Training for Healthcare Providers

Hospitals and Health Centers



Clinical Features of Ebola

- Incubation period 2-21 days
- Sudden onset:
 - Fever, headache, chills, malaise, and myalgia
 - GI symptoms common: vomiting, diarrhea, abdominal pain
 - Hemorrhagic symptoms: in ~45% of cases
 - Mild: petechiae, epistaxis, ecchymosis, bruising
 - Severe: GI hemorrhage, shock, DIC
 - Less commonly seen: rash (trunk, shoulders), conjunctivitis, pharyngitis, cough, hiccups



Human-Human transmission

- Direct contact
 - Body fluids, blood, respiratory secretion, saliva
 - Breast milk
 - Semen -- up to 90 days following clinical resolution
- Nosocomial transmission
 - Reuse of needles and syringes
 - Exposure to infectious tissue, excretions, waste
- Funeral exposures
 - Preparation of body for burial



Course of Disease & Virus shedding

- Not transmissible prior to onset of symptoms

 All body fluids can carry virus
- Virus quantity increases to death, usually 7-10 days post-onset

Convalescence/resolution of viremia

 Discharge



TRIAGE



Setting up Triage

- Only one access point to the facility.
- **All** patients, visitors and staff must go through triage before entering the facility.
- Triage should be open *anytime* facility is open.
- Triage staff should be dressed in face shield, gown, and gloves



Triage Process

Stay <u>at least</u> 3 feet away from patient when possible

• Take the patient's temperature from behind

 Interview the patient using the Ebola triage flow chart





***Symptoms include:** headache, vomiting, nausea, loss of appetite, diarrhoea, intense fatigue, abdominal pain, general muscular or articular pain, difficulty in swallowing, difficulty in breathing, hiccoughs

Note: Confirmed cases requires positive laboratory test

Contact

- Slept in the same house
 Washed the as Ebola patient
 Clothes/bed
 - Washed the clothes/bedding of someone who died
- Touched body or body fluids of Ebola patient

- Took care of someone with suspect Ebola or very sick
- Touched the body or body fluids of someone who died
- Took care of someone who died





Screening for Ebola in General Ward

 Patients may develop symptoms in the hospital that weren't obvious at triage

- Screen all patients for Ebola:
 - Check temperatures 3 x daily
 - Interview using triage form daily
 - Transfer all suspect Ebola cases to ECC



Triage Scenarios

Scenario 1

A 25 year old man presents to the hospital with fever. His wife was sent to an Ebola Treatment Unit 3 days ago. He was brought to the hospital in a taxi.

Within your group discuss the following; in relation to your scenario.

- 1. What could be the diagnosis?
- 2. What questions would you ask?
- 3. What would be your immediate response?
- 4. What would you do next?
- 5. What would you tell the staff and family?



Scenario #1 Discussion

- Patient has contact with Ebola patient and fever → probable case. Needs to be transferred to Ebola care center right away
- If ECC is not at the site, the patient should be transported by ambulance
- Taxi needs to be disinfected before leaving the hospital



Triage Scenarios

Scenario 2

A 60 year old man presents to the hospital with fever and body ache for 3 days. He is becoming dizzy and has vomiting and diarrhea. He has no transport.

Within your group discuss the following; in relation to your scenario.

- 1. What could be the diagnosis?
- 2. What questions would you ask?
- 3. What would be your immediate response?
- 4. What would you do next?
- 5. What would you tell the staff and family?



Scenario #2 Discussion

Patient has fever + 3 of the symptoms (body ache, vomiting, diarrhea) → transfer to ECC.

• We should still find out if patient has contact to patient with Ebola disease

• Transport the patient in ambulance to the ECC



CASE MANAGEMENT/ CLINICAL CARE



Triaging a Patient with Suspect or Probable Ebola



- "Wet" symptoms: vomiting, diarrhea, bleeding, etc.
- "Dry" symptoms: <u>no</u> vomiting, diarrhea, bleeding, etc.



Suspect or Probable Ebola cases

- Treat empirically for malaria and any other infections.
- Report case to county health officials
- Send patient to ETU or Ebola care center:
 - Prioritize "wet" patients for transfer to ETU
 - Separate rooms in ECC:
 - "Dry" patients
 - "Wet" patients and confirmed Ebola patients





Testing for Ebola in ECC



Testing for Ebola in ECC

- If limited testing, prioritize "dry" patients
 May have illness other than Ebola
- Patients that remain in ECC should not be discharged until all major symptoms (e.g., fever, diarrhea, vomiting, bleeding) have resolved for <u>three days</u>.



Clinical Care: Fluids

Dehydration threatens patient's survival

- Use oral rehydration solution(ORS);
 - Avoid intravenous fluids unless can be delivered safely

• Encourage normal eating



Clinical Care in the ECC: Medications

- Treat *all* Ebola cases empirically for malaria and antibiotics as needed
- Treat vomiting, diarrhea, anxiety, pain
- AVOID aspirin and other NSAIDs
- Give Vitamin supplements (A, B, C, Multivites)





Clinical Care: Medications

| Type of Medication | Reason | Examples |
|--------------------|--------------------------------------|--|
| Antibiotics | Treat bacterial infections | Oral ciprofloxacin (not for children) |
| Anti-emetics | Treat nausea; prevent dehydration | For adults: chlorpromazine 25-50 mg Q6H orally or metoclopramide 10 mg orally q8h. For children, give promethazine |
| Anti diarrheals | Symptom relief, dehydration | Imodium |
| Analgesics | Relieve pain | Paracetomol, codeine, morphine esp. Avoid aspirin and NSAIDs, diclofenac, ibuprofen |
| Anxiolytics | Ease anxiety | Diazepam –adults: 5-15 mg/day in 3 divided doses; If more severe: give haloperidol 5 mg oral |
| Anti-pruritics | For itch | Calamine lotion or antihistamines |
| Anti-pyretics | Reduce high fever | Paracetomol; Avoid aspirin, NSAIDS |
| Antacids | Relieve heartburn | Omeprazole 20mg daily; or magnesium trisilicate; 2 tabs q8h until symptoms resolved |
| Anticonvulsants | Treat seizure/ epileptic fit | Check glucose Diazepam rectal |

Deaths

• Dead bodies are highly infectious

• Call burial team right away to remove body

- If burial team does not come soon:
 - Always wear advanced PPE when handling body
 - Cover body with sheet
 - Move to separate area if can be done safely



Needle Safety



Needle Safety

- Needle sticks and injuries from other sharp objects can cause infections (Ebola, HIV, Hepatitis)
- Limit testing or treatment that involve needles
 - Use oral medications and fluids whenever possible
 - No unnecessary testing (treat empirically for malaria)
- You CAN prevent injuries from needles and other sharp objects



Needle Safety – If you must use a needle

- Always wear gloves
- When possible use retracting needles
- When using needles, work slowly and carefully



DO

- DO throw away needles immediately after use
- DO throw the uncapped needles away in a sharps container
- DO close, seal, and send sharps containers for incineration when they become ³/₄ full





DO NOT



- DO NOT recap a used needle
- DO NOT bend or break used needles or other sharp instruments
- DO NOT walk around with sharp objects
- DO NOT overfill sharps container







Injection Safety

- Once you use a needle and syringe on a patient, the needle AND the syringe are contaminated
- Needles and syringes are used for ONLY ONE patient
- Never give medications from the same syringe to more than one patient, even if the needle is changed



Injection Safety

- Never puncture a vial or any other container of liquid medications with a used syringe or needle
- Never use the same vial of medication for more than one patient





INFECTION PREVENTION AND CONTROL

Designate Infection Prevention and Control (IPC) Specialist

- Develop infection control committee
- Ensure staff follow recommended practices
- Ensure adequate supplies of PPE
- Consult experts and county officials



How to Prevent Infections in Healthcare Workers

• Do not go to work if you are sick

Call your supervisor and tell him/her that you are sick

- Tell your co-workers not to go to work if they are sick
- Do not wear your work clothes (or scrubs) home
- Wear and remove PPE properly with a buddy watching
- Wash your hands according to protocol



Personal Protective Equipment (PPE)

• <u>Basic PPE</u>: Staff in most patient care areas

 <u>Advanced PPE</u>: Staff in Ebola care center and maternity ward

Never use your phone while wearing PPE



Additional items for high-risk areas

Everyone: Basic PPE

- Closed toe shoes with covers or boots
- Face shield
- Gown
- Gloves (1 set)

High risk: Advanced PPE

- Rain boots

 or closed toe shoes & covers
- <u>1st set</u> of gloves
- Gown
- Head cover or hood
- Mask
- Shield
- <u>2nd set</u> of gloves
 - \circ outer set can be rubber
- Apron


Basic Protection PPE





With acknowledgments to Kumblytee Johnson

Sequence for Putting on Basic PPE over your scrubs or work clothes

1

2

- 1) Remove Jewelry
- 2) Wash hands
- 3) Face shield
- 4) Gown

5) Gloves





5



3

4



Put On PPE

- Put on PPE slowly and carefully
- DO NOT RUSH !





1. Remove Jewelry

- Remove ALL jewelry before putting on PPE
 - Watches -Necklaces
 - Bracelets
 - Rings
 - Earrings









2. Wash Your Hands

- Wash your hands immediately before putting on PPE
- Use Soap and water
 OR 0.05% chlorine
 OR hand sanitizer



3. Put on Face Shield

- Position shield over the face and secure with elastic band/ties
- Shield should rest just above your eyebrows
- Adjust to fit comfortably





4. Put on Gown

- Opening is in the back
- Secure at the neck and waist with ties





5. Put on Gloves

- Put on gloves last
- Select correct size
- Insert hands into gloves
- Extend the gloves over the gown cuffs





Take Off PPE



Taking Off PPE

- Take off PPE carefully and slowly!
- DO NOT RUSH !
- Remove PPE just before you leave the patient area



Sequence for Taking Off PPE

- Wash hands
- Take-off gown
- Take-off gloves
- Wash hands
- Take-off Face shield
- Wash hands



Wash your gloved hands with 0.05% chlorine







2. Take Off Gown



- Unfasten ties
- Peel gown away from neck and shoulder
- Turn contaminated outside toward the inside
- Throw it away



How To Take Off Gloves

- Outside of gloves is contaminated! Remove your gloves slowly
- Grasp glove at the palm with opposite gloved hand; peel off
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist
- Peel glove off over first glove
- Throw away the gloves





Wash Your Hands

- Wash your hands immediately after removing PPE
- Use Soap and water
- OR Hand sanitizer
- OR 0.05% Chlorine





How to Take Off the Face Shield



- Lift the elastic strap over your head
- Throw it away



Wash Your Hands

- Wash your hands immediately after removing PPE
- Use Soap and water
- OR Hand sanitizer
- OR 0.05% Chlorine





Advanced Protection PPE



With acknowledgments to Kumblytee Johnson



Putting on PPE over your scrubs or work clothes

- Put PPE on slowly and carefully
- DO NOT RUSH !
- You must have a "buddy" watch you put on PPE



Sequence for Putting on Advanced PPE

2

3

- 1) Take off jewelry
- 2) Put on boots
- 3) Wash hands
- 4) Examination gloves
- 5) Gown
- 6) Head cover
- 7) Face mask
- 8) Face shield
- 9) Examination gloves
- 10) Apron



















10



1. Remove Jewelry

- Remove ALL jewelry before putting on PPE
 - Watches
 - Bracelets
 - Rings
 - Earrings









2. Put on Boots or Shoe covers

• Put on boots





3. Wash Your Hands

- Wash your hands immediately before putting on PPE
- Use Soap and water
 OR Hand sanitizer
 OR 0.05% Chlorine







4. Put on Inner Pair of Examination Gloves

- Select correct size
- Insert hands into gloves





5. Put on Gown

- Opening is in the back
- Secure at the neck and waist with ties





6. Put on Head Cover

- Put on head cover
- Tuck hair into the head cover





7. Put on a Face Mask

- Place the mask over your nose and mouth
- Secure on head with ties
- Adjust to fit





8. Put on a Face Shield or Goggles

- Position shield over the face and secure with the elastic band
- Adjust the face shield to sit just above your eyebrows
- Adjust to fit comfortably





9. Put on Outer pair of Examination Gloves

- Put on second pair of examination gloves
- Extend the gloves over the gown cuffs







10. Put on Apron

- Place neck strap over head
- Tie straps behind back





Taking Off PPE



PPE Removal Area

- Take off PPE in the "PPE REMOVAL AREA"
- Supplies inside the "PPE REMOVAL AREA"



0.5% Chlorine



Disposable towels







Bucket filled with 0.5% Chlorine



Chlorine foot bath



Taking Off PPE

• Taking off PPE MUST be supervised by a infection control professional

• Every time you take off a PPE item, wash your hands with 0.05% chlorine



Sequence for Taking off PPE



*Wash your hands every time you remove each item

- 1) Apron
- 2) Examination (outer) gloves
- 3) Gown
- 4) Inspection/cleaning boots
- 5) Face shield
- 6) Face mask
- 7) Head cover
- 8) Examination (inner) gloves











8





3







Wash your gloved hands with 0.05% chlorine







1. Take Off Outer Pair Examination Gloves

- Remove your gloves slowly
- Grasp glove at the palm with opposite gloved hand; peel off
- Hold removed glove in gloved hand
- Slide fingers of hand under glove at wrist
- Peel glove off the glove
- Throw away the gloves










2. Take Off Apron

- Remove apron strap over head
- Throw re-usable apron in 0.5% chlorine











3. Take Off Gown



- Unfasten ties
- Peel gown away from neck and shoulder
- Turn contaminated outside toward the inside
- Throw it away









4. Inspection/Cleaning of Boots

 Infection control person MUST inspect your boots for any visible blood or other body fluids (blood, vomit, urine, stool)



Inspection/Cleaning of Boots

- If your boots are dirty:
 - Wipe off the visible body fluid with a disposable towel and throw it away
 - Wipe area again with a deposable towel soaked with 0.5% chlorine









5. Take Off Face Shield



- Lift the elastic strap over your head
- Throw it away









6. Take Off Face Mask



- Untie the bottom tie
- Untie the top tie
- Discard









7. Take Off Head Cover

- Take off the head cover
- Throw it away











8. Take Off Inner Pair of Gloves

- Remove your gloves slowly
- Grasp glove at the palm with opposite gloved hand; peel off
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist
- Peel glove off over first glove
- Throw away the gloves





9. Wash Your Hands

- Wash your hands immediately after removing PPE
- Use Soap and water
- OR Hand sanitizer
- OR **0.05%** Chlorine







Leaving PPE REMOVAL AREA

 As you leave the PPE removal area, walk through the chlorine boot bath





Mistakes Using Personal Protective Equipment



Personal Protective Equipment

- Personal protective equipment MUST be used correctly
 - If you use PPE incorrectly while caring for a patient with Ebola, you risk getting infected
- You MUST take off PPE in the correct order
 - If you take off PPE in the wrong order you risk getting infected





| CORRECT ACTION |
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How Do You Fix the Problem



| PROBLEM | CORRECT ACTION |
|---|----------------|
| Healthcare worker is not wearing gloves while drawing blood. | |
| Healthcare worker is not wearing gloves or face shield while treating a patient. | |



PPE Mistakes



| PROBLEM | CORRECT ACTION |
|---|---|
| Healthcare worker is not wearing gloves while drawing blood. | ALWAYS wear gloves when touching patients. CHANGE gloves between each patient. |
| Healthcare worker is not wearing gloves or face shield while treating a patient. | ALWAYS wear gloves and face shield when treating patients. |



| | PROBLEM | CORRECT ACTION |
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How Do You Fix the Problem

| PROBLEM | CORRECT ACTION |
|--|----------------|
| Touching his face with gloved hands | |
| Should take off gloves BEFORE taking off face mask | |
| • Touching their gowns with bare hands | |

PPE Mistake



| PROBLEM | CORRECT ACTION |
|--|---|
| Touching his face with gloved hands | Contaminated gloves should come off BEFORE taking off |
| Should take off gloves BEFORE | face mask |
| taking off face mask | • Remove mask by pulling the elastic FROM THE BACK |
| Touching their gowns with bare hands | • The gown is contaminated! |
| | DO NOT touch your gown with bare hands |
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| PROBLEM | CORRECT ACTION |
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| \sim | PROBLEM | CORRECT ACTION |
|----------|---|----------------|
| | • Touching the outside of the glove with a bare hand while being removed | |
| <image/> | • Gloves removed incorrectly | |

| $\mathbf{\mathbf{N}}$ | PROBLEM | CORRECT ACTION |
|-----------------------|--|------------------------------|
| | Touching the outside of the glove with a bare hand while being removed | • Remove gloves correctly |
| | • Gloves removed incorrectly | • Remove gloves correctly |

THE END

