

WAHT-INF-045 Appendix 3

[Appendix 3](#) – A-Z of Infectious Diseases

The clinical judgement and expertise of the IPCT should be sought for novel, unusual or an increase in cases of known or suspected infectious pathogens/diseases. This table is for infection prevention and control measures i.e. to minimise the risk of cross-infection to self and others when providing direct patient care. Priority scores range from 1 (lowest priority) – 10 (highest priority). Scores of 10 require mandatory isolation.

FRSM – Fluid Resistant Surgical Facemask

FFP3 – Filtering Facepiece level 3

Suspected/ Confirmed	Disease	Notifiable under Health Protection (Notification) Regulations 2010 by registered medical practitioners in England and Wales	TBP required	Priority Score	Optimal patient placement	RPE required	Line n Bag	Comments
Pathogen							RAG Clean	
							Bod y Bag	

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<i>Acinetobacter baumannii</i>	Pneumonia, bacteraemia, skin and soft tissue infections	No	Contact	1	Single en-suite room in very high-risk areas	No requirement	Red	
							Red	
							No	
Adenovirus	Conjunctivitis	No	Contact	3	Single en-suite room in very high-risk areas	No requirement	White	
							Amb er	
							No	
	Upper+/- lower respiratory tract infection	No	Contact/Drop let	5	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	
							Amb er	

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							No	
	Gastroenteritis	No	Contact (faecal/oral)	5	Single en-suite room	No requirement	White	May step down from single room when patient has been asymptomatic of diarrhoea for 24 hours
							Amb er	
							No	
<i>Bacillus anthracis</i>	Injection, inhalation, gastrointestinal or cutaneous Anthrax	Yes (Notifiable ID) & Yes (Causative Agent)	Contact/Airb orne	4	Single en-suite room	No requirement	Red	
							Amb er	
							Yes	
<i>Bacillus cereus</i>	Gastroenteritis, sepsis, pneumonia, endocarditis, central nervous	Yes (Causative agent) (if related to food poisoning)	Contact/Food borne	6	Single en-suite room	No requirement	Red	May step down from single room when patient has been asymptomatic
							Amb er	
							Yes	

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	system, and ocular infections							of diarrhoea for 48 hours
Body lice	Body lice infestation/Pedic ulosis corporis/Pediculo sis vestimenti	No	Contact	2	Single en-suite room	No requirement	Red	While undergoing treatment, individuals should not have prolonged physical contact with others or share bedding or other linen.
							Amb er	
							No	
<i>Bordetella pertussis</i>	Whooping cough	Yes (Notifiable ID), Yes (Causative Agent)	Droplet	7	Single en-suite room – for 3 weeks after onset of	FRSM for routine care. FFP3/hood for AGPs*	Red	*until patient on appropriate antimicrobial treatment (>7 days). Keep infectious patients away
							Red	
							No	

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					paroxysmal cough OR*			from non-immunised infants (<5 months of age) as they are at highest risk of complications.
<i>Borrelia burgdorferi</i>	Lyme Disease	Yes (Causative Agent)	Zoonotic	1	Main ward bed	No requirement	White	Not transmissible from person-to-person
							Green	
							No	
<i>Burkholderia</i>	Burkholderia cepacia complex/Burkholderia cepacia	No	Contact	3	Single en-suite room is preferred*	No requirement	White	*usually only required in specific circumstances e.g. patients with B.cepacia complex from other cystic
							Green	
							No	

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								fibrosis patients in an inpatient setting
<i>Campylobacter jejuni</i> and <i>Campylobacter coli</i>	Gastroenteritis	Yes (Causative Agent)	Contact/Food borne	3	Single en-suite room	No requirement	Red	May step down from single room when patient has been asymptomatic of diarrhoea for 48 hours
							Amb er	
							No	
<i>Candida auris</i>	Ear, wound and blood stream infections	No	Contact	2	Single en-suite room in very high-risk areas	No requirement	Whit e	May step down from a single room when no longer colonised or infected
							Amb er	
							No	
Carbapenemas e producing	Colonisation, device associated		Contact	10			Red	*Either swab positive or as

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Enterobacteria ceae (CPE)*	infections, urinary tract infection, catheter associated bacteraemia	Yes (Causative Agent)			Single en-suite room	No requirement		per clinical risk assessment criteria.
							Red	Priority score increases depending on the location of the patient e.g. ICU or body site e.g. Catheter
							No	
<i>Chlamydia pneumoniae</i>	Pneumonia	No	Droplet	7	Single en-suite room in very high-risk areas	FRSM for routine care. FFP3/hood for AGPs.	White	*Amber clean in very high- risk areas
							Green*	
							No	

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<i>Chlamydophila psittaci</i>	Psittacosis	No	Airborne	1	Single en-suite room **if requiring AGPs	FFP3/hood for AGPs.	White	Transmission caused by inhalation of organism via bird droppings/secretions/
							Green	
							No	
<i>Clostridioides difficile</i>	<i>Clostridioides difficile</i> infection (CDI), diarrhoea	No	Contact	8	Single en-suite room	No requirement	Red	Isolate until symptom free for 48hrs and Type 1-4 stool passed
							Red	
							No	
Coronavirus	Severe Acute Respiratory Syndrome (SARS)*	Yes (Notifiable ID)	Droplet/Airborne	10	Single en-suite negative pressure room	FRSM for routine care. FFP3/hood for AGPs.	Red	*Transfer to a regional infectious disease unit.
	COVID-19 (SARS CoV-2)	Yes (Notifiable ID)	Droplet/Airborne		Single en-suite room		Ambler	Refer to the IPCT for latest

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								guidance on stepdown
	Middle Eastern Respiratory Syndrome (MERS - CoV)*	No	Contact/Drop let		Single en-suite negative pressure room		Yes	*Transfer to a regional infectious disease unit.
<i>Corynebacteriu m diphtheria</i> or <i>Corynebacteriu m ulcerans</i>	Diphtheria – cutaneous	Yes (Notifiable ID) & Yes (Causative Agent)	Contact	5	Single en-suite room	No requirement if cutaneous	Whit e	Continue isolation until 2 cultures from the nose and throat (or skin lesions if cutaneous diphtheria) taken at least 24 hours apart and more than 24 hours after completing
	Diphtheria - pharyngeal (toxigenic strains)	Yes (Notifiable ID) & Yes (Causative Agent)	Contact/ Droplet			FRSM for routine care. FFP3/hood for AGPs (if pharyngeal)	Amb er	
							Yes	

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								antibiotics are negative for toxigenic C. diphtheriae, C. ulcerans
<i>Conjunctivitis (Bacterial/Viral)</i>	Conjunctivitis	No	Contact	1	Single en-suite room	No	White	Isolate for the duration of symptoms
							Green	
							No	
<i>Coxsackie virus</i>	Hand Foot and Mouth	No	Contact/Drop let	1	Single en-suite room	No requirement	Red	Isolate until symptoms resolve.
							Green	
							No	
Creutzfeldt-Jakob Disease	Creutzfeldt-Jakob Disease (CJD)	No		0	N/A	No requirement	White	See CJD protocol for

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(CJD) associated prions			Contact (Blood/Body Fluids)				Green	further information and decontaminati on of equipment
							Yes	
Croup	Croup	No	Droplet	9	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	
							Amb er	
							No	
<i>Cryptosporidiu m</i>	Cryptosporidosis (gastroenteritis)	Yes (Causative Agent)	Contact (faecal/oral)	1	Single en-suite room	No requirement	Red	Remain in isolation for duration of illness and have been asymptomatic of diarrhoea for 48 hours
							Red	
							No	

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Cytomegalovirus (CMV)							White	Pregnant staff are able to nurse these patients using standard precautions.
Perinatal		No	Contact	4	Single en-suite room	No requirement	Amber	
							No	
<i>Entamoeba histolytica</i>	Dysentery	Yes (Causative Agent)	Contact	6	Single en-suite room	No requirement	Red	Remain in isolation until 3 negative stool samples.
							Red	
							Yes	
Enterovirus D68	Mild to moderate upper respiratory tract infections, can rarely cause acute flaccid myelitis (AFM)	No	Droplet	5	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	Remain in isolation for duration of illness and 48 hours after cessation of symptoms including fever
							Amber	
							No	

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Epstein-Barr virus	Glandular fever (infectious mononucleosis)	No	Contact	N/A	N/A	No requirement	White	Very close contact required for transmission. Isolation is unnecessary
							Green	
							No	
<i>Escherichia coli</i> (including <i>E.coli</i> O157 and Shiga toxin-producing <i>E.coli</i>)	Urinary tract infections, gastrointestinal infection, bacteraemia, haemolytic uremic syndrome, thrombotic thrombocytopenic purpura	Yes (Causative Agent)	Contact (faecal/oral)	4-8*	Single en-suite room	No requirement	Red	Remain in isolation for duration of illness, until 48 hours clear of diarrhoea <u>AND</u> microbiologically clear. NB: prolonged excretion in faeces.
							Red	*Score = 8 if <i>E.coli</i> O157
							No	

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Extended-Spectrum Beta-Lactamase (ESBLs)	ESBL urinary tract infection, pneumonia, blood stream infections	No	Contact (faecal/oral)	1-3*	Single en-suite room	FFP3 or Hood for AGPs only if pneumonia	Red	*Score = 3 if patient is incontinent of urine or if undergoing AGPs
							Amb er	
							No	
Fleas	Fleas	No	Contact	2	Single en-suite room	No requirement	Red	To remain isolated until flea infestation removed. Treat clothes and linen as infected.
							Green	
							No	
Gastrointestinal infections (including undiagnosed)	Gastroenteritis	No	Contact	8	Single en-suite room	FRSM if vomiting is present	Red	Complete rapid D&V risk assessment and obtain pathway.

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diarrhoea & vomiting)							Red/ Amb er*	Send stool samples appropriately.
							No	*Amber clean only if all results have returned negative for infectious diarrhoea
<i>Giardia lamblia</i>	Giardiasis	Yes (Causative Agent)	Contact (faecal/oral)	4	Single en-suite room	No requirement	Red	Remain in isolation for duration of illness, until 48 hours clear of diarrhoea AND microbiologically clear. NB: prolonged
							Red	
							No	

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								excretion in faeces.
<i>Haemophilus influenzae</i> (Type b)	Epiglottitis	Yes (Causative Agent)	Droplet	9	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs*	White	*Until patient has been established on appropriate antimicrobial treatment (>48 hours)
	Meningitis, pneumonia, septicaemia	Yes (Causative Agent)					Amb	
							No	
Head Lice	Head Lice	No	Contact	N/A	N/A	No requirement	White	In the event patient heavily infested or lice are resistant to treatment, isolate in a single room.
							Green	
							No	
Hepatitis A virus	Hepatitis, Gastroenteritis	Yes (Notifiable ID) & Yes (Causative Agent)	Contact (faecal/oral)	2	Single en-suite room	FRSM if vomiting is present	Red	Isolate 1 week from onset of jaundice OR 1 week from
							Red	
							No	

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								onset of symptoms if no history of jaundice
Hepatitis B, C & D virus	Hepatitis	Yes (Notifiable ID) & Yes (Causative Agent)	Contact (Blood/Body Fluids)	N/A	N/A unless uncontrolled bleeding	No requirement	Red if soiled	Hazard label specimens.
							Ambler	Prudent sharp safety.
							Yes	
Hepatitis E virus	Hepatitis	Yes (Notifiable ID) & Yes (Causative Agent)	Contact (faecal/oral)	N/A	N/A	No requirement	White	During the first 2 weeks of illness, pregnant staff should avoid nursing these patients and those with HEV should avoid
							Green	
							No	

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								close contact with patients with chronic liver disease
Herpes simplex (if extensive or in the immunocompromised)		No	Contact	4	Single en-suite room to protect susceptible contacts	No requirement	White	May de-isolate when lesions have stopped discharging
							Green	
							No	
Herpes zoster (Shingles) (varicella-zoster)	Shingles (vesicle fluid)	Yes (Causative Agent)	Contact	5	Single en-suite room (<i>if lesions cannot be covered</i>)	No requirement	White	Should be nursed by immune staff only.
							Green	Non-immune visitors should be warned of the risks.

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								Should not be nursed by pregnant staff.
	Shingles (lesions in the respiratory tract)	Yes (Causative Agent)	Droplet/	5	Single en-suite negative pressure room	FRSM for routine care. FFP3/hood for AGPs.	No	
			Airborne					
Human Immunodeficiency Virus (HIV)	AIDS	No	Standard	N/A	N/A unless uncontrollable bleeding	No requirement	Red if soiled	Hazard label specimens.
							Amber	Prudent sharps safety
							Yes	
		No	Contact/Droplet	4			Red	To remain in isolation whilst symptomatic.
							Red	

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Human Metapneumovirus	Human Metapneumoviruses				Single en-suite room	As per Standard Precautions	No	Particular caution should be paid to those paediatric and immunocompromised patients.
Influenza virus (Endemic/Pandemic strains)	Influenza	Yes (Causative Agent)	Droplet	8	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	Red	Isolate until patient has finished 5 days of treatment.
							Ambler	Liaise with IPT if the patient is immunocompromised.
							Yes	
<i>Legionella pneumophila</i>			Standard/Air borne	N/A	N/A	No requirement	White	Not directly transmitted

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	Legionnaire's Disease (Legionellosis)	Yes (Notifiable ID), Yes (Causative Agent)	(environmental)				Green	person-to-person
							No	
<i>Leptospira</i>	Weil's Disease	Yes (Causative Agent)	Contact	N/A	N/A	No requirement	White	Not directly transmitted person-to-person
(Leptospirosis)							Ambler	
							Yes	
<i>Listeria monocytogenes</i>	Listeriosis	Yes (Causative Agent)	Contact	2	Single en-suite room in very high-risk areas	No requirement	Red	
							Ambler	
							No	
Measles virus	Measles (rubeola)	Yes (Notifiable ID)	Droplet/	10	Single en-suite negative	FFP3 or Hood for routine	Red	Isolate for 5 days from onset of the
			Airborne				Red	

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					pressure room	care and AGPs.	No	rask. Immune staff only to nurse the patient. May cause severe illness in the immunosuppressed.
Meningitis (viral) e.g. enterovirus, coxsackievirus, echovirus	Meningitis		Contact	7	Single en-suite room	No requirement	White	To remain in isolation for length of acute illness
	(If of unknown origin – see advice under <i>Neisseria meningitidis</i>)	No					Amb er	
							Yes	

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Meticillin resistant <i>Staphylococcus aureus</i> (MRSA) – either swab positive or as per clinical risk assessment criteria	Colonisation, skin and wound infections, endocarditis, pneumonia, osteomyelitis, urinary tract infections and bacteraemia	No	Contact	5-8 (depending on ward area)	Single en-suite room in very high-risk areas or surgical areas	FFP3/hood for AGPs (only if pneumonia)	Red	To remain in isolation until 3 negative screens obtained 48 hours apart including chronic wounds.
							Amb er/R ed	Red clean if patient has exfoliating skin condition/wound exudate/high-risk area.
							No	
Mpox Virus	Mpox (Monkeypox)		Contact/Airborne	10			Red	Isolate from onset of symptoms until
							Red	

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		Yes (Notifiable ID), Yes (Causative Agent)			Single en-suite room	As per Standard Precautions	No	scabs have crusted over.
Mumps virus	Mumps (infectious parotitis)	Yes (Notifiable ID), Yes (Causative Agent)	Droplet	7	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	Contact IPT.
							Ambler	Remain in isolation until 5 days after parotid swelling.
							No	
<i>Mycobacterium tuberculosis</i> complex	Extrapulmonary Tuberculosis	Yes (Notifiable ID), Yes (Causative Agent)	Contact	6	Single en-suite room	FFP3/Hood for AGPs	White	
							Ambler	
							Yes	
			Airborne	10	Single en-suite	FFP3/Hood for AGPs and	Red	Remain in isolation until

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	Pulmonary or laryngeal disease Tuberculosis	Yes (Notifiable ID), Yes (Causative Agent)			negative pressure room	always if the patient has MDR or XDR TB.		completion of 2 weeks appropriate antimicrobial therapy.
							Red	Patient should wear a surgical mask if attending other departments.
							Yes	
<i>Mycoplasma pneumoniae</i>	Pneumonia	No	Droplet	4	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	
							Amber	
							No	

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<i>Neisseria meningitidis</i>	Meningitis – meningococcal (or presentation of clinical meningitis of unknown origin), septicaemia	Yes (Causative Agent)	Droplet	7	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs*	White	Contact IPT immediately.
							Ambler	*until patient has been established on appropriate antimicrobial treatment (>48 hours)
							Yes	
Nontuberculous mycobacteria (NTM)	Mycobacteriosis/ Mycobacterium abscessus infection	No	Contact/Droplet	1	Based on Clinical Judgement*		White	*unless cystic fibrosis patients within the ward area in which case a single-room is advised
							Green	
							No	
Norovirus	Winter vomiting disease	No	Contact/Droplet	8	Single en-suite room	Fluid resistant surgical mask	Red	May de-isolate 48hours after last symptom
							Red	
							Yes	

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						if vomiting is present		
Panton Valentine Leukocidin (PVL) – positive <i>Staphylococcus aureus</i>	Skin and soft tissues infection, necrotising pneumonia, necrotising fasciitis, osteomyelitis, septic arthritis	No	Contact	7	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs (only if pneumonia)	Red	To remain in isolation until 3 negative screens obtained 48 hours apart including chronic wounds.
							Red	
							Yes	
Parainfluenza virus (in infants and young children)	Upper+/- lower respiratory tract infection	No	Droplet	6	Single en-suite room (Consider cohorting if insufficie	FRSM for routine care. FFP3/hood for AGPs.	Red	Single room until asymptomatic
							Amb er	
							No	

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					nt single rooms)			
Parvovirus B19	Slapped cheek syndrome/Fifth disease	No	Droplet	7	Single en-suite room*	FRSM for routine care. FFP3/hood for AGPs. (Not required if the rash +/- arthralgia has developed)	Red	*until the rash +/- arthralgia has developed.
							Red	
							No	
Parvovirus B19 CONTACT		No	Droplet	3	Single en-suite room*	No requirement	White	*if a non-immune parvovirus contact, isolate for 14 days.
							Green	
							No	
Plasmodium sp.	Malaria	Yes (Causative Agent)	Standard	1		No requirement	White	*During acute illness. May de-

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					Single en-suite room*		Green	isolate thereafter.
							No	
Pneumocystis jirovecii	Pneumocystis pneumonia	No	Droplet/Airborne	5	Single en-suite room*	As per Standard Precautions	Red	*for patients in high-risk settings until resolution of symptoms or discharge
							Amb	
							No	
Poliovirus	Polio/Poliomyelitis	Yes (Causative Agent)	Droplet/Contact	4	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	Red	
							Red/UV light	
							No	
<i>Pseudomonas aeruginosa</i>	Pneumonia, bacteraemia, wound or surgical	No	Droplet/Contact	1	Single en-suite room in	No requirement normally.	White	

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	site infections, catheter- associated urinary tract infections, conjunctivitis in neonates				very high-risk areas	FFP3/hood for AGPs (if highly resistant).	Amb er (if highl y resis tant)	
							No	
Respiratory syncytial virus (RSV)	Upper +/- lower respiratory tract infection	No	Droplet	5	Single en-suite room* (consider cohortin g if insufficie nt single rooms)	FRSM for routine care. FFP3/hood for AGPs.	Red Amb er No	*Highly transmissible on paediatric wards. Do not cohort infants under 3 months or babies with underlying cardiac problems or immunocompr omised. Adults and Children to

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								remain isolated for 5 days unless they remain symptomatic and/or they are known to be immunocompromised or at risk of prolonged virus-shedding.
Rickettsia prowazekii	Typhus Fever	No	Contact	5	Single en-suite room	No requirement	Red	To remain in isolation until patient is fully deloused.
							Amb er	
							Yes	
Ringworm	Ringworm	No	Contact	2		No requirement	White	*(paediatrics/neonates)

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					Single en-suite room*		Green	
							No	
Rotavirus	Gastroenteritis	No	Contact	6	Single en-suite room	No requirement	Red	Remain in isolation until asymptomatic for 48hrs and passing Type 1- 4 stool.
							Red	
							No	
Rubella virus	German Measles/Congenit al rubella syndrome (CRS)	Yes (Notifiable ID) & Yes (Causative Agent)	Droplet	7	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	Red	Isolate for 7 days prior to onset of rash and at least 4 days after onset of rash.. Exclude potentially pregnant staff who are non- immune. CRS
							Amb er	
							No	

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								affected infants can be infectious up to 1 year after birth.
Salmonella (non-typhoidal)	Salmonella gastroenteritis	Yes (Causative Agent)	Contact/Food borne	6	Single en-suite room	No requirement	Red	Remain in isolation whilst symptomatic and 48 hours after cessation of symptoms
							Red	
							Yes	
<i>Salmonella typhi</i> or <i>Salmonella paratyphi</i>	Typhoid or Paratyphoid fever (respectively)	Yes (Notifiable ID) & Yes (Causative Agent)	Contact	6	Single en-suite room	No requirement	Red	Remain in isolation whilst symptomatic and 48 hours after cessation of symptoms unless advised for longer by the local HPT.
							Red	
							Yes	

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Sarcoptes scabiei (Scabies mite)	Scabies	No	Contact	2	Single en-suite room only if “crusted” scabies	No requirement	Red	Remain in isolation until first treatment has been completed (24 hours after treatment has commenced).
			<i>long-sleeve gowns if “crusted”</i>				Amb er	
			No					
<i>Serratia marcescens</i>	Pneumonia, bacteraemia, urinary tract infections, wound infections	No	Contact	1	Single en-suite room in very high-risk areas	<i>If in sputum:</i> FRSM for routine care. FFP3/hood for AGPs	Whit e	Known outbreaks in UK NNUs.
							Red/ Amb er	Red clean in NNU
							No	Amber clean in other areas.
<i>Shigella</i>	Shigellosis/	Yes (Causative Agent)	Contact	8		No requirement	Red	Remain in isolation for duration of
	Dysentery						Red	

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					Single en-suite room		Yes	illness. Requires 3 negative stools prior to de-isolation. Inform IPT.
<i>Staphylococcus aureus</i> (Enterotoxigenic)	Gastroenteritis, scalded skin syndrome (Ritter's Disease)	No	Contact	6	Single en-suite room	No requirement	Red	Until lesions are no longer purulent and continuing to drain
							Red	
							No	
<i>Stenotrophomonas maltophilia</i>	Bacteraemia, respiratory infections, urinary tract and surgical site infections	No	Contact	1 or 10*	Single en-suite room in very high-risk areas	No requirement	White	*Priority Score =10 if co-trimoxazole resistant.
							Amber	
							No	
<i>Streptococcus pyogenes</i> (Group A)	Respiratory infection	No	Droplet	8	Single en-suite room*	FRSM for routine care.	Red	*Until established on an appropriate

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including invasive GAS)						FFP3/hood for AGPs*		antimicrobial treatment (>24hrs)
	Scarlet Fever	Yes (Notifiable ID)	Droplet	8	Single en-suite room*	No requirement		*Until established on an appropriate antimicrobial treatment (>24hrs)
	Bacteraemia, meningitis, wound infection/impetig o or infection in other normally sterile site	Yes (Notifiable ID)	Contact				Red Yes	* Impetigo - Until lesions have crusted/healed OR patient has been on appropriate antimicrobial treatment (>48 hrs)
		No		6			Red	

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<i>Streptococcus</i> sp (Groups C & G)	Bacteraemia, endocarditis, bone and joint infections		Contact/Drop let		Single en-suite room	FRSM for routine care*. FFP3/hood for AGPs*	Amb er	*if patient is coughing or sneezing
							No	
<i>Streptococcus pneumoniae</i>	Pneumonia – penicillin resistant	Yes (Notifiable ID)	Droplet	6	Single en-suite room*	FRSM for routine care. FFP3/hood for AGPs*	Red	*Until established on an appropriate antimicrobial treatment
	Bacteraemia, meningitis, wound infection or infection in other normally sterile site	Yes (Notifiable ID)	Contact	2	Single en-suite room*	No requirement	Amb er	Susceptibility increased by underlying lung disease, immunosuppre ssion, the very young/elderly
							No	
	Chickenpox			10	Single en-suite	FFP3/Hood for routine	Red	Limit contact to only those

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Varicella-Zoster virus		Yes (Causative Agent)	Droplet/Airborne		negative pressure room preferred until dissemination ruled out	care and AGPs.		with evidence of immunity.
							Amb	Remain in isolation until lesions are dry and no new lesions appear - usually around 5-6 days
							No	
Varicella-Zoster virus CONTACT	Chickenpox CONTACT	No	Droplet/Airborne	0-4	Single en-suite room	No requirement	White	Considered non-infectious to others until 7 days following the exposure when the patient may begin to shed the virus before symptoms
							Green	
							No	

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								begin. If non-immune to chickenpox (ie has no history of infection, or had infection <1 year of age, or if testing negative for VZV IgG, then isolate from 7-21 days post exposure.
Vancomycin Resistant Enterococcus (VRE)	Colonisation, device associated infections, urinary tract infection, catheter associated bacteraemia	No	Contact	8	Single en-suite room	No requirement	Red	
							Red	
							No	

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<i>Vibrio cholerae</i>	Cholera	Yes (Notifiable ID)	Contact	6	Single en-suite room	No requirement	Red	Contact IPT immediately.
							Amb er	Remain in isolation until 3 negative stool screens are obtained.
							No	
Viral Haemorrhagic Fevers	E.g. Ebola, Congo, Crimean, Lassa, Marburg.	Yes (Notifiable ID)	Contact/Drop let	10	Single en-suite NEGATIVE PRESSURE room*	FFP3/Hood for routine care and AGPs.	Red	Contact IPT urgently.
						See link for further guidance on PPE	Red	*Transfer to regional infectious disease unit.
							Yes (Double)	For care of the deceased, contact IPT.

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Yellow Fever	Yellow Fever	Yes (Notifiable ID)	Standard	10	Single en-suite room*	No requirement	Red	Contact IPT immediately.
							Red	Prudent sharps safety.
							Yes	Hazard label specimens. *Transfer to a regional infectious disease unit.