



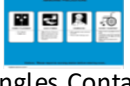


Note: See [Varicella-Zoster Virus \(VZV\); Chickenpox \(Varicella\) & Shingles \(Herpes Zoster\)](#) for complete protocol.

<b>Contact IP&amp;C</b>	<ul style="list-style-type: none"> <li>For any people presenting with Herpes Zoster (Shingles)</li> </ul>			
<b>GENERAL INFORMATION</b>				
<b>Definitions</b>	<ul style="list-style-type: none"> <li><b>Varicella Zoster Virus (VZV):</b> is a virus that can cause two different diseases:               <ul style="list-style-type: none"> <li>-Varicella zoster (chickenpox): the primary infection of VZV</li> <li>-Herpes zoster (shingles): a secondary infection due to reactivated VZV in someone who had chickenpox</li> </ul> </li> <li>**People do not “catch” shingles. A person with shingles can spread VZV to those who are not immune to chickenpox and they can develop chickenpox.               <ul style="list-style-type: none"> <li>o <b>Localized herpes zoster (shingles):</b> Shingles rash in one or two adjacent <a href="#">dermatomes</a></li> <li>o <b>Disseminated herpes zoster (shingles):</b> Shingles rash in three or more <a href="#">dermatomes</a></li> </ul> </li> </ul>			
<b>Period of Communicability</b>	<ul style="list-style-type: none"> <li><b>Disseminated OR localized shingles in immune competent person:</b> until all lesions have crusted and dried</li> <li><b>Localized shingles in immune compromised person:</b> Until all lesions have crusted and dried AND 24 hours of antiviral therapy</li> </ul>			
<b>Transmission</b>	<ul style="list-style-type: none"> <li><b>Airborne, Contact (direct/indirect):</b> exposure depends on the immune status of the person with shingles and the extent/spread of shingles (i.e., localized versus disseminated)</li> <li><b>Infective material:</b> Vesicle fluid, respiratory secretions (disseminated only)</li> </ul>			
<b>Signs &amp; Symptoms (Clinical Presentation)</b>	<ul style="list-style-type: none"> <li>The rash is usually painful, itchy or tingly. These symptoms may precede rash onset by days to weeks.</li> <li>Headache, photophobia, and malaise in the prodromal phase (before appearance of rash)</li> <li>The rash often appears on the trunk along the thoracic <a href="#">dermatome</a></li> <li>The rash does not usually cross the body's midline for localized shingles</li> </ul> <div style="display: flex; align-items: center;">  <div style="margin-left: 20px;">  <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>Note: Lesions along <a href="#">dermatomes</a></p> </div> </div> </div>			
<b>INFECTION PREVENTION &amp; CONTROL MEASURES</b>				
<b>People with Signs/Symptoms (Source Control)</b>	<ul style="list-style-type: none"> <li>Person with shingles puts on a procedure or surgical mask until severity of shingles (example, localized or disseminated) is known and in an appropriate room</li> <li>Health care workers, roommates and visitors should be immune to chickenpox</li> <li>Non-immune health care workers should not enter the room if immune caregivers are available</li> <li>If non-immune people must enter, wear gown, gloves &amp; N95 respirator for Airborne/Contact Precautions</li> <li>Immune people do not need an N95 respirator but wear gloves and a gown per Contact Precautions.</li> <li>Perform hand hygiene</li> </ul>			
<b>Additional Precautions &amp; Personal Protective Equipment (PPE)</b>	<b>AIRBORNE/CONTACT</b>  Disseminated shingles in anyone OR Localized Shingles in an Immune compromised person	<b>ROUTINE PRACTICES</b> Localized shingles (that can be covered with a dressing or clothing) in an immune competent person	<b>CONTACT</b>  Localized shingles (that cannot be covered with a dressing or clothing) in an immune competent person	<b>AIRBORNE</b>  Shingles Contact: 8 days after first contact until 21 days after last contact (28 days if given VZIG)
<b>Accommodation</b>	<p><b>Disseminated shingles in anyone or localized shingles in a immune compromised person:</b></p> <ul style="list-style-type: none"> <li>Single room with negative pressure ventilation (Airborne Infection Isolation Room (AIIR))</li> <li>Keep the door closed at all times</li> <li>Person stays in their room unless it is medically necessary to leave</li> <li>People on Airborne/Contact Precautions wear a procedure or surgical mask to leave their room</li> <li>The person may leave the room in consultation with Infection Prevention and Control</li> </ul> <p><b>Localized shingles in a immune competent person:</b></p> <ul style="list-style-type: none"> <li>Private room NOT necessary; roommates should be immune to Chickenpox</li> </ul> <p><b>Outpatient and Day Surgery Programs:</b> Staff should advise person to notify clinic if they develop shingles (and lesions not yet crusted and dried) and are scheduled to come into a health care facility.</p>			
<b>Transport</b>	<ul style="list-style-type: none"> <li>People on Airborne/Contact Precautions wear a procedure or surgical mask to leave their room</li> <li>Transport person (staff) wears gloves and a gown per Contact Precautions</li> <li>Staff wear N95 respirator if not immune to Varicella Zoster &amp; person on Airborne or Airborne/Contact Precautions</li> </ul>			
<b>Discontinuation of Additional Precautions</b>	<p><b>Disseminated shingles in an immune competent person:</b> When all lesions are crusted and dried.</p> <p><b>Localized shingles that can't be covered in an immune competent person:</b> All lesions are crusted &amp; dried.</p> <p><b>Localized shingles in an immune compromised person:</b> Until 24 hours of antiviral therapy AND all lesions are crusted and dried, then manage as localized shingles in an immune competent person.</p>			
<b>Visitor Management</b>	<ul style="list-style-type: none"> <li>Visitors who have active shingle lesions should not enter a health care facility until all lesions are crusted and dried. If lesions are localized and can be covered, consult Infection Prevention and Control to discuss visit restrictions</li> </ul>			

### Dermatome Chart

