

APPENDIX I

CONTACT PRECAUTIONS AND ENVIRONMENTAL CONTROL FOR PATIENTS/RESIDENTS WITH SCABIES

A. Typical Scabies

1. Place patients/residents with typical scabies on contact precautions during the treatment period; 24 hours after application of 5% permethrin cream or 24 hours after last application of scabicides requiring more than one application.
2. HCWs must wear gloves and a long-sleeved gown for direct hands-on contact. Wash hands after removal of gloves.
3. Place bed linens, towels and clothing used by an affected person during the 3 days prior to initiation of treatment in plastic bags inside the patient's/resident's room, handled by gloved and gowned HCW without sorting, and washed in hot water. The hot cycle of the dryer should be used. Non-washable blankets and articles can be placed in a plastic bag for 3 to 7 days, dry cleaned or tumbled in a hot dryer.
4. Change all bed linens, towels and clothes daily.
5. Disinfect multiple patient/resident -use items, such as walking belts, blood pressure cuffs, stethoscopes, wheelchairs, etc., before using on other patients/residents. Discard all creams, lotions or ointments used prior to effective treatment.
6. Vacuum mattresses, upholstered furniture and carpeting. There is no need for special treatment of furniture, mattresses or rugs or fumigation of areas. General cleaning and thorough vacuuming is recommended.
7. Routine disinfection procedures are adequate.
8. Symptomatic HCW can return to work as soon as treatment is completed but should use gowns and gloves for direct patient/resident care to prevent reinfestation until all control measures for affected units/areas have been completed.



B. Atypical (Norwegian) or Crusted Scabies

(Maintain contact precautions until all treatments are completed and/or patient/resident is determined by clinician or primary care provider to be scabies free).

1. Assign patient/resident to a private room, if possible. Restrict visitors until treatment regimen completed; alternatively, require visitors to gown and glove as required for contact precautions. If resources permit, cohort employees to care for this patient/resident only (no other direct care responsibilities) until effective treatment is completed.
2. HCWs must wear gloves and a long-sleeved gown with the wrist area covered to attend to patient/resident needs, for housekeeping duties, and handling of laundry. Remove gown before leaving the room. Wash hands.
3. Bed linens, towels and clothing used by the affected persons during the 3 days prior to initiation of treatment should be placed in plastic bags inside the patient's/resident's room, handled by gloved and gowned laundry workers without sorting, and laundered in hot water. The hot cycle of the dryer should be used 50 °C (122 °F) for 10 minutes. Non-washable blankets and articles can be placed in a plastic bag for 3 to 7 days, dry cleaned or tumbled in a hot dryer for 20 minutes.
4. Change all bed linens, towels and clothes daily.
5. Blood pressure cuffs, walking belts, stethoscopes, etc. should be designated for single patient/resident use and left in the patient's/resident's room. Discard all creams, lotions or ointments used prior to effective treatment.
6. Upholstered furniture containing any cloth fabric should be removed from the room and, if necessary, replaced with plastic or vinyl furniture. Mattresses must be covered with plastic or vinyl.
7. The patient's/resident's room should be vacuumed daily with a vacuum cleaner designated for this room alone, followed by routine room cleaning and disinfection. The vacuum cleaner bag should be changed daily; removal and disposal of contaminated bags should be performed in accordance with infection control protocol.
8. The room should be terminally cleaned upon patient/resident discharge or transfer.

