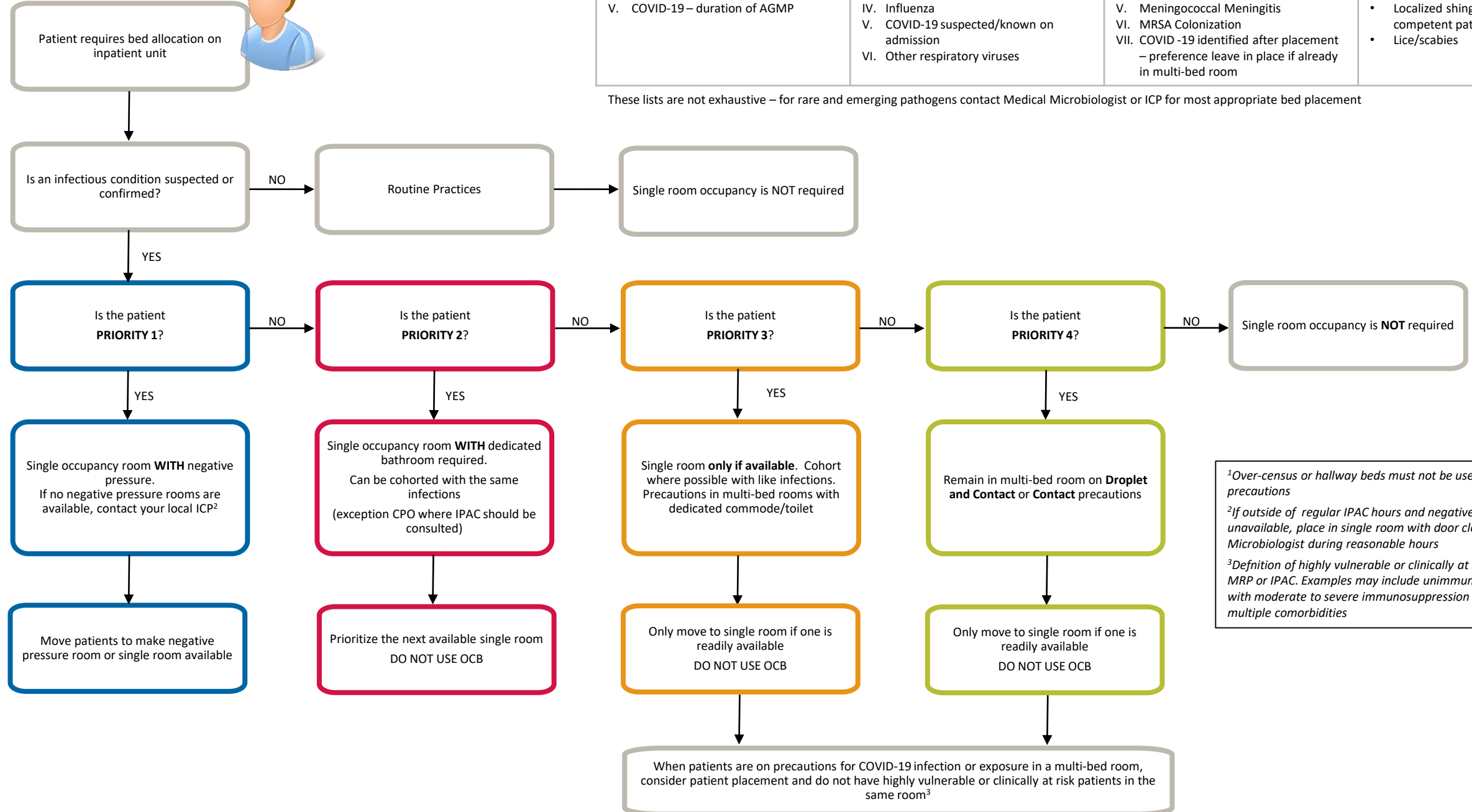




PRIORITY 1 Negative pressure	PRIORITY 2 Single room with dedicated bathroom	PRIORITY 3 Single room where possible – not in OCB ¹	PRIORITY 4 Multi-bed room if single room unavailable – not in OCB ¹
Prioritize as follows: I. TB II. Measles III. Chickenpox IV. Disseminated Shingles V. COVID-19 – duration of AGMP	Prioritize as follows: I. Carbapenemase-producing organisms (CPO Infection or Colonization) II. C. Difficile III. GI not yet diagnosed / Norovirus IV. Influenza V. COVID-19 suspected/known on admission VI. Other respiratory viruses	Prioritize as follows: I. VRE Infection II. MRSA Infection III. ESBL Infection IV. Severe Invasive Group A Strep V. Meningococcal Meningitis VI. MRSA Colonization VII. COVID-19 identified after placement – preference leave in place if already in multi-bed room	<ul style="list-style-type: none"> Bacterial Pneumonia COPD exacerbation requiring antibiotic treatment COVID-19 - exposure to confirmed case Localized shingles in immunocompetent patient Lice/scabies

These lists are not exhaustive – for rare and emerging pathogens contact Medical Microbiologist or ICP for most appropriate bed placement



¹Over-census or hallway beds must not be used for patients on additional precautions
²If outside of regular IPAC hours and negative pressure room unavailable, place in single room with door closed and contact Medical Microbiologist during reasonable hours
³Definition of highly vulnerable or clinically at risk is at discretion of the MRP or IPAC. Examples may include unimmunized against COVID, those with moderate to severe immunosuppression and frail elderly clients with multiple comorbidities