Chickenpox  
(Varicella zoster)  
An illness that requires airborne contact precautions

What is chickenpox?
Chickenpox or Varicella zoster is a virus that people usually get in childhood. In almost all cases, they are not at risk of catching the disease again.

People whose immune systems are weakened from illnesses or medicines they take can develop serious complications if they get chickenpox. Some of these are skin infections caused by bacteria (germs), swelling of the brain, and pneumonia.

A vaccine that prevents chickenpox is recommended for those who have not had the disease. The vaccine is especially recommended for children, health care workers, teachers, daycare workers, residents and staff members in institutional settings (such as nursing homes or prisons), college students, military personnel, and international travelers.

What are the symptoms?
People with chickenpox have a skin rash of blister-like lesions (sores) on their face, scalp, back, and chest. These lesions do not always appear at the same time.

How is it spread?
Chickenpox is highly contagious. It spreads:

- Through the air when an infected person coughs, talks, or sneezes.
- From direct contact with the fluid-filled lesions.

A person with chickenpox is contagious 1 to 2 days before their rash appears and until all blisters have formed scabs.

It takes from 8 to 21 days after contact with an infected person to develop chickenpox.
Questions?

Call 206-598-6122

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff is also available to help.

Healthcare Epidemiology and Infection Control: 206-598-6122

People who have been exposed to chickenpox and those who have it should practice “respiratory hygiene.” They should wear a mask, clean their hands often, and dispose of used tissues in wastebaskets when coming into a health care facility.

Tissues, masks, and hand gel are available at hygiene stations placed throughout University of Washington Medical Center (UWMC) and at clinic front desks. “Cover Your Cough” kits are also available at the Information Desk on the 3rd floor, inside the main entrance.

How is it diagnosed?

Chickenpox is diagnosed by its symptoms, the appearance of the lesions, and by having specimens from the lesions tested in the laboratory.

How are others protected at the medical center?

At UWMC, we place “Airborne Contact Precautions” signs near the door of rooms of patients who have chickenpox. This alerts health care workers and visitors to use extra precautions around the patient to protect others who are at risk from getting the disease. Anyone at risk is advised not to enter the room.

What happens when I am in airborne contact precautions?

Health care workers and caregivers wear masks, eye protection, gowns, and gloves when caring for you. In an emergency, health care workers who are at high risk who have not had the disease may put on a respirator before entering your room.

Health care workers, caregivers, and visitors should not enter your room if they have never had chickenpox. Anyone who enters your room should wear the provided protective items – masks, gowns, and gloves.

Hand washing for 15 seconds, using alcohol hand gel, and keeping the area as clean as possible are stressed.

You will be asked to stay in your room unless you need to go to other departments in the hospital for treatment. This is called being “in precautions.” If you leave your room, you will be asked to wash your hands and to wear a gown, gloves, and a mask.

Please do not use the nutrition rooms while you are in precautions. When you want a snack or water, ask a member of your health care team to bring it to you.

When can the precautions be stopped?

Airborne contact precautions for chickenpox may be stopped when all lesions are dry and have scabs.