

**STANFORD HOSPITAL AND CLINICS
LUCILE PACKARD CHILDREN'S HOSPITAL
INFECTION CONTROL AND EPIDEMIOLOGY**

Infection Control Precautions for Suspected Bioterrorism Agent Disease

Notify Infection Control if patient admitted with any of the following diagnoses: SHC Infection Control 16167; 16163 or LPCH Infection Control 18503

Disease	Isolation Precautions	Vaccination Status	Patient Transport	Patient Placement	HAZMAT/LAB Decontamination	Cleaning/Disinfection of Equipment/Linen	Discharge Management
Bacterial Agents							
Anthrax, cutaneous, gastrointestinal	Contact Precautions Gown Gloves No mask	N/A	No Restrictions	Private Room (psycho-social reasons)	Decontaminate surface with 10% bleach solution. (Dispatch Solution available from Materials Management/Purchasing) (Do not use on patient.) Wash hands with antimicrobial soap.	Routine terminal cleaning with hospital approved disinfectant. Dedicated equipment must be disinfected prior to leaving room. Linen management as with all other patients.	Notify Infection Control when medically stable for discharge.
Anthrax, Inhalation	Standard Precautions Gloves with contact non-intact skin and mucous membranes	N/A	No Restrictions	Private Room (psycho-social reasons)	Decontaminate surface with 10% bleach solution. (Dispatch Solution available from Materials Management/Purchasing) (Do not use on patient.)	Routine terminal cleaning with hospital approved disinfectant. Linen management as with all other patients.	Notify Infection Control when medically stable for discharge.
Plague, Bubonic, Pneumonic & Septic	Respiratory & Contact Precautions Gown, Gloves, Surgical mask DC precautions after 72 hours of antibiotics, clinically improved, and	N/A	Limit movement to essential medical procedure only. Place surgical mask on patient.	Private Room	Decontaminate surface with 10% bleach solution. (Dispatch Solution available from Materials Management/Purchasing) (Do not use on patient.)	Routine terminal cleaning with hospital approved disinfectant. Dedicated equipment must be disinfected prior to leaving room. Linen management as with all other patients.	Home care providers need to be taught principles of standard precautions. Usually not discharged until 72 hours of antibiotics completed.

Disease	Isolation Precautions	Vaccination Status	Patient Transport	Patient Placement	HAZMAT/LAB Decontamination	Cleaning/Disinfection of Equipment/Linen	Discharge Management
(Continued) Plague, Bubonic, Pneumonic & Septic	sputum cultures are negative.						Pt may be discharged only when no longer considered infectious. Notify Infection Control when medically stable for discharge.
Tularemia	Standard Precautions Gloves for ulceroglandular oculoglandular.	N/A	No Restrictions	Private room (psycho-social reasons)	Decontaminate surface with 10% bleach solution. (Dispatch Solution available from Materials Management/ Purchasing) (Do not use on patient.)	Routine terminal cleaning with hospital approved disinfectant. Linen management as with all other patients.	Notify Infection Control when medically stable for discharge.
Viruses							
Smallpox	Contact, Respiratory Isolation, Only dedicated patient care equipment must be used & must be kept in patient's room.	Smallpox vaccine required for all persons exposed and anyone with close contact with smallpox case.	Limit movement to essential medical procedures only. Place surgical mask on patient.	Private room with negative air pressure. Door must be closed at all times. See attachment for appropriate room placement.	Decontaminate surface with 10% bleach solution. (Dispatch Solution available from Materials Management/ Purchasing) (Do not use on patient.)	Use hospital approved disinfectant for daily cleaning. The disinfecting solution & a supply of cleaning materials must be kept in patient's room. Floors cleaned using a single-bucket procedure of wet mopping. The contents of the bucket should be emptied into the toilet. Mop head should be removed and disposed and placed in red lined trash bag in pt room.	Not discharged from hospital until determined no longer infectious. (Disappearance of all scabs generally 14-28 days)

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(Continued) Smallpox	Gloves Gown or Tyvek suit N95 mask or PAPR Goggles Shoe covers Hair cover		Place sheet or blanket over patient completely covering body from neck to feet. Use OR hood for face.			Disposable mop head and cleaning cloths should be used. Bucket and mop handle should remain in patient's bathroom. After terminal cleaning, allow room to air 2-12 hrs. Special procedures to be provided by CDC. Chutes must not be used for linen. Linen must be carefully bagged in patient's room. Linen must be placed in a second leak proof bag & must be autoclaved before being transported to laundry facility. Waste must be autoclaved before being incinerated.	Notify Infection Control when medically stable for discharge.
Viral Hemorrhagic Fevers	Contact Respiratory Isolation Surgical mask Gloves Goggles Gown or Tyvek suit Shoe cover	N/A	Limit movement to essential medical procedures only.	Private room with negative pressure. Door must be closed at all times.	Decontaminate surface with 10% bleach solution. (Dispatch Solution available from Materials Management/ Purchasing) (Do not use on patient.)	Routine terminal cleaning with hospital approved disinfectant. Linen management as with all other patients.	Not discharged from hospital until determined no longer infectious. Home care providers taught principles of standard precautions. Notify Infection Control when medically stable for discharge.

Biological Toxins							
Botulism	Standard Precautions	N/A	No Restrictions	No Restrictions	No additional decontamination necessary.	Routine terminal cleaning with hospital approved disinfectant. Linen management as with all other patients.	No special discharge instruction necessary.
Ricin	Standard Precautions	N/A	No Restrictions	No Restrictions	No additional decontamination necessary.	Routine terminal cleaning with hospital approved disinfectant. Linen management as with all other patients.	No special discharge instruction necessary.

References:

Santa Clara County Public Health Department, Zebra Packet: Bioterrorism Information for Clinicians. 11/00
Walter Reed Army Medical Center, Bioterrorism: Infection Control Practices for Patient Management.

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