

Remember to always use STANDARD PRECAUTIONS for all patient care. Standard precautions make use of common sense practices, including use of personal protective equipment, to protect healthcare providers from infection and prevent the spread of infection from patient to patient					
CONTACT PRECAUTIONS Common conditions for using contact precautions are: Methicillin-resistant Staphylococcus Aureus (MRSA) Vancomycin-resistant Enterococcus (VRE) Carbapenem-resistant Enterobacterales (CRE) Extended spectrum Beta lactamase Producers Gram Etative Rods (ESBL-GNR) Candida auris Other multidrug resistant organisms Scabies Uncontained/uncontrolled draining wounds/abscesses/secretions RSV	ENTERIC PRECAUTIONS Common conditions for using enteric precautions are: Clostridioides Difficile Norovirus	DROPLET PRECAUTIONS Common conditions for using droplet precautions are: B. Pertussis (Whooping cough) Influenza virus Rhinovirus Known or suspected Neisseria Meningitides (meningococcal) and H. Influeza meningitis Mumps Rubella Parvovirus B19	ENHANCED DROPLET PRECAUTIONS Common conditions for using enhanced droplet precautions are: SARS-CoV-2 COVID-19 (Non-Long-Term Care Settings)	AIRBORNE PRECAUTIONS Common conditions for using Airborne precautions are: Mycobacteria Tuberculosis (TB) Measles Airborne infection isolation Room (AIIR) Required	NEUTROPENIC PRECAUTIONS The definition of neutropenia varies from institution to institution, but neutropenia is usually defined as an absolute neutrophil count (ANC) <1500 or 1000 cells/microL and severe neutropenia as an ANC <500 cells/ microL or an ANC that is expected to decrease to <500 cells/microL over the next 48 hours. Profound neutropenia is defined as an ANC <100 cells/microL. The risk of clinically important infection rises as the neutrophil count falls below 500 cells/microL and is higher in those with a prolonged duration of neutropenia (>7 days). Revised Sept. 2026

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**DROPLET
CONTACT
PRECAUTIONS**

Common conditions for using droplet contact precautions are:

Rhinovirus if associated with copious secretions

Invasive group A streptococcal infection associated with soft tissue involvement

Adenovirus pneumonia

**AIRBORNE
CONTACT
PRECAUTIONS**

Common conditions for using airborne contact precautions are:

Chickenpox

Disseminated Shingles

Smallpox

Extrapulmonary tuberculosis (draining lesions)

Airborne infection isolation room (AIIR) required

**SPECIAL DROPLET
CONTACT
PRECAUTIONS**

Common conditions for using special droplet contact precautions are:

COVID-19

SARs

Mpox

**ENHANCED DROPLET
PRECAUTIONS**

Common conditions for using airborne contact precautions are:

SARS-CoV-2

COVID-19

(Non-Long-Term Care Settings)

**ENHANCED
BARRIER
PRECAUTIONS
LONG TERM CARE
FACILITIES ONLY**

Use gowns and gloves during high contact activities for residents with:

Infection or colonization with a novel or targeted MDRO when Contact Precautions don't apply.

Wounds and/or indwelling medical devices regardless of MDRO colonization status

Revised Sept. 2026