

A fact sheet

Infection Control for Health Care Workers Protection from severe or emerging Respiratory illnesses

In the case of an outbreak of respiratory illness in Bahrain, appropriate infection control procedures should be in place in all health care facilities. The World Health Organization currently recommends strict adherence to Standard Precautions and Additional Precautions to minimize droplet, contact and airborne transmission of the disease in the care of patients with known or suspected avian influenza.

Standard Precautions

- Hand washing and antisepsis (hand hygiene)
- Use of personal protective equipment when handling blood, body substances, excretions and secretions
- Appropriate handling of patient care equipment and soiled linen
- Prevention of needle stick/sharp injuries
- Environmental cleaning and spills-management
- Appropriate handling of waste

Additional (transmission-based) Precautions

Health care workers in direct contact (and anyone entering patient room or handling patient specimens or equipment) should:

- be sufficiently educated about influenza transmission risks;
- use appropriate personal protective equipment when performing direct patient care/contact:
 - face mask (P2/N-95 masks)
 - Long-sleeved gown (plastic apron if splashing is anticipated)
 - Gloves (non sterile)
 - Overshoes and cap (if the situation results in increased aerosols);
- treat all waste as infectious waste;
- monitor their own health twice daily for signs of fever and respiratory symptoms; and
- discuss the use of antiviral medication with a doctor.

Patients should:

- be isolated in a negative pressure room if one is available. If single rooms are not available, only confirmed cases should be cohorted. The room should have hand-washing, toilet and bathroom facilities;
- be encouraged to wear a surgical mask which should be replaced regularly; and
- be asked to cough/sneeze into a tissue and to dispose of the tissue afterwards, then wash hands with soap/water or use alcohol-based rub if hands are not visibly soiled.

Infection Control Precautions should be maintained until the patient is no longer an infection

Risk to others, including when:

- A plausible alternative diagnosis for the illness is confirmed; OR
- Viral culture or PCR on NPA or throat swab is negative on two consecutive days; OR
- seven days after the onset of fever $\geq 38^{\circ}\text{C}$ (21 days for children aged 12 years or less); OR
- If fever persists beyond seven days after onset, then as determined by the responsible medical practitioner.

Based on the Infection Control Guidelines from the Diseases Control Section, Public Health Directorate and the World Health Organization