This policy has been adopted by UNC Hospitals for its use in infection control. It is provided to you as information only.

Isolation Precautions

Attachment 4: Management of Herpes Zoster (Shingles)

The following guidelines apply to inpatient and outpatient patient care areas.

- 1. Patients with localized herpes zoster (< 3 dermatomes) require Contact Precautions.
 - a. Cover lesions with a sterile dressing and clothing if possible.
 - b. Persons not immune to chicken pox (immunity is provided by varicella vaccine or natural disease) should not enter the patient's room. If they must provide care to a patient with zoster, they must wear an N-95 respirator, gown, and gloves.
- 2. In addition to Contact Precautions, use Airborne Precautions for the following conditions.
 - a. Disseminated zoster (≥3 dermatomes)
 - b. All patients in the BMTU
 - c. Zoster in an immunocompromised patient. Immunocompromised is defined as:
 - Congenital immunodeficiency
 - Receipt of chemotherapy [considered immunosuppressed for 3 months following receipt]
 - Receipt of whole body irradiation [considered immunosuppressed for 3 months following receipt]
 - Solid organ transplant (liver, heart, lung, kidney, intestines)
 - Stem cell transplantation
 - Leukemia, lymphoma, or other malignant neoplasms affecting bone marrow or lymphatic system
 - HIV infection
 - Persons with clinical or laboratory evidence of unspecified cellular immunodeficiency (MD diagnosed immunodeficiency disease)
 - Treatment with methotrexate (>0.4 mg/kg/week), azathioprine (>3.0 mg/kg/day), or 6-mercaptopurine (>1.5 mg/kg/day) {used for treatment of rheumatoid arthritis, psoriasis, polymyositis, sarcoidosis, inflammatory bowel disease, and other conditions}. [considered immunosuppressed for 3 months]
 - Receipt of systemic steroids (IV or PO) who are receiving ≥2 mg/kg or ≥20 mg/day of prednisone or its equivalent. [considered immunosuppressed for 3 months]
 - Persons receiving recombinant human immune mediators and immune modulators, especially the antitumor necrosis factor agents: adalimumab, infliximab, and etanercept. [considered immunosuppressed for 6 months following receipt]
 - Neutropenia (WBC <1,000)
 - Burn Patients