

Upon arrival to clinical setting/triage

- □ Does patient have fever (subjective or \geq 101.5°F)?
- Does patient have symptoms compatible with an infectious disease such as headache, cough, trouble breathing, vomiting, diarrhea, joint aches or rash?
- Has patient traveled to a country currently experiencing or at risk for a communicable disease outbreak?
- Has the patient had contact with a person or traveled to a country that is currently experiencing or is at risk for a communicable disease outbreak?

Upon initial assessment

- Isolate patient in a private room with a private bathroom and with the door to hallway closed or if available, an Airborne Isolation Infection Room (AIIR)
- □ Implement standard, contact, & droplet precautions
- □ Notify the facilities Infection Control Program
- Report to the statehealth department at 1-800-338-8374

Conduct a risk assessment for:

- Exposure to known ill patients
- Exposure to blood products or bodily fluids from known ill patients
- Direct contact with or care provider to anyone with known illness
- Direct contact or participation in dead body preparation or funeral
- Exposure to freshwater (e.g. swimming)
- Exposure to animal/insect bites or scratches
- Ingestion of raw meat, "bush meat," seafood, or unpasteurized dairy products

Alabama Department of Public Health Checklist for Patients Being Evaluated for Serious Infectious Diseases

Use of personal protective equipment (PPE)

Use a buddy system to ensure that PPE is put on and removed safely

Before entering patient room, wear:

- Gown (fluid resistant or impermeable)
- Facemask
- Eye protection (goggles or face shield)
- Gloves

If likely to be exposed to blood or body fluids, additional PPE may include but isn't limited to:

- Double gloving
- Disposable shoe covers
- Leg coverings

Upon exiting patient room

- PPE should be carefully removed without contaminating one's eyes, mucous membranes, or clothing with potentially infectious materials
- Discard disposable PPE
- Re-useable PPE should be cleaned and disinfected per the manufacturer's reprocessing instructions
- Hand hygiene should be performed immediately after removal of PPE
- Consult with Alabama Department of Public Health (ADPH) Infectious Diseases & Outbreaks Division (ID&O) regarding the coordination of patient transport to an assessment facility

For more information visit the ADPH SIDN webpage

http://www.alabamapublichealth.gov/cep/sidn

Patient placement and care considerations

- □ Maintain log of all persons entering patient's room
- Use dedicated disposable medical equipment (if possible)
- Limit the use of needles and other sharps
- Limit phlebotomy and laboratory testing to those procedures essential for diagnostics and medical care
- Carefully dispose of all needles and sharps in punctureproof sealed containers

Initial patient management

- □ Consult with ADPH ID&O about diagnostictesting
- Consider, test for, and treat (when appropriate) other possible infectious causes of symptoms (e.g., malaria, bacterial infections)
- Evaluate for evidence of bleeding and assess hematologic and coagulation parameters
- Symptomatic management of fever, nausea, vomiting, diarrhea, and abdominal pain
- Wear PPE (detailed in center box) during environmental cleaning and use an EPA-registered hospital disinfectant with a label claim for non-enveloped viruses*
- Avoid aerosol-generating procedures if possible

During aerosol-generating procedures

- Limit number of personnel present
- Conduct in an airborne infection isolation room
- Don PPE as described above except use a NIOSH certified fit-tested N95 filtering facepiece respirator for respiratory protection or alternative (e.g., PAPR) instead of a facemask
 - * Adapted from the CDC Checklist for Patients Being Evaluated for Ebola Virus Disease in the US