



Alabama Department of Public Health

Checklist for Patients Being Evaluated for High-Consequence Infectious Diseases

Upon arrival to clinical setting/triage

- Does patient have fever (subjective or $\geq 101.5^{\circ}\text{F}$)?
- 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 high consequence infectious 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 high consequence infectious 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 state health 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

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

<http://www.alabamapublichealth.gov/cep/hcid>

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 puncture-proof sealed containers

Initial patient management

- Consult with ADPH ID&O about diagnostic testing
- 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