

Quick Reference Guide for Ebola – non-CoE

① Identify

Symptoms

- Fever: subjective, or $>38.6^{\circ}\text{C}$
- OR**
- Headache, weakness, myalgias, vomiting, diarrhea, abdominal pain, bleeding



Risk of exposure in past 21 days

- Travel history to country with known cases of Ebola
- OR**
- Contact with person with known Ebola infection

② Isolate

- Keep **safety distance** from patient (min 2m)
- Follow standard, contact, and droplet** precautions
- Ensure patient **do not enter into contact with anybody**
- Isolate patient in isolation room with **private bathroom** and **lockable door**



③ Inform

- Contact hospital infection control program
- Call **937** to report and validate that patient fits case definition

⑤ Trace

- Identify and isolate patients and health care workers that were in contact with suspect Ebola patient
- Prevent access to areas of health care facility that patient has likely infected

④ Protect

- Identify **designated area** for putting on and removing PPE
- Use **buddy system** to ensure PPE is put on and removed safely
 - Double gloves
 - N95 mask
 - Full-face shield
 - Surgical hood to cover head and neck
 - Impermeable gown
 - Waterproof apron covering the torso
 - Waterproof boot covers

This reference guide is not intended to be comprehensive
Additions and modifications to fit local practice are encouraged

Steps to put on personal protective equipment (PPE)

1 Always put on essential required PPE when handling either a suspected, probable or confirmed case of viral haemorrhagic fever.

2 The dressing and undressing of PPE should be supervised by another trained member of the team.

3 Gather all the necessary items of PPE beforehand. Put on the scrub suit in the changing room.



4 Put on rubber boots. If not available, make sure you have closed, puncture and fluid resistant shoes and put on overshoes.



OR, IF BOOTS UNAVAILABLE



5 Place the impermeable gown over the scrubs.



6 Put on face protection:

6a Put on a medical mask.



6b Put on goggles or a face shield.



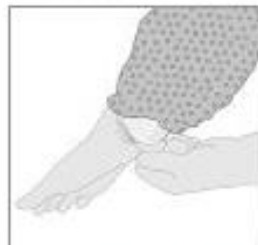
7 If available, put a head cover on at this time.



8 Perform hand hygiene.



9 Put on gloves* (over cuff).



10 If an impermeable gown is not available, place waterproof apron over gown.



While wearing PPE:

- Avoid touching or adjusting PPE
- Change gloves between patients
- Remove gloves if they become torn or damaged
- Perform hand hygiene before putting on new gloves

* Use **double gloves** if any strenuous activity (e.g. carrying a patient or handling a dead body) or tasks in which contact with blood and body fluids are anticipated. Use **heavy duty/rubber gloves** for environmental cleaning and waste management.

Steps to remove personal protective equipment (PPE)

- 1** Remove waterproof apron and dispose of safely. If the apron is to be reused, place it in a container with disinfectant.



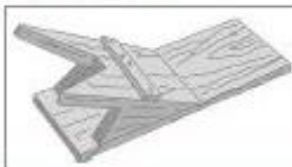
- 2** If wearing overshoes, remove them with your gloves still on (If wearing rubber boots, see step 4).



- 3** Remove gown and gloves and roll inside-out and dispose of safely.



- 4** If wearing rubber boots, remove them (ideally using the boot remover) without touching them with your hands. Place them in a container with disinfectant.



- 5** Perform hand hygiene.



- 6** If wearing a head cover, remove it now (from behind the head).



- 7** Remove face protection:
7a Remove face shield or goggles (from behind the head). Place eye protection in a separate container for reprocessing.



- 7b** Remove mask from behind the head. When removing mask, untie the bottom string first and the top string next.



- 8** Perform hand hygiene.



Source: Modified from Clinical Management of Patients with Viral Haemorrhagic Fever: A pocket Guide for the Front-line Health Worker. World Health Organization, 2014