

SPECIFIC MEASURES IN THE EVENT OF A SUSPECTED CASE

Any person with signs of the disease or symptoms (fever, cough or difficulty breathing) and with an epidemiological link (possible contact with confirmed case or a recent trip to locations with confirmed community transmission) shall head towards the isolation room and inform (before or after) the responsible person (preferably by phone). The responsible person shall follow up the suspected case from the moment of contact until their exit from the locale.

If necessary (e.g., reduced mobility of the staff member, student or visitor), the responsible person can be requested to provide assistance to the “isolation” room. Whenever possible, a safe distance shall be kept from the patient (more than 1 metre [3 feet]). That who provides assistance or enters the isolation room shall, moments before doing so, put on a surgical mask and disposable gloves, besides from fully complying with basic measures regarding hand hygiene upon contact.

The suspected case, once in the isolation room, shall contact the SNS24 hot line and follow instructions. As soon as possible, the patient shall put on a surgical mask, provided that their physical condition enable them to do so. The mask shall be placed by the patient. The mask shall be well fitted (that is: fitted to the face, enabling the full occlusion of the nose, mouth and the sides of the face). Whenever the mask is moist, it shall be replaced by a new one.

In the event of having more than one suspected case, the responsible person for each institution may consider determining a second temporary isolation area, or placing both suspected cases within the same area, but separated by a distance higher than 2 metres (6 feet).

Check flow chart on next page.

If the case is validated by the SNS24 hot line as a suspected case, the patient shall be taken to hospital, where the local Health Authority will commence an epidemiological enquiry, as well as the patient’s identification and the surveillance of their close contacts, according to national guidelines.

Upon validation of the case by the SNS24 hot line and once the patient is evacuated, the responsible person shall ensure that the isolation room must be cleaned and disinfected by a staff member wearing disposable gloves and surgical mask. Cleaning and disinfecting operations shall be reinforced, mainly in areas frequently accessed by the suspected case. Likewise, the cleaning and disinfecting of the workplace of a confirmed case must be thorough (and include materials and equipment used by the confirmed case). Any residue from a confirmed case shall be stored in a plastic bag (of 50 or 70-micron thickness). Once closed (for example, with a clamp), the bag should be segregated

and sent to an operator licensed for the management of bio-medical hazardous waste. To that end, the responsible person for each institution shall be working with peers from other institutions who have already defined this waste management scheme.

If the case is not validated by the SNS24 hot line, standard cleaning and disinfecting procedures shall take place within the isolation room.

