure (facility not available at Mercy hospital)</i></p> <p>Susceptible staff should not provide direct patient care when immune caregivers are available.</p> <p>PPE Must be worn</p> <p>Exposed susceptible patients should be placed in similar isolation from 10-21 days after exposure.</p> <p>For exposed persons (staff and patients) if not immune:</p> <p>Post-exposure vaccine within 5 days, or post-exposure VZIG within 4 days if the vaccine is contraindicated (do not give the vaccine to pregnant and immunocompromised persons)</p>
<i>Varicella Zoster</i> , Herpes zoster, (shingles) See "Zoster"				
Variola See "Smallpox"				
Vibrio Infections (e.g. <i>V.cholerae</i> , <i>V.parahaemolyticus</i>) See "Gastroenteritis"				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Viral Haemorrhagic Fevers (Notifiable disease) <ul style="list-style-type: none"> e.g. Lassa, Ebola, Marburg 	Airborne, droplet and contact (EXTREME)	Blood, body fluids, tissues	Duration of illness	notify Medical Officer of Health ASAP. Add eye protection, double gloves , Hair, leg and shoe coverings, and impermeable jumpsuits
Viral Respiratory Diseases (not covered elsewhere) <ul style="list-style-type: none"> Adults 	Standard			
<ul style="list-style-type: none"> Infants and young children See <i>"Respiratory Infectious Disease"</i>				
Whooping Cough See <i>"Pertussis"</i>				
Wound Infections See <i>"Abscess"</i>				

Disease	Isolation Category	Infective Material	Duration of Precautions or Illness	Comments
Zoster (Shingles, herpes zoster etc.) <ul style="list-style-type: none"> Localised infection in an immunocompromised patient, or a patient with an intact immune system with uncovered/uncontained lesions 	Airborne and Contact	Lesions, respiratory secretions	Duration of illness	<p>Transfer to a facility with a negative-pressure room (negative pressure facility not available at Mercy hospital).</p> <p>Respiratory masks to be worn at all times while in the room unless known to be immune.</p> <p>Susceptible staff should not enter the room if immune caregivers are available.</p> <p>Gowns and gloves to be worn by all personnel while in the room.</p> <p>Exposed susceptible patients should be placed in similar isolation from 10-21 days after exposure.</p>
<ul style="list-style-type: none"> Localised infection in a patient with an intact immune system with lesions that can be contained/covered 	Standard	Lesions	Duration of illness	<p>Susceptible staff should not provide direct patient care when immune caregivers are available.</p> <p>Patient not to share a room with non-immune or immunocompromised patients.</p>