Advice to healthcare workers: management of patients with 2019-nCoV infection

When to suspect an 2019-nCoV infection?

When assessing patients with acute respiratory infection (sudden onset of at least one of the following: cough, sore throat, shortness of breath) within 14 days after returning from China or with any respiratory symptoms, who had been in contact with people diagnosed with a 2019-nCoV infection.

How to handle these patients?

▪ Provide the patient with a surgical mask; Separate from other patients in waiting areas; examine in a separate consultation room

▪ Apply standard precautions including hand hygiene and use personal protective equipment for contact and droplet transmission: surgical mask, eye protection, gown and gloves.

▪ Obtain diagnostic samples for 2019-nCoV.

▪ Report the case to public health authorities.

Care of patients with 2019-nCoV infection:

▪ Admit to a single or isolation room.

▪ Use personal protective equipment for contact and droplet transmission: surgical mask, eye protection, gown and gloves.

▪ When performing aerosol-generating procedures, such as tracheal intubation, bronchoalveolar lavage, other diagnostic airway procedures and manual ventilation, use personal protective equipment for airborne transmission. A well-fitted FFP3 respirator, tight-fitting eye protection, gloves and long-sleeved impermeable protective gowns.

▪ Health care personnel should self-monitor for any respiratory symptoms and fever in the 14 days following the last exposure to a confirmed case.

What is the novel coronavirus?

▪ An outbreak of acute respiratory tract infection linked to a novel coronavirus (2019-nCoV) is ongoing in China, with most cases linked to the city of Wuhan.

▪ Although a number of the initially reported cases occurred among people that had visited a wet market, human-to-human transmission is ongoing, and healthcare workers have also been infected.

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