

Infection Control

Type and Duration of Precautions Recommended for Selected Infections and Conditions¹

Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings (2007)

Appendix A Updates [September 2018]

Changes: Updates and clarifications made to the table in Appendix A: Type and Duration of Precautions Recommended for Selected Infections and Conditions.

A B C D E F G H I J K L M N O P Q R S T U V W Y Z

A

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Abscess Draining, major	Contact + Standard	Duration of illness	Until drainage stops or can be contained by dressing.
Abscess Draining, minor or limited	Standard	n/a	If dressing covers and contains drainage.
Acquired human immunodeficiency syndrome (HIV)	Standard	n/a	Postexposure chemoprophylaxis for some blood exposures [866].
Actinomycosis	Standard	n/a	Not transmitted from person to person.
Adenovirus infection (see agent-specific guidance under Gastroenteritis, Conjunctivitis, Pneumonia)	n/a	n/a	n/a
Amebiasis	Standard	n/a	Person-to-person transmission is rare. Transmission in settings for the mentally challenged and in a family group has been reported [1045]. Use care when handling diapered infants and mentally challenged persons [1046].

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Anthrax	Standard	n/a	Infected patients do not generally pose a transmission risk.
Anthrax Cutaneous	Standard	n/a	Transmission through non-intact skin contact with draining lesions possible, therefore use Contact Precautions if large amount of uncontained drainage. Handwashing with soap and water preferable to use of waterless alcohol-based antiseptics since alcohol does not have sporicidal activity [983].
Anthrax Pulmonary	Standard	n/a	Not transmitted from person to person.
Anthrax Environmental: aerosolizable spore-containing powder or other substance	n/a	Until environment completely decontaminated	Until decontamination of environment complete [203]. Wear respirator (N95 mask or PAPRs), protective clothing; decontaminate persons with powder on them (Notice to Readers: Occupational Health Guidelines for Remediation Workers at Bacillus anthracis-Contaminated Sites — United States, 2001–2002 accessed September 2018). Hand hygiene: Handwashing for 30-60 seconds with soap and water or 2% chlorhexidine gluconate after spore contact (alcohol handrubs inactive against spores [983].) Postexposure prophylaxis following environmental exposure: 60 days of antimicrobials (either doxycycline, ciprofloxacin, or levofloxacin) and postexposure vaccine under IND.
Antibiotic-associated colitis (see <i>Clostridium difficile</i>)	n/a	n/a	n/a
Arthropod-borne <ul style="list-style-type: none"> • viral encephalitides (eastern, western, Venezuelan equine encephalomyelitis; St Louis, California encephalitis; West Nile Virus) and • viral fevers (dengue, yellow fever, Colorado tick fever) 	Standard	n/a	Not transmitted from person to person except rarely by transfusion, and for West Nile virus by organ transplant, breastmilk or transplacentally [530, 1047]. Install screens in windows and doors in endemic areas. Use DEET-containing mosquito repellants and clothing to cover extremities.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Ascariasis	Standard	n/a	Not transmitted from person to person.
Aspergillosis	Standard	n/a	Contact Precautions and Airborne if massive soft tissue infection with copious drainage and repeated irrigations required [154].
Avian influenza (see influenza, avian below)	n/a	n/a	n/a

B

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Babesiosis	Standard	n/a	Not transmitted from person to person, except rarely by transfusion.
Blastomycosis, North American, cutaneous or pulmonary	Standard	n/a	Not transmitted from person to person.
Botulism	Standard	n/a	Not transmitted from person to person.
Bronchiolitis (see Respiratory Infections in infants and young children)	Contact + Standard	Duration of illness	Use mask according to Standard Precautions.
Brucellosis (undulant, Malta, Mediterranean fever)	Standard	n/a	Not transmitted from person to person, except rarely via banked spermatozoa and sexual contact [1048, 1049]. Provide antimicrobial prophylaxis following laboratory exposure [1050].

C

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
<i>Campylobacter</i> gastroenteritis (see Gastroenteritis)	n/a	n/a	n/a
Candidiasis, all forms including mucocutaneous	Standard	n/a	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Cat-scratch fever (benign inoculation lymphoreticulosis)	Standard	n/a	Not transmitted from person to person.
Cellulitis	Standard	n/a	n/a
Chancroid (soft chancre) (<i>H. ducreyi</i>)	Standard	n/a	Transmitted sexually from person to person.
Chickenpox (see Varicella)	n/a	n/a	n/a
<i>Chlamydia trachomatis</i> Conjunctivitis	Standard	n/a	n/a
<i>Chlamydia trachomatis</i> Genital (lymphogranuloma venereum)	Standard	n/a	n/a
<i>Chlamydia trachomatis</i> Pneumonia (infants ≤ 3 mos. of age)	Standard	n/a	n/a
<i>Chlamydia pneumoniae</i>	Standard	n/a	Outbreaks in institutionalized populations reported, rarely [1051, 1052].
Cholera (see Gastroenteritis)	n/a	n/a	n/a
Closed-cavity infection Open drain in place; limited or minor drainage	Standard	n/a	Contact Precautions if there is copious uncontained drainage.
Closed-cavity infection No drain or closed drainage system in place	Standard	n/a	n/a
<i>Clostridium botulinum</i>	Standard	n/a	Not transmitted from person to person.
<i>Clostridium difficile</i> (see Gastroenteritis, <i>C. difficile</i>)	Contact + Standard	Duration of illness	n/a
<i>Clostridium perfringens</i> Food poisoning	Standard	n/a	Not transmitted from person to person.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
<i>Clostridium perfringens</i> Gas gangrene	Standard	n/a	Transmission from person to person rare; 1 outbreak in a surgical setting reported [1053]. Use Contact Precautions if wound drainage is extensive.
Coccidioidomycosis (valley fever) Draining lesions	Standard	n/a	Not transmitted from person to person except under extraordinary circumstances, because the infectious arthroconidial form of <i>Coccidioides immitis</i> is not produced in humans [1054].
Coccidioidomycosis (valley fever) Pneumonia	Standard	n/a	Not transmitted from person to person except under extraordinary circumstances, (e.g., inhalation of aerosolized tissue phase endospores during necropsy, transplantation of infected lung) because the infectious arthroconidial form of <i>Coccidioides immitis</i> is not produced in humans [1054, 1055].
Colorado tick fever	Standard	n/a	Not transmitted from person to person.
Congenital rubella	Contact + Standard	Until 1 yr of age	Standard Precautions if nasopharyngeal and urine cultures repeatedly negative after 3 mos. of age.
Conjunctivitis Acute bacterial	Standard	n/a	n/a
Conjunctivitis Acute bacterial <i>Chlamydia</i>	Standard	n/a	n/a
Conjunctivitis Acute bacterial Gonococcal	Standard	n/a	n/a
Conjunctivitis Acute viral (acute hemorrhagic)	Contact + Standard	Duration of illness	Adenovirus most common; enterovirus 70 [1056], Coxsackie virus A24 [1057] also associated with community outbreaks. Highly contagious; outbreaks in eye clinics, pediatric and neonatal settings, institutional settings reported. Eye clinics should follow Standard Precautions when handling patients with conjunctivitis. Routine use of infection control measures in the handling of instruments and equipment will prevent the occurrence of outbreaks in this and other settings. [460, 461, 814, 1058-1060].
Corona virus associated with SARS (SARS-CoV) (see Severe Acute Respiratory Syndrome)	n/a	n/a	n/a


Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Coxsackie virus disease (see enteroviral infection)	n/a	n/a	n/a
Creutzfeldt-Jakob disease (CJD, vCJD)	Standard	n/a	Use disposable instruments or special sterilization/disinfection for surfaces, objects contaminated with neural tissue if CJD or vCJD suspected and has not been R/O; No special burial procedures. [1061]
Croup (see Respiratory Infections in infants and young children)	n/a	n/a	n/a
Crimean-Congo Fever (see Viral Hemorrhagic Fever)	Standard	n/a	n/a
Cryptococcosis	Standard	n/a	Not transmitted from person to person, except rarely via tissue and corneal transplant. [1062, 1063]
Cryptosporidiosis (see Gastroenteritis)	n/a	n/a	n/a
Cysticercosis	Standard	n/a	Not transmitted from person to person.
Cytomegalovirus infection, including in neonates and immunosuppressed patients	Standard	n/a	No additional precautions for pregnant HCWs.

D

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Decubitus ulcer (see Pressure Ulcer)	n/a	n/a	n/a
Dengue fever	Standard	n/a	Not transmitted from person to person.
Diarrhea, acute-infective etiology suspected (see Gastroenteritis)	n/a	n/a	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Diphtheria Cutaneous	Contact + Standard	Until off antimicrobial treatment and culture- negative	Until 2 cultures taken 24 hours apart negative.
Diphtheria Pharyngeal	Droplet + Standard	Until off antimicrobial treatment and culture- negative	Until 2 cultures taken 24 hours apart negative.

E

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Ebola virus (see Viral Hemorrhagic Fevers)	n/a	n/a	Ebola Virus Disease for Healthcare Workers [2014]  Update: Recommendations for healthcare workers can be found at Ebola For Clinicians. (accessed September 2018).
Echinococcosis (hydatidosis)	Standard	n/a	Not transmitted from person to person.
Echovirus (see Enteroviral Infection)	n/a	n/a	n/a
Encephalitis or encephalomyelitis (see specific etiologic agents)	n/a	n/a	n/a
Endometritis (endomyometritis)	Standard	n/a	n/a
Enterobiasis (pinworm disease, oxyuriasis)	Standard	n/a	n/a
<i>Enterococcus</i> species (see Multidrug-Resistant Organisms if epidemiologically significant or vancomycin-resistant)	n/a	n/a	n/a
Enterocolitis, <i>C. difficile</i> (see Gastroenteritis, <i>C. difficile</i>)	n/a	n/a	n/a
Enteroviral infections (i.e., Group A and B Coxsackie viruses and Echo viruses) (excludes polio virus)	Standard	n/a	Use Contact Precautions for diapered or incontinent children for duration of illness and to control institutional outbreaks.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Epiglottitis, due to <i>Haemophilus influenzae</i> type b	Droplet + Standard	Until 24 hours after initiation of effective therapy	See specific disease agents for epiglottitis due to other etiologies.
Epstein-Barr virus infection, including infectious mononucleosis	Standard	n/a	n/a
Erythema infectiosum (also see Parvovirus B19)	n/a	n/a	n/a
<i>Escherichia coli</i> gastroenteritis (see Gastroenteritis)	n/a	n/a	n/a



F

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Food poisoning Botulism	Standard	n/a	Not transmitted from person to person.
Food poisoning <i>C. perfringens</i> or <i>welchii</i>	Standard	n/a	Not transmitted from person to person.
Food poisoning Staphylococcal	Standard	n/a	Not transmitted from person to person.
Furunculosis, staphylococcal	Standard	n/a	Contact if drainage not controlled. Follow institutional policies if MRSA.
Furunculosis, staphylococcal Infants and young children	Contact + Standard	Duration of illness (with wound lesions, until wounds stop draining)	n/a

G

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Gangrene (gas gangrene)	Standard	n/a	Not transmitted from person to person.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Gastroenteritis	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks for gastroenteritis caused by all of the agents below.
Gastroenteritis Adenovirus	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis <i>Campylobacter</i> species	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis Cholera (<i>Vibrio cholerae</i>)	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis <i>C. difficile</i>	Contact + Standard	Duration of illness	Discontinue antibiotics if appropriate. Do not share electronic thermometers; [853, 854] ensure consistent environmental cleaning and disinfection. Hypochlorite solutions may be required for cleaning if transmission continues [847]. Handwashing with soap and water preferred because of the absence of sporicidal activity of alcohol in waterless antiseptic handrubs [983].
Gastroenteritis <i>Cryptosporidium</i> species	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis <i>E. coli</i> Enteropathogenic O157:H7 and other Shiga toxin-producing strains	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis <i>E. coli</i> Other species	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis <i>Giardia lamblia</i>	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Gastroenteritis Noroviruses	 Update: Contact + Standard	n/a	<p>Use Contact Precautions for a minimum of 48 hours after the resolution of symptoms or to control institutional outbreaks.</p> <p>Persons who clean areas heavily contaminated with feces or vomitus may benefit from wearing masks since virus can be aerosolized from these body substances [142, 147 148]; ensure consistent environmental cleaning and disinfection with focus on restrooms even when apparently unsoiled [273, 1064]. Hypochlorite solutions may be required when there is continued transmission [290-292]. Alcohol is less active, but there is no evidence that alcohol antiseptic handrubs are not effective for hand decontamination [294].</p> <p>Cohorting of affected patients to separate airspaces and toilet facilities may help interrupt transmission during outbreaks.</p> <p>Gastroenteritis, Noroviruses Precaution Update [April 2019]</p> <p> Update: The Type of Precaution was updated from “Standard” to “Contact + Standard” to align with Guideline for the Prevention and Control of Norovirus Gastroenteritis Outbreaks in Healthcare Settings (2011).</p>
Gastroenteritis Rotavirus	Contact + Standard	Duration of illness	Ensure consistent environmental cleaning and disinfection and frequent removal of soiled diapers. Prolonged shedding may occur in both immunocompetent and immunocompromised children and the elderly [932, 933].
Gastroenteritis <i>Salmonella</i> species (including <i>S. typhi</i>)	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis <i>Shigella</i> species (Bacillary dysentery)	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis <i>Vibrio</i> <i>parahaemolyticus</i>	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Gastroenteritis Viral (if not covered elsewhere)	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
Gastroenteritis <i>Yersinia enterocolitica</i>	Standard	n/a	Use Contact Precautions for diapered or incontinent persons for the duration of illness or to control institutional outbreaks.
German measles (see Rubella; see Congenital Rubella)	n/a	n/a	n/a
Giardiasis (see Gastroenteritis)	n/a	n/a	n/a
Gonococcal ophthalmia neonatorum (gonorrheal ophthalmia, acute conjunctivitis of newborn)	Standard	n/a	n/a
Gonorrhea	Standard	n/a	n/a
Granuloma inguinale (Donovanosis, granuloma venereum)	Standard	n/a	n/a
Guillain-Barré syndrome	Standard	n/a	Not an infectious condition.

H

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
<i>Haemophilus influenzae</i> (see disease-specific recommendations)	n/a	n/a	n/a
Hand, foot, and mouth disease (see Enteroviral Infection)	n/a	n/a	n/a
Hansen's Disease (see Leprosy)	n/a	n/a	n/a
Hantavirus pulmonary syndrome	Standard	n/a	Not transmitted from person to person.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
<i>Helicobacter pylori</i>	Standard	n/a	n/a
Hepatitis, viral Type A	Standard	n/a	Provide hepatitis A vaccine postexposure as recommended. [1065]
Hepatitis, viral Type A-Diapered or incontinent patients	Contact + Standard	n/a	Maintain Contact Precautions in infants and children <3 years of age for duration of hospitalization; for children 3-14 yrs. of age for 2 weeks after onset of symptoms; >14 yrs. of age for 1 week after onset of symptoms [833, 1066, 1067].
Hepatitis, viral Type B-HBsAg positive; acute or chronic	Standard	n/a	See specific recommendations for care of patients in hemodialysis centers. [778]
Hepatitis, viral Type C and other unspecified non-A, non-B	Standard	n/a	See specific recommendations for care of patients in hemodialysis centers. [778]
Hepatitis, viral Type D (seen only with hepatitis B)	Standard	n/a	n/a
Hepatitis, viral Type E	Standard	n/a	Use Contact Precautions for diapered or incontinent individuals for the duration of illness. [1068]
Hepatitis, viral Type G	Standard	n/a	n/a
Herpangina (see Enteroviral Infection)	n/a	n/a	n/a
Hookworm	Standard	n/a	n/a
Herpes simplex (<i>Herpesvirus hominis</i>) Encephalitis	Standard	n/a	n/a
Herpes simplex (<i>Herpesvirus hominis</i>) Mucocutaneous, disseminated or primary, severe	Contact + Standard	Until lesions dry and crusted	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Herpes simplex (Herpesvirus hominis) Mucocutaneous, recurrent (skin, oral, genital)	Standard	n/a	n/a
Herpes simplex (Herpesvirus hominis) Neonatal	Contact + Standard	Until lesions dry and crusted	Also, for asymptomatic, exposed infants delivered vaginally or by C-section and if mother has active infection and membranes have been ruptured for more than 4 to 6 hours until infant surface cultures obtained at 24-36 hours of age negative after 48 hours incubation. [1069, 1070]
Herpes zoster (varicella-zoster) (shingles) Disseminated disease in any patient Localized disease in immunocompromised patient until disseminated infection ruled out	Airborne + Contact + Standard	Duration of illness	Susceptible HCWs should not enter room if immune caregivers are available; no recommendation for protection of immune HCWs; no recommendation for type of protection (i.e. surgical mask or respirator) for susceptible HCWs.
Herpes zoster (varicella-zoster) (shingles) Localized in patient with intact immune system with lesions that can be contained/covered	Standard	Until lesions dry and crusted	Susceptible HCWs should not provide direct patient care when other immune caregivers are available.
Histoplasmosis	Standard	n/a	Not transmitted from person to person.
Human immunodeficiency virus (HIV)	Standard	n/a	Postexposure chemoprophylaxis for some blood exposures [866].
Human metapneumovirus	Contact + Standard	Duration of illness	HAI reported [1071], but route of transmission not established [823]. Assumed to be Contact transmission as for RSV since the viruses are closely related and have similar clinical manifestations and epidemiology. Wear masks according to Standard Precautions.

I

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
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Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Impetigo	Contact + Standard	Until 24 hours after initiation of effective therapy	n/a
Infectious mononucleosis	Standard	n/a	n/a
Influenza Human (seasonal influenza)	n/a	n/a	See Prevention Strategies for Seasonal Influenza in Healthcare Settings (accessed September 2018). [Current version of this document may differ from original.] for current seasonal influenza guidance.
Influenza Avian (e.g., H5N1, H7, H9 strains)	n/a	n/a	See [This link is no longer active: www.cdc.gov/flu/avian/professional/infect-control.htm . Similar information may be found at Interim Guidance for Infection Control Within Healthcare Settings When Caring for Confirmed Cases, Probable Cases, and Cases Under Investigation for Infection with Novel Influenza A Viruses Associated with Severe Disease (accessed September 2018).] for current avian influenza guidance.
Influenza Pandemic Influenza (also a human influenza virus)	Droplet + Standard	n/a	See [This link is no longer active: http://www.pandemicflu.gov . Similar information may be found at Interim Guidance for Infection Control Within Healthcare Settings When Caring for Confirmed Cases, Probable Cases, and Cases Under Investigation for Infection with Novel Influenza A Viruses Associated with Severe Disease (accessed September 2018).] for current pandemic influenza guidance.

K

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Kawasaki syndrome	Standard	n/a	Not an infectious condition.


L

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
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Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Lassa fever (see Viral Hemorrhagic Fevers)	n/a	n/a	n/a
Legionnaires' disease	Standard	n/a	Not transmitted from person to person.
Leprosy	Standard	n/a	n/a
Leptospirosis	Standard	n/a	Not transmitted from person to person.
Lice Head (pediculosis)	Contact + Standard	Until 24 hours after initiation of effective therapy	See [This link is no longer active: https://www.cdc.gov/ncidod/dpd/parasites/lice/default.htm . Similar information may be found at CDC's Parasites – Lice (accessed September 2018).]
Lice Body	Standard	n/a	Transmitted person-to-person through infested clothing. Wear gown and gloves when removing clothing; bag and wash clothes according to CDC guidance Parasites – Lice (accessed September 2018).
Lice Pubic	Standard	n/a	Transmitted person-to-person through sexual contact. See CDC's Parasites – Lice (accessed September 2018).
Listeriosis (listeria monocytogenes)	Standard	n/a	Person-to-person transmission rare; cross-transmission in neonatal settings reported. [1072-1075]
Lyme disease	Standard	n/a	Not transmitted from person to person.
Lymphocytic choriomeningitis	Standard	n/a	Not transmitted from person to person.
Lymphogranuloma venereum	Standard	n/a	n/a

M

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
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Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Malaria	Standard	n/a	Not transmitted from person to person, except through transfusion rarely and through a failure to follow Standard Precautions during patient care. [1076-1079] Install screens in windows and doors in endemic areas. Use DEET- containing mosquito repellants and clothing to cover extremities.
Marburg virus disease (see Viral Hemorrhagic Fevers)	n/a	n/a	n/a
Measles (rubeola)	Airborne + Standard	4 days after onset of rash; duration of illness in immune compromised	Interim Measles Infection Control [July 2019]  See Interim Infection Prevention and Control Recommendations for Measles in Healthcare Settings Susceptible healthcare personnel (HCP) should not enter room if immune care providers are available; regardless of presumptive evidence of immunity, HCP should use respiratory protection that is at least as protective as a fit-tested, NIOSH-certified N95 respirator upon entry into the patient's room or care area. For exposed susceptibles, postexposure vaccine within 72 hours or immune globulin within 6 days when available [17, 1032, 1034]. Place exposed susceptible patients on Airborne Precautions and exclude susceptible healthcare personnel.
Melioidosis, all forms	Standard	n/a	Not transmitted from person to person.
Meningitis Aseptic (nonbacterial or viral; also see Enteroviral infections)	Standard	n/a	Contact for infants and young children.
Meningitis Bacterial, gram-negative enteric, in neonates	Standard	n/a	n/a
Meningitis Fungal	Standard	n/a	n/a
Meningitis <i>Haemophilus Influenzae</i> , type b known or suspected	Droplet + Standard	Until 24 hours after initiation of effective therapy	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Meningitis <i>Listeria monocytogenes</i> (See Listeriosis)	Standard	n/a	n/a
Meningitis <i>Neisseria meningitidis</i> (meningococcal) known or suspected	Droplet + Standard	Until 24 hours after initiation of effective therapy	See Meningococcal Disease below.
Meningitis <i>Streptococcus pneumoniae</i>	Standard	n/a	n/a
Meningitis <i>M. tuberculosis</i>	Standard	n/a	Concurrent, active pulmonary disease or draining cutaneous lesions may necessitate addition of Contact and/or Airborne. For children, Airborne Precautions until active tuberculosis ruled out in visiting family members (see Tuberculosis below). [42]
Meningitis Other diagnosed bacterial	Standard	n/a	n/a
Meningococcal disease: sepsis, pneumonia, Meningitis	Droplet + Standard	Until 24 hours after initiation of effective therapy	Postexposure chemoprophylaxis for household contacts, HCWs exposed to respiratory secretions; postexposure vaccine only to control outbreaks. [15, 17]
<i>Molluscum contagiosum</i>	Standard	n/a	n/a
Monkeypox	Airborne + Contact + Standard	Airborne – Until monkeypox confirmed and smallpox excluded Contact – Until lesions crusted	See CDC's Monkeypox website (accessed September 2018). [Current version of this document may differ from original.] for most current recommendations. Transmission in hospital settings unlikely [269]. Pre- and postexposure smallpox vaccine recommended for exposed HCWs.
Mucormycosis	Standard	n/a	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Multidrug-resistant organisms (MDROs), infection or colonization (e.g., MRSA, VRE, VISA/VRSA, ESBLs, resistant <i>S. pneumoniae</i>)	Contact + Standard	n/a	MDROs judged by the infection control program, based on local, state, regional, or national recommendations, to be of clinical and epidemiologic significance. Contact Precautions recommended in settings with evidence of ongoing transmission, acute care settings with increased risk for transmission or wounds that cannot be contained by dressings. See recommendations for management options in Management of Multidrug-Resistant Organisms In Healthcare Settings, 2006 [870]. Contact state health department for guidance regarding new or emerging MDRO.
Mumps (infectious parotitis)	Droplet + Standard	Until 5 days after the onset of swelling	<p>Mumps [October 2017]  Update: The Healthcare Infection Control Practices Advisory Committee (HICPAC) voted to change the recommendation of isolation for persons with mumps from 9 days to 5 days based on this 2008 MMWR report Updated Recommendations for Isolation of Persons with Mumps (accessed September 2018).</p> <p>After onset of swelling; susceptible HCWs should not provide care if immune caregivers are available. The below note has been superseded by the above recommendation update Note: (Recent assessment of outbreaks in healthy 18-24 year olds has indicated that salivary viral shedding occurred early in the course of illness and that 5 days of isolation after onset of parotitis may be appropriate in community settings; however the implications for healthcare personnel and high-risk patient populations remain to be clarified.)</p>
Mycobacteria, nontuberculosis (atypical)	n/a	Not transmitted person-to-person.	n/a
Mycobacteria, nontuberculosis (atypical)	Pulmonary	Standard	n/a
Mycobacteria, nontuberculosis (atypical)	Wound	Standard	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
<i>Mycoplasma pneumoniae</i>	Droplet + Standard	Duration of illness	n/a

N


Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Necrotizing enterocolitis	Standard	n/a	Contact Precautions when cases clustered temporally [1080-1083].
Nocardiosis, draining lesions, or other presentations	Standard	n/a	Not transmitted person-to-person.
Norovirus (see Gastroenteritis)	n/a	n/a	n/a
Norwalk agent Gastroenteritis (see Gastroenteritis)	n/a	n/a	n/a

O

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Orf	Standard	n/a	n/a

P

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Parainfluenza virus infection, respiratory in infants and young children	Contact + Standard	Duration of illness	Viral shedding may be prolonged in immunosuppressed patients [1009, 1010]. Reliability of antigen testing to determine when to remove patients with prolonged hospitalizations from Contact Precautions uncertain.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Parvovirus B19 (Erythema infectiosum)	Droplet + Standard	n/a	Maintain precautions for duration of hospitalization when chronic disease occurs in an immunocompromised patient. For patients with transient aplastic crisis or red-cell crisis, maintain precautions for 7 days. Duration of precautions for immunosuppressed patients with persistently positive PCR not defined, but transmission has occurred [929].
Pediculosis (lice)	Contact + Standard	Until 24 hours after initiation of effective therapy after treatment	n/a
Pertussis (whooping cough)	Droplet + Standard	Until 5 days after initiation of effective antibiotic therapy	Single patient room preferred. Cohorting an option. Postexposure chemoprophylaxis for household contacts and HCWs with prolonged exposure to respiratory secretions [863]. Recommendations for Tdap vaccine in adults under development. Tdap Vaccine Recommendations [2018]  Update: Current recommendations can be found at Tdap / Td ACIP Vaccine Recommendations (accessed September 2018).
Pinworm infection (Enterobiasis)	Standard	n/a	n/a
Plague (<i>Yersinia pestis</i>) Bubonic	Standard	n/a	n/a
Plague (<i>Yersinia pestis</i>) Pneumonic	Droplet + Standard	Until 48 hours after initiation of effective antibiotic therapy	Antimicrobial prophylaxis for exposed HCW [207].
Pneumonia Adenovirus	Droplet + Contact + Standard	Duration of illness	Outbreaks in pediatric and institutional settings reported [376, 1084-1086]. In immunocompromised hosts, extend duration of Droplet and Contact Precautions due to prolonged shedding of virus. [931]

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Pneumonia Bacterial not listed elsewhere (including gram-negative bacterial)	Standard	n/a	n/a
Pneumonia <i>B. cepacia</i> in patients with CF, including respiratory tract colonization	Contact + Standard	Unknown	Avoid exposure to other persons with CF; private room preferred. Criteria for D/C precautions not established. See CF Foundation guideline. [20]
Pneumonia <i>B. cepacia</i> in patients without CF (see Multidrug-Resistant Organisms)	n/a	n/a	n/a
Pneumonia <i>Chlamydia</i>	Standard	n/a	n/a
Pneumonia Fungal	Standard	n/a	n/a
Pneumonia <i>Haemophilus influenzae</i> , type b Adults	Standard	n/a	n/a
Pneumonia <i>Haemophilus influenzae</i> , type b Infants and children	Droplet + Standard	Until 24 hours after initiation of effective therapy	n/a
Pneumonia <i>Legionella spp.</i>	Standard	n/a	n/a
Pneumonia Meningococcal	Droplet + Standard	Until 24 hours after initiation of effective therapy	See Meningococcal Disease above.
Pneumonia Multidrug-resistant bacterial (see Multidrug-Resistant Organisms)	n/a	n/a	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Pneumonia <i>Mycoplasma</i> (primary atypical Pneumonia)	Droplet + Standard	Duration of illness	n/a
Pneumonia Pneumococcal pneumonia	Standard	n/a	Use Droplet Precautions if evidence of transmission within a patient care unit or facility. [196-198, 1087]
Pneumonia <i>Pneumocystis jiroveci</i> (<i>Pneumocystis carinii</i>)	Standard	n/a	Avoid placement in the same room with an immunocompromised patient.
Pneumonia <i>Staphylococcus aureus</i>	Standard	n/a	For MRSA, see MDROs.
Pneumonia <i>Streptococcus</i> , group A Adults	Droplet + Standard	Until 24 hours after initiation of effective therapy	See Streptococcal Disease (group A <i>Streptococcus</i>) below Contact Precautions if skin lesions present.
Pneumonia <i>Streptococcus</i> , group A Infants and young children	Droplet + Standard	Until 24 hours after initiation of effective therapy	Contact Precautions if skin lesions present.
Pneumonia Varicella-Zoster (See Varicella-Zoster)	n/a	n/a	n/a
Pneumonia Viral Adults	Standard	n/a	n/a
Pneumonia Viral Infants and young children (see Respiratory Infectious Disease, acute, or specific viral agent)	n/a	n/a	n/a
Poliomyelitis	Contact + Standard	Duration of illness	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Pressure ulcer (decubitus ulcer, pressure sore) infected Major	Contact + Standard	Duration of illness	Until drainage stops or can be contained by dressing.
Pressure ulcer (decubitus ulcer, pressure sore) infected Minor or limited	Standard	n/a	If dressing covers and contains drainage.
Prion disease (See Creutzfeld-Jacob Disease)	n/a	n/a	n/a
Psittacosis (ornithosis) (<i>Chlamydia psittaci</i>)	Standard	n/a	Not transmitted from person to person.

Q

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Q fever	Standard	n/a	n/a

R

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Rabies	Standard	n/a	Person to person transmission rare; transmission via corneal, tissue and organ transplants has been reported [539, 1088]. If patient has bitten another individual or saliva has contaminated an open wound or mucous membrane, wash exposed area thoroughly and administer postexposure prophylaxis. [1089]
Rat-bite fever (<i>Streptobacillus moniliformis</i> disease, <i>Spirillum minus</i> disease)	Standard	n/a	Not transmitted from person to person.
Relapsing fever	Standard	n/a	Not transmitted from person to person.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Resistant bacterial infection or colonization (see Multidrug-Resistant Organisms)	n/a	n/a	n/a
Respiratory infectious disease, acute (if not covered elsewhere) Adults	Standard	n/a	n/a
Respiratory infectious disease, acute (if not covered elsewhere) Infants and young children	Contact + Standard	Duration of illness	Also see syndromes or conditions listed in Table 2.
Respiratory syncytial virus infection, in infants, young children and immunocompromised adults	Contact + Standard	Duration of illness	Wear mask according to Standard Precautions [24] CB [116, 117]. In immunocompromised patients, extend the duration of Contact Precautions due to prolonged shedding [928]. Reliability of antigen testing to determine when to remove patients with prolonged hospitalizations from Contact Precautions uncertain.
Reye's syndrome	Standard	n/a	Not an infectious condition.
Rheumatic fever	Standard	n/a	Not an infectious condition.
Rhinovirus	Droplet + Standard	Duration of illness	Droplet most important route of transmission [104 1090]. Outbreaks have occurred in NICUs and LTCFs [413, 1091, 1092]. Add Contact Precautions if copious moist secretions and close contact likely to occur (e.g., young infants) [111, 833].
Rickettsial fevers, tickborne (Rocky Mountain spotted fever, tickborne Typhus fever)	Standard	n/a	Not transmitted from person to person except through transfusion, rarely.
Rickettsialpox (vesicular rickettsiosis)	Standard	n/a	Not transmitted from person to person.
Ringworm (dermatophytosis, dermatomycosis, tinea)	Standard	n/a	Rarely, outbreaks have occurred in healthcare settings, (e.g., NICU [1093], rehabilitation hospital [1094]). Use Contact Precautions for outbreak.
Rocky Mountain spotted fever	Standard	n/a	Not transmitted from person to person except through transfusion, rarely.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Roseola infantum (exanthem subitum; caused by HHV-6)	Standard	n/a	n/a
Rotavirus infection (see Gastroenteritis)	n/a	n/a	n/a
Rubella (German measles) (also see Congenital Rubella)	Droplet + Standard	Until 7 days after onset of rash	<p>Susceptible HCWs should not enter room if immune caregivers are available. No recommendation for wearing face protection (e.g., a surgical mask) if immune. Pregnant women who are not immune should not care for these patients [17, 33]. Administer vaccine within 3 days of exposure to non-pregnant susceptible individuals.</p> <p>Place exposed susceptible patients on Droplet Precautions; exclude susceptible healthcare personnel from duty from day 5 after first exposure to day 21 after last exposure, regardless of postexposure vaccine.</p>
Rubeola (see Measles)	n/a	n/a	n/a

S

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Salmonellosis (see Gastroenteritis)	n/a	n/a	n/a
Scabies	Contact + Standard	Until 24 hours after initiation of effective therapy	n/a
Scalded skin syndrome, staphylococcal	Contact + Standard	Duration of illness	See Staphylococcal Disease, scalded skin syndrome below.
Schistosomiasis (bilharziasis)	Standard	n/a	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Severe acute respiratory syndrome (SARS)	Airborne + Droplet + Contact + Standard	Duration of illness plus 10 days after resolution of fever, provided respiratory symptoms are absent or improving	Airborne preferred; Droplet if AIR unavailable. N95 or higher respiratory protection; surgical mask if N95 unavailable; eye protection (goggles, face shield); aerosol-generating procedures and "supershedders" highest risk for transmission via small droplet nuclei and large droplets [93, 94, 96]. Vigilant environmental disinfection (see [This link is no longer active: www.cdc.gov/ncidod/sars . Similar information may be found at CDC Severe Acute Respiratory Syndrome (SARS) (accessed September 2018).])
Shigellosis (see Gastroenteritis)	n/a	n/a	n/a
Smallpox (variola; see Vaccinia for management of vaccinated persons)	Airborne + Contact + Standard	Duration of illness	Until all scabs have crusted and separated (3-4 weeks). Non-vaccinated HCWs should not provide care when immune HCWs are available; N95 or higher respiratory protection for susceptible and successfully vaccinated individuals; postexposure vaccine within 4 days of exposure protective [108, 129, 1038-1040].
Sporotrichosis	Standard	n/a	n/a
<i>Spirillum minor</i> disease (rat-bite fever)	Standard	n/a	Not transmitted from person to person.
Staphylococcal disease (<i>S. aureus</i>) Skin, wound, or burn Major	Contact + Standard	Duration of illness	Until drainage stops or can be contained by dressing.
Staphylococcal disease (<i>S. aureus</i>) Skin, wound, or burn Minor or limited	Standard	n/a	If dressing covers and contains drainage adequately.
Staphylococcal disease (<i>S. aureus</i>) Enterocolitis	Standard	n/a	Use Contact Precautions for diapered or incontinent children for duration of illness.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Staphylococcal disease (<i>S. aureus</i>) Multidrug-resistant (see Multidrug-Resistant Organisms)	n/a	n/a	n/a
Staphylococcal disease (<i>S. aureus</i>) Pneumonia	Standard	n/a	n/a
Staphylococcal disease (<i>S. aureus</i>) Scalded skin syndrome	Contact + Standard	Duration of illness	Consider healthcare personnel as potential source of nursery, NICU outbreak [1095].
Staphylococcal disease (<i>S. aureus</i>) Toxic shock syndrome	Standard	n/a	n/a
<i>Streptobacillus moniliformis</i> disease (rat-bite fever)	Standard	n/a	Not transmitted from person to person.
Streptococcal disease (group A <i>Streptococcus</i>) Skin, wound, or burn Major	Contact + Droplet + Standard	Until 24 hours after initiation of effective therapy	Until drainage stops or can be contained by dressing.
Streptococcal disease (group A <i>Streptococcus</i>) Skin, wound, or burn Minor or limited	Standard	n/a	If dressing covers and contains drainage.
Streptococcal disease (group A <i>Streptococcus</i>) Endometritis (puerperal sepsis)	Standard	n/a	n/a
Streptococcal disease (group A <i>Streptococcus</i>) Pharyngitis in infants and young children	Droplet + Standard	Until 24 hours after initiation of effective therapy	n/a
Streptococcal disease (group A <i>Streptococcus</i>) Pneumonia	Droplet + Standard	Until 24 hours after initiation of effective therapy	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Streptococcal disease (group A <i>Streptococcus</i>) Scarlet fever in infants and young children	Droplet + Standard	Until 24 hours after initiation of effective therapy	n/a
Streptococcal disease (group A <i>Streptococcus</i>) Serious invasive disease	Droplet + Standard	Until 24 hours after initiation of effective therapy	Outbreaks of serious invasive disease have occurred secondary to transmission among patients and healthcare personnel [162, 972, 1096-1098]. Contact Precautions for draining wound as above; follow recommendations for antimicrobial prophylaxis in selected conditions [160].
Streptococcal disease (group B <i>Streptococcus</i>), neonatal	Standard	n/a	n/a
Streptococcal disease (not group A or B) unless covered elsewhere Multidrug-resistant (see Multidrug-Resistant Organisms)	n/a	n/a	n/a
Strongyloidiasis	Standard	n/a	n/a
Syphilis Latent (tertiary) and seropositivity without lesions	Standard	n/a	n/a
Syphilis Skin and mucous membrane, including congenital, primary, Secondary	Standard	n/a	n/a

T

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
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Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Tapeworm disease <i>Hymenolepis nana</i>	Standard	n/a	Not transmitted from person to person.
Tapeworm disease <i>Taenia solium</i> (pork)	Standard	n/a	n/a
Tapeworm disease Other	Standard	n/a	n/a
Tetanus	Standard	n/a	Not transmitted from person to person.
Tinea (e.g., dermatophytosis, dermatomycosis, ringworm)	Standard	n/a	Rare episodes of person-to-person transmission.
Toxoplasmosis	Standard	n/a	Transmission from person to person is rare; vertical transmission from mother to child, transmission through organs and blood transfusion rare.
Toxic shock syndrome (staphylococcal disease, streptococcal disease)	Standard	n/a	Droplet Precautions for the first 24 hours after implementation of antibiotic therapy if Group A <i>Streptococcus</i> is a likely etiology.
Trachoma, acute	Standard	n/a	n/a
Transmissible spongiform encephalopathy (see Creutzfeldt-Jacob disease, CJD, vCJD)	n/a	n/a	n/a
Trench mouth (Vincent's angina)	Standard	n/a	n/a
Trichinosis	Standard	n/a	n/a
Trichomoniasis	Standard	n/a	n/a
Trichuriasis (whipworm disease)	Standard	n/a	n/a
Tuberculosis (<i>M. tuberculosis</i>) Extrapulmonary, draining lesion	Airborne + Contact + Standard	n/a	Discontinue precautions only when patient is improving clinically, and drainage has ceased or there are 3 consecutive negative cultures of continued drainage [1025, 1026]. Examine for evidence of active pulmonary tuberculosis.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Tuberculosis (<i>M. tuberculosis</i>) Extrapulmonary, no draining lesion, Meningitis	Standard	n/a	Examine for evidence of pulmonary tuberculosis. For infants and children, use Airborne until active pulmonary tuberculosis in visiting family members ruled out. [42]
Tuberculosis (<i>M. tuberculosis</i>) Pulmonary or laryngeal disease, confirmed	Airborne + Standard	n/a	Discontinue precautions only when patient on effective therapy is improving clinically and has 3 consecutive sputum smears negative for acid-fast bacilli collected on separate days (MMWR 2005; 54: RR-17 Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005) (accessed September 2018) [12].
Tuberculosis (<i>M. tuberculosis</i>) Pulmonary or laryngeal disease, suspected	Airborne + Standard	n/a	Discontinue precautions only when the likelihood of infectious TB disease is deemed negligible, and either 1. there is another diagnosis that explains the clinical syndrome, or 2. the results of 3 sputum smears for AFB are negative. Each of the 3 sputum specimens should be collected 8 -24 hours apart, and at least 1 should be an early morning specimen.
Tuberculosis (<i>M. tuberculosis</i>) Skin-test positive with no evidence of current active disease	Standard	n/a	n/a
Tularemia Draining lesion	Standard	n/a	Not transmitted from person to person.
Tularemia Pulmonary	Standard	n/a	Not transmitted from person to person.
Typhoid (<i>Salmonella typhi</i>) fever (see Gastroenteritis)	n/a	n/a	n/a
Typhus <i>Rickettsia prowazekii</i> (Epidemic or Louse-borne Typhus)	Standard	n/a	Transmitted from person to person through close personal or clothing contact.
Typhus <i>Rickettsia typhi</i>	Standard	n/a	Not transmitted from person to person.


U


Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Urinary tract infection (including pyelonephritis), with or without urinary catheter	Standard	n/a	n/a

V

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Vaccinia	n/a	n/a	Only vaccinated HCWs have contact with active vaccination sites and care for persons with adverse vaccinia events; if unvaccinated, only HCWs without contraindications to vaccine may provide care.
Vaccinia Vaccination site care (including autoinoculated areas)	Standard	n/a	Vaccination recommended for vaccinators; for newly vaccinated HCWs: semi-permeable dressing over gauze until scab separates, with dressing change as fluid accumulates, ~3-5 days; gloves, hand hygiene for dressing change; vaccinated HCW or HCW without contraindication to vaccine for dressing changes. [205, 221, 225].
Vaccinia (adverse events following vaccination) Eczema vaccinatum	Contact + Standard	Until lesions dry and crusted, scabs separated	For contact with virus-containing lesions and exudative material.
Vaccinia (adverse events following vaccination) Fetal vaccinia	Contact + Standard	Until lesions dry and crusted, scabs separated	For contact with virus-containing lesions and exudative material.
Vaccinia (adverse events following vaccination) Generalized vaccinia	Contact + Standard	Until lesions dry and crusted, scabs separated	For contact with virus-containing lesions and exudative material.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Vaccinia (adverse events following vaccination) Progressive vaccinia	Contact + Standard	Until lesions dry and crusted, scabs separated	For contact with virus-containing lesions and exudative material.
Vaccinia (adverse events following vaccination) Postvaccinia encephalitis	Standard	n/a	n/a
Vaccinia (adverse events following vaccination) Blepharitis or conjunctivitis	Contact + Standard	n/a	Use Contact Precautions if there is copious drainage.
Vaccinia (adverse events following vaccination) Iritis or keratitis	Standard	n/a	n/a
Vaccinia (adverse events following vaccination) Vaccinia-associated erythema multiforme (Stevens Johnson Syndrome)	Standard	n/a	Not an infectious condition.
Vaccinia (adverse events following vaccination) Secondary bacterial infection (e.g., <i>S. aureus</i> , group A beta hemolytic <i>Streptococcus</i>)	Standard + Contact	n/a	Follow organism-specific (strep, staph most frequent) recommendations and consider magnitude of drainage.

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Varicella Zoster	Airborne + Contact + Standard	Until lesions dry and crusted	<p>Susceptible HCWs should not enter room if immune caregivers are available; no recommendation for face protection of immune HCWs; no recommendation for type of protection (i.e., surgical mask or respirator) for susceptible HCWs.</p> <p>In immunocompromised host with varicella pneumonia, prolong duration of precautions for duration of illness.</p> <p>Varicella Post-exposure Prophylaxis Update [April 2019]</p> <p> Update: Postexposure prophylaxis: provide postexposure vaccine ASAP but within 120 hours; for susceptible exposed persons for whom vaccine is contraindicated (immunocompromised persons, pregnant women, newborns whose mother’s varicella onset is <5 days before delivery or within 48 hours after delivery) provide varicella zoster immune globulin as soon as possible after exposure and within 10 days.</p> <p>Use Airborne for exposed susceptible persons and exclude exposed susceptible healthcare workers beginning 8 days after first exposure until 21 days after last exposure or 28 if received varicella zoster immune globulin, regardless of postexposure vaccination. [1036]</p>
Variola (see Smallpox)	n/a	n/a	n/a
<i>Vibrio parahaemolyticus</i> (see Gastroenteritis)	n/a	n/a	n/a
Vincent’s angina (trench mouth)	Standard	n/a	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Viral hemorrhagic fevers due to Lassa, Ebola, Marburg, Crimean-Congo fever viruses	Droplet + Contact + Standard	Duration of illness	<p>Ebola Virus Disease for Healthcare Workers [2014]  Update: Recommendations for healthcare workers can be found at Ebola For Clinicians. (accessed September 2018).</p> <p>Single-patient room preferred. Emphasize:</p> <ol style="list-style-type: none"> 1. use of sharps safety devices and safe work practices, 2. hand hygiene; 3. barrier protection against blood and body fluids upon entry into room (single gloves and fluid-resistant or impermeable gown, face/eye protection with masks, goggles or face shields); and 4. appropriate waste handling. <p>Use N95 or higher respirators when performing aerosol-generating procedures. Largest viral load in final stages of illness when hemorrhage may occur; additional PPE, including double gloves, leg and shoe coverings may be used, especially in resource-limited settings where options for cleaning and laundry are limited. Notify public health officials immediately if Ebola is suspected [212, 314, 740, 772]. Also see Table 3C for Ebola as a bioterrorism agent.</p>
Viral respiratory diseases (not covered elsewhere) Adults	Standard	n/a	n/a
Viral respiratory diseases (not covered elsewhere) Infants and young children (see Respiratory infectious disease, acute)	n/a	n/a	n/a

W

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Whooping cough (see Pertussis)	n/a	n/a	n/a

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Wound infections Major	Contact + Standard	Duration of illness	Until drainage stops or can be contained by dressing.
Wound infections Minor or limited	Standard	n/a	If dressing covers and contains drainage.

Y

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
<i>Yersinia enterocolitica</i> Gastroenteritis (see Gastroenteritis)	n/a	n/a	n/a

Z

Infection/Condition	Type of Precaution	Duration of Precaution	Precautions/Comments
Zoster (varicella-zoster) (see Herpes Zoster)	n/a	n/a	n/a
Zygomycosis (phycomycosis, mucormycosis)	Standard	n/a	Not transmitted person-to-person.

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