

### APPENDIX 4 – A to Z of Infectious Pathogens/Diseases and Aide memoire for Transmission Based Precautions (TBPs), Optimal Patient Placement and Respiratory Protective Equipment (RPE)

The clinical judgement and expertise of the IPT 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 Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
<i>Acinetobacter baumannii</i>	Pneumonia, bacteraemia, skin and soft tissue infections	Contact	1	Single en-suite room in very high-risk areas	No requirement	Red	
						Red	
						No	
Adenovirus	Upper+/- lower respiratory tract infection	Droplet	5	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	
						Amber	
	Conjunctivitis, gastroenteritis	Contact	5	Single en-suite room	No requirement	White	
<i>Bacillus anthracis</i>	Injection, inhalation, gastrointestinal or cutaneous Anthrax	Contact	4	Single en-suite room	No requirement	Red	
						Red	
						Yes	
<i>Bacillus cereus</i>	Gastroenteritis, sepsis, pneumonia, endocarditis, central nervous system, and ocular infections	Contact	6	Single en-suite room	No requirement	Red	
						Amber	
						Yes	

Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
<i>Bordetella pertussis</i>	Whooping cough	Droplet	7	Single en-suite room – for 3 weeks after onset of paroxysmal cough OR*	FRSM for routine care. FFP3/hood for AGPs*	Red	*until patient on appropriate antimicrobial treatment (>7 days)
						Red	
						No	
<i>Campylobacter jejuni</i> and <i>Campylobacter coli</i>	Gastroenteritis	Standard	1	Single en-suite room is preferred*	No requirement	Red	*Not wholly necessary as person-to-person spread is uncommon
						Amber	
						No	
<i>Candida auris</i>	Ear, wound and blood stream infections	Contact	2	Single en-suite room in very high-risk areas	No requirement	White	
						Amber	
						No	
Carbapenemase producing Enterobacteriaceae (CPE)*	Colonisation, device associated infections, urinary tract infection, catheter associated bacteraemia	Contact	10	Single en-suite room	No requirement	Red	*Either swab positive or as per clinical risk assessment criteria. Priority score increases depending on the location of the patient e.g. ICU or body site e.g. Catheter
						Red	
						No	
<i>Chlamydia pneumoniae</i>	Pneumonia	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
						Amber/ Green	
						No	
<i>Chlamydophila psittaci</i>	Psittacosis	Airborne	1	Single en-suite room **if requiring AGPs	FFP3/hood for AGPs.	White	Transmission caused by inhalation of organism via bird droppings/secretions/ feathers
						Green	
						No	

Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
<i>Clostridioides difficile</i>	<i>Clostridioides difficile</i> infection (CDI), diarrhoea	Contact	8	Single en-suite room	No requirement	Red	Isolate until symptom free for 48hrs and Type 1-4 stool passed
						Red	
						No	
Coronavirus (SARSCoV/ MersCoV)	Acute respiratory syndrome	Droplet	10	Single en-suite <b>negative pressure</b> room	FRSM for routine care. FFP3/hood for AGPs.	Red	Contact IPT immediately. Hazard label specimens *Transfer to a regional infectious disease unit.
						Red	
						Yes	
<i>Corynebacterium diphtheria</i> or <i>Corynebacterium ulcerans</i>	Diphtheria – cutaneous	Contact	5-6	Single en-suite room	No requirement if cutaneous	White	
	Diphtheria - pharyngeal (toxigenic strains)	Droplet				Amber	
						Yes	
Creutzfeldt-Jakob Disease (CJD) associated prions	Creutzfeldt-Jakob Disease (CJD)	Standard	N/A	N/A	No requirement	White	See CJD protocol for further information and decontamination of equipment
						Green	
						Yes	
Croup	Croup	Droplet	9	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	
						Amber	
						No	
<i>Cryptosporidium</i>	Cryptosporidiosis (gastroenteritis)	Contact	1	Single en-suite room	No requirement	Red	Remain in isolation for duration of illness.
						Red	
						No	

Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
Cytomegalovirus (CMV)  Perinatal		Contact	4	Single en-suite room	No requirement	White	Pregnant staff are able to nurse these patients using standard precautions.
						Amber	
						No	
<i>Entamoeba histolytica</i>	Dysentery	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)	Droplet	5	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	
						Amber	
						No	
Epstein-Barr virus	Glandular fever (infectious mononucleosis)	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	Contact	4-8*	Single en-suite room	No requirement	Red	Remain in isolation for duration of illness. NB: prolonged excretion in faeces. *Score = 8 if <i>E.coli</i> O157
						Red	
						No	

Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
Fleas	Fleas	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 diarrhoea & vomiting)	Gastroenteritis	Contact	8	Single en-suite room	FRSM if <b>vomiting is present</b>	Red	Complete rapid D&V risk assessment and obtain pathway. Send stool samples appropriately.
						Red	
						No	
<i>Giardia</i>	Giardiasis	Contact	4	Single en-suite room	No requirement	Red	
						Red	
						No	
<i>Haemophilus influenzae</i> (Type b)	Epiglottitis, meningitis, pneumonia, septicaemia	Droplet	9	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs*	White	*Until patient has been established on appropriate antimicrobial treatment
						Amber	
						No	
Head Lice	Head Lice	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	Contact	2	Single en-suite room	FRSM if <b>vomiting is present</b>	Red	Isolate 1 week from onset of jaundice OR 1 week from onset of symptoms if no history of jaundice
						Red	
						No	

Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
Hepatitis B, C & E virus	Hepatitis	Standard	N/A	N/A unless uncontrollable bleeding	No requirement	Red if soiled	Hazard label specimens. Prudent sharp safety.
						Amber	
						Yes	
Herpes simplex (if extensive or in the immunocompromised)		Contact	4	Single en-suite room <b>to protect susceptible contacts</b>	No requirement	White	May de-isolate when lesions have stopped discharging
						Green	
						No	
Herpes zoster (Shingles) (varicella-zoster)	Shingles (vesicle fluid)	Contact	5	Single en-suite room <i>(if lesions cannot be covered)</i>	No requirement	White	Should be nursed by immune staff only. Non-immune visitors should be warned of the risks. Should not be nursed by pregnant staff.
	Shingles (lesions in the respiratory tract)	Droplet/Airborne	5	Single en-suite <b>negative pressure</b> room	FRSM for routine care. FFP3/hood for AGPs.	No	
Human Immunodeficiency Virus (HIV)	AIDS	Standard	N/A	N/A unless uncontrollable bleeding	No requirement	Red if soiled	
						Amber	
						Yes	
Influenza virus (Endemic strains)	Influenza	Droplet	8	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	Red	Isolate until patient has finished 5 days of treatment. Liaise with IPT if the patient is immunocompromised.
						Amber	
						Yes	
<i>Legionella pneumophila</i>	Legionnaire's Disease (Legionellosis)	Standard	N/A	N/A	No requirement	White	Not directly transmitted person-to-person
						Green	
						No	
<i>Leptospira</i>	Weil's Disease	Contact	N/A	N/A	No	White	Not directly transmitted

**WAHT-INF-045 Appendix 1**

(Leptospirosis)					requirement	Amber	person-to-person
						Yes	

Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
<i>Listeria monocytogenes</i>	Listeriosis	Contact	2	Single en-suite room in very high-risk areas	No requirement	Red Red No	
Measles virus	Measles (rubeola)	Droplet/Airborne	10	Single en-suite <b>negative pressure</b> room	FFP3 or Hood for routine care and AGPs.	Red Red No	Immune staff only to nurse the patient. May cause severe illness in the immunosuppressed.
Meningitis (viral) e.g. enterovirus, coxsackievirus, echovirus	Meningitis (If of unknown origin – see advice under <i>Neisseria meningitidis</i> )	Contact	7	Single en-suite room	No requirement	White Amber Yes	To remain in isolation for length of acute illness
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	Contact/Droplet	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 Amber/Red No	To remain in isolation until 3 negative screens obtained 48 hours apart including chronic wounds. Red clean if patient has exfoliating skin condition/wound exudate/high-risk area.
Mumps virus	Mumps (infectious parotitis)	Droplet	7	Single en-suite room	FRSM for routine care. FFP3/hood	White Amber No	Contact IPT. Remain in isolation until 9 days after parotid

					for AGPs.		swelling.
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Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
<i>Mycobacterium tuberculosis</i> complex	Extrapulmonary Tuberculosis	Contact	6	Single en-suite room	FFP3/Hood for AGPs	White	Remain in isolation until completion of 2 weeks appropriate antimicrobial therapy. Patient should wear a surgical mask if attending other departments.
						Amber	
						Yes	
	Pulmonary or laryngeal disease Tuberculosis	Airborne	10	Single en-suite <b>negative pressure</b> room	FFP3/Hood for AGPs and always if the patient has MDR or XDR TB.	Red	
Red							
<i>Mycoplasma pneumoniae</i>	Pneumonia	Droplet	4	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	White	
						Amber	
						No	
<i>Neisseria meningitidis</i>	Meningitis – meningococcal (or presentation of clinical meningitis of unknown origin), septicaemia	Droplet	7	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs*	White	Contact IPT immediately. *until patient has been established on appropriate antimicrobial treatment
						Amber	
						Yes	
Norovirus	Winter vomiting disease	Contact/ Droplet	8	Single en-suite room	Fluid resistant surgical mask <b>if vomiting is present</b>	Red	
						Red	
						Yes	



Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
Novel coronavirus (nCoV/MersCoV/ WuhanNCov)	Severe respiratory illness with/out gastroenteritis, pneumonia	Unknown – assume Contact/Droplet until further information available	10	Single en-suite <b>negative pressure</b> room**	FFP3/Hood for routine care <b>and</b> AGPs	Red	Contact IPT immediately. **Transfer to regional infectious disease unit. For care of the deceased, contact IPT. Hazard label specimens.
						Red	
						Yes (Double)	
Panton Valentine Leukocidin (PVL) – positive <i>Staphylococcus aureus</i>	Skin and soft tissues infection, necrotising pneumonia, necrotising fasciitis, osteomyelitis, septic arthritis	Contact	7	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs (only if pneumonia)	Red	
						Red	
						Yes	
Parainfluenza virus (in infants and young children)	Upper+/- lower respiratory tract infection	Droplet	6	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	Red	
						Red	
						No	
Parvovirus B19	Slapped cheek syndrome	Droplet	7	Single en-suite room*	FRSM for routine care. FFP3/hood for AGPs. (Not required if the	Red	*until the rash +/- arthralgia has developed
						Red	
						No	

					rash +/- arthralgia has developed)		
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Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
Plasmodium sp.	Malaria	Standard	1	Single en-suite room*	No requirement	White Green No	*During acute illness. May de-isolate thereafter.
Poliovirus	Polio/ Poliomyelitis	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 site infections, catheter-associated urinary tract infections, conjunctivitis in neonates	Droplet/ Contact	1-3	Single en-suite room in very high-risk areas	No requirement normally. FFP3/hood for AGPs (if highly resistant).	White Amber (if highly resistant) No	
Respiratory syncytial virus (RSV)	Upper +/- lower respiratory tract infection	Droplet	5	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	Red Red No	Highly transmissible on paediatric wards. Do not cohort infants under 3 months or babies with underlying cardiac problems or immunocompromised
<i>Rickettsia prowazekii</i>	Typhus Fever	Contact	5	Single en-suite room	No	Red	To remain in isolation

					requirement	Amber Yes	until patient is fully deloused.
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Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
Ringworm	Ringworm	Contact	2	Single en-suite room (paediatrics/neonates)	No requirement	White Green No	
Rotavirus	Gastroenteritis	Contact	6	Single en-suite room	No requirement	Red Red No	Remain in isolation until asymptomatic for 48hrs and passing Type 1-4 stool.
Rubella virus	German Measles	Droplet	7	Single en-suite room	FRSM for routine care. FFP3/hood for AGPs.	Red Amber No	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.
<i>Salmonella typhi</i> or <i>Salmonella paratyphi</i>	Typhoid or Paratyphoid fever (respectively)	Contact	6	Single en-suite room	No requirement	Red Red Yes	Remain in isolation until culture of stool negative on 6 consecutive occasions
<i>Sarcoptes scabiei</i> (Scabies mite)	Scabies	Contact <i>long-sleeve gowns if "crusted"</i>	2	Single en-suite room <b>only</b> if "crusted" scabies	No requirement	Red Amber No	Remain in isolation until mite destroyed by appropriate treatment.
<i>Serratia marcescens</i>	Pneumonia, bacteraemia, urinary tract	Contact	1	Single en-suite room in very high-risk areas	<b>If in sputum:</b> FRSM for routine care.	White Red/Amber	Known outbreaks in UK NNUs. Red clean in NNU

**WAHT-INF-045 Appendix 1**

	infections, wound infections				FFP3/hood for AGPs	No	Amber clean in other areas.
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Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
<i>Shigella</i>	Shigellosis/ Dysentery	Contact	8	Single en-suite room	No requirement	Red	Remain in isolation for duration of illness. Requires 3 negative stools prior to de-isolation. Inform IPT.
						Red	
						Yes	
<i>Staphylococcus aureus</i> (Enterotoxigenic)	Gastroenteritis, scalded skin syndrome (Ritter's Disease)	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	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, peritonsillar abscess (quinsy), Scarlet Fever	Droplet	8	Single en-suite room*	FRSM for routine care. FFP3/hood for AGPs*	Red	*Until established on an appropriate antimicrobial treatment (>24hrs)
						Red	
						Yes	
<i>Streptococcus pyogenes</i> (Group A – including invasive)	Bacteraemia, meningitis, wound infection/ impetigo or infection in other normally sterile	Contact	8	Single en-suite room*	No requirement	Red	*Until established on an appropriate antimicrobial treatment (>24hrs)
						Red	
						Yes	

	site						
<i>Streptococcus</i> sp (Groups C & G)	Bacteraemia, endocarditis, bone and joint infections	Contact/ Droplet	6	Single en-suite room	FRSM for routine care*. FFP3/hood for AGPs*	Red	*if patient is coughing or sneezing
						Red	
						No	

Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
<i>Streptococcus pneumoniae</i>	Pneumonia – penicillin resistant	Droplet	6	Single en-suite room*	FRSM for routine care. FFP3/hood for AGPs*	Red	*Until established on an appropriate antimicrobial treatment Susceptibility increased by underlying lung disease, immunosuppression, the very young/elderly
	Bacteraemia, meningitis, wound infection or infection in other normally sterile site	Contact	2	Single en-suite room*	No requirement	Amber  No	
Varicella-Zoster virus	Chickenpox	Contact/ Airborne	10	Single en-suite <b>negative pressure</b> room preferred until dissemination ruled out	FFP3/Hood for routine care <b>and</b> AGPs.	Red Amber  No	Limit contact to only those with evidence of immunity. Remain in isolation until lesions are dry and no new lesions appear
Vancomycin Resistant Enterococcus (VRE)	Colonisation, device associated infections, urinary tract infection, catheter	Contact	8	Single en-suite room	No requirement	Red Red No	

	associated bacteraemia						
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Suspected/ Confirmed Pathogen	Disease	TBP required	Priority Score	Optimal patient placement	RPE required	Linen Bag	Comments
						RAG Clean	
						Body Bag	
<i>Vibrio cholerae</i>	Cholera	Contact	6	Single en-suite room	No requirement	Red	Contact IPT immediately. Remain in isolation until 3 negative stool screens are obtained.
						Amber	
						No	
Viral Haemorrhagic Fevers	E.g. Ebola, Congo, Crimean, Lassa, Marburg.	Contact/Droplet	10	Single en-suite NEGATIVE PRESSURE room*	FFP3/Hood for routine care <b>and</b> AGPs. See <a href="#">link</a> for further guidance on PPE	Red	Contact IPT urgently. *Transfer to regional infectious disease unit. For care of the deceased, contact IPT.
						Red	
						Yes (Double)	
Yellow Fever	Yellow Fever	Standard	10	Single en-suite room*	No requirement	Red	Contact IPT immediately. Prudent sharps safety. Hazard label specimens. *Transfer to a regional infectious disease unit.
						Red	
						Yes	

<sup>1</sup> Jeanes A and Gopal R (1999) Lewisham Isolation Priority System (LIPS). University Hospital Lewisham and Jeanes A and

Macrae B (2011) *British Journal of Nursing* 20(9):540-544

<b>Isolation and Bed Management Policy</b>		
<b>WAHT-INF-045</b>	Page 15 of 15	<b>Version 1</b>