
	The Johns Hopkins Hospital	<i>Policy Number</i>	IFC023
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	ISOLATION PRECAUTIONS (INPATIENT) APPENDIX IV: CLINICAL SYNDROMES WARRANTING EMPIRIC ISOLATION PRECAUTIONS IN ADDITION TO STANDARD PRECAUTIONS	<i>Supersedes</i>	N/A

CLINICAL SYNDROMES WARRANTING EMPIRIC ISOLATION PRECAUTIONS IN ADDITION TO STANDARD PRECAUTIONS
Adapted from Siegel JD, Rhinehart E, Jackson M, Chiarello L, and the Healthcare Infection Control Practices Advisory Committee, 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings, June 2007

Clinical Syndrome or Condition	Potential Pathogens	Empiric Precautions (Always includes Standard Precautions)
Diarrhea		
Acute diarrhea with a likely infectious cause in an incontinent or diapered patient	Enteric pathogens including <i>E. coli o157:H7</i> , <i>Shigella spp.</i> , hepatitis A virus, rotavirus, <i>C. difficile</i> , Noroviruses	Contact Precautions (pediatric and adult)
Meningitis	<i>Neisseria meningitidis</i>	Droplet Precautions for the first 24 hrs of antimicrobial therapy; mask and face protection for intubation
	Enteroviruses	Contact precautions for infants and children
	<i>M. tuberculosis</i>	Airborne precautions if pulmonary infiltrate Airborne precautions plus Contact Precautions if potentially infectious draining body fluid present
Rash or Exanthems, Generalized, Etiology Unknown		
Petechial/ecchymotic with fever (general)	<i>Neisseria meningitidis</i>	Droplet precautions for first 24 hours of antimicrobial therapy
History of travel to an area with an ongoing outbreak of VHF in the 10 days before onset of fever	Ebola, Lassa, Marburg viruses	Airborne Precautions plus Contact Precautions, with face/eye protection, emphasizing safety sharps and barrier precautions when blood exposure likely.
Maculopapular with cough, coryza and fever	Rubeola (measles) virus	Airborne precautions
Respiratory Infections		
Cough/fever/upper lobe pulmonary infiltrate in an HIV-negative patient or a patient at low risk for HIV	<i>M. tuberculosis</i> , Respiratory viruses, <i>S. pneumoniae</i> , <i>S. aureus</i> (MSSA or MRSA)	Airborne Precautions plus Contact Precautions
Cough/fever/pulmonary infiltrate in any lung location in an HIV infected patient or a patient at high risk for HIV (Intravenous drug use, homeless, incarcerated)	<i>M. tuberculosis</i> , Respiratory viruses, <i>S. pneumoniae</i> , <i>S. aureus</i> (MSSA or MRSA)	Airborne Precautions plus Contact Precautions Use eye/face protection if aerosol generating procedure performed or contact with respiratory secretions anticipated. If tuberculosis is unlikely and there are no AIIRs and/or respirators available, use Droplet Precautions instead of Airborne precautions
Cough/fever/pulmonary infiltrate in any lung location in patient with a	<i>M. tuberculosis</i> , severe acute respiratory syndrome virus	Airborne plus Contact Precautions plus eye protection

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history of recent travel (10-21 days) to countries with active outbreaks of SARS, avian influenza	(SARS-CoV), avian influenza	
Respiratory infections, particularly bronchiolitis and pneumonia, in infants and young children	Respiratory syncytial virus, parainfluenza virus, adenovirus, influenza virus, Human metapneumonvirus	Contact plus Droplet precautions
Skin or Wound Infection		
Abscess or draining wound that cannot be covered	<i>S. aureus</i> (MSSA or MRSA), group A streptococcus	Contact Precautions