Procedures to be Taken on the Emergence of Suspected or Confirmed Cases at Health Facilities

**First: Coronavirus case identified:**

**A. Suspected Case:**

A patient suffering from acute pneumonia, alongside high body temperature (38°C or more) and cough. The infection of the respiratory system is to be confirmed clinically by means of X-ray imaging. Such a case needs to be hospitalized at an IC unit.

**B. Confirmed Case:**

A suspected case confirmed, through laboratory tests, to be infected with the novel coronavirus.

**Second: Procedures to be taken on the emergence of suspected or confirmed cases at health facilities:**

- All health workers have to take the droplet isolation precautions when dealing with patients (detaining the patient in a particular room, or with patient with akin symptoms, in addition to cleansing hands and putting on face-masks). That's to be added
to using high-quality face-masks (N95), as well as eye protectors. When taking any measures that makes the health worker vulnerable to the infection transmission, such as the respiratory secretions or respiratory endoscopies, that should be conducted at a passive-pressure room.

• Informing the Infectious Diseases Department pertinent to the Public Health Agency.

• Taking nasal-annular samples, and it is better to take samples from: sputum, liquid of the trachea, lotion of the bronchial and alveoli, and other secretions from the lower respiratory system, if possible, and sending all such samples to the famous referential laboratories in Riyadh and Jeddah.

• If the sample is found positive, health workers who have got in contact with the patient (nurse, physician, respiratory device technician, etc.) should be brought to take nasal-annular samples from them, as well as blood samples, and send them to the Public Health Agency.

Third: Other preventive procedures:
• Completing the enclosed epidemiological surveillance form, and sending it to the Infectious Diseases Department pertinent to the Public Health Agency.

• Identifying those in contact with the patient, and observing their health situation for two weeks.

• Taking nasal-annular samples, as well as (6 ml of blood in two tubes, 3 ml each) from all those in contact with the patient at home.

• Keeping all samples at the regular refrigerator temperature (2–8° C), making sure not to get frozen.

• Separating the blood samples by a centrifuge, and sending the “sera” only to Riyadh Central Laboratory to be put in the suitable tube, without using any anti-clotting drugs, with a temperature of (2–8° C), by putting ice cubes all around them, making sure not to get frozen.

• Sending a list of those from whom samples have been taken (those in contact with the patient) to the Infectious Diseases Department.

• Sending the Epidemiological Reporting and Surveillance to the Infectious Diseases Department pertinent to the Public Health
Agency via Fax: 0112124611 or 0112124056, or via e-mail: novelcorona@moh.gov.sa.