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|  CONTACT PRECAUTIONS | NO.  |
| Purpose: To provide instruction guidelines for contact precautions when providing resident care.Statement: This facility will adhere to the Center for Disease Control infection guidelines. Contact Precautions reduce the risk of transmission of microorganisms by direct or indirect contact.  Direct- contact transmission involves skin-to-skin contact and physical transfer of microorganisms to a susceptible host from an infected or colonized person, such as occurs when staff members perform resident care activities that require physical contact.Indirect-contact transmission involves contact of a susceptible host with a contaminated intermediate object, usually inanimate, in the resident’s environment.See the policy and procedure for Standard Precautions in this manual.Procedure:1. Examples of illnesses that require Contact Precautions include:
2. Gastrointestinal, respiratory, skin or wound infections, or colonization with multidrug-resistant bacteria judged by the Infection Control Nurse, based on current state or national recommendations, to be of special clinical and epidemiologic significance.
3. Enteric infections with a low infectious dose or prolonged environmental survival, including:
4. Clostridium difficile
5. For diapered or incontinent residents: enterohemorrhagic Escherichia coli 0157:H7, Shigella, hepatitis A, or rotavirus.
6. Respiratory syncytial virus, parainfluenza virus, or pediatric enteroviral infections.
7. Skin infections that are highly contagious or that may occur on dry skin, including:
8. Diphtheria (cutaneous)
9. Herpes simplex virus (Neonatal or mucocutaneous)
10. Impetigo
11. Major (noncontained) abscesses, cellulitis, or decubiti
12. Pediculosis
13. Scabies
14. Staphylococcal furunculosis in infants and young children
15. Zoster (disseminated or in the immunocompromised host)
16. Viral/hemorrhagic conjunctivitis
17. Viral hemorrhagic infections (Ebola, Lassa or Marburg)
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| Approved: | Effective Date: | Revision Date: | Change No.: | Page: 1 of 1 |