



Infection Control & Hospital Epidemiology
(ICHE)

Coronavirus Disease 2019 (COVID-19)
What you Need to Know

What is a Coronaviruses

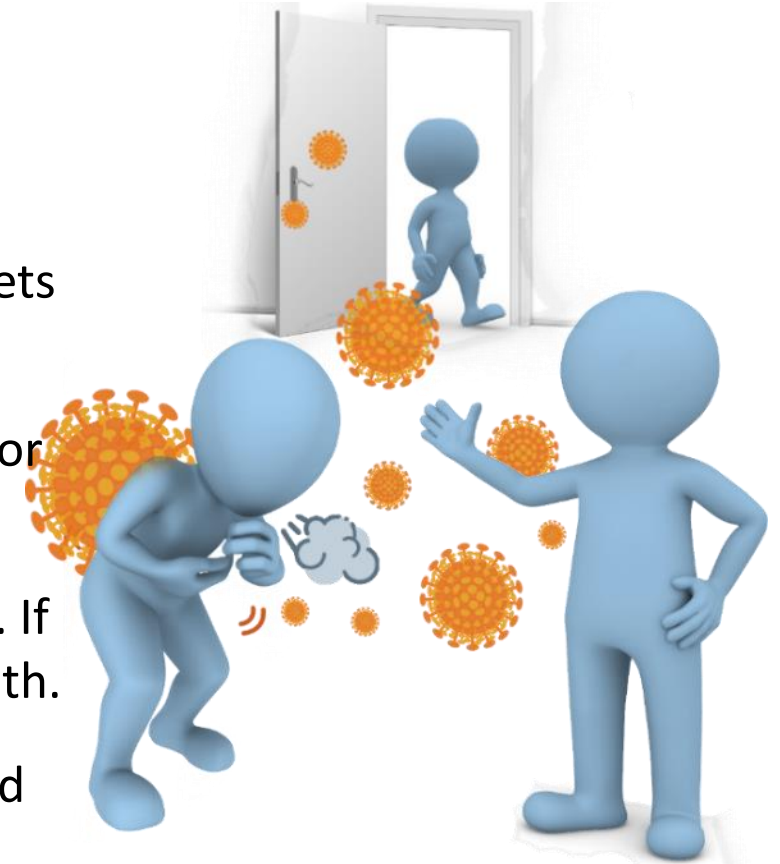


Coronaviruses are a large family of viruses which may cause illness in animals or humans. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently discovered coronavirus causes coronavirus disease COVID-19.

COVID-19 is the infectious disease caused by the most recently discovered coronavirus. This new virus and disease were unknown before the outbreak began in Wuhan, China, in December 2019. COVID-19 is now a pandemic affecting many countries globally.

How is COVID-19 spread?

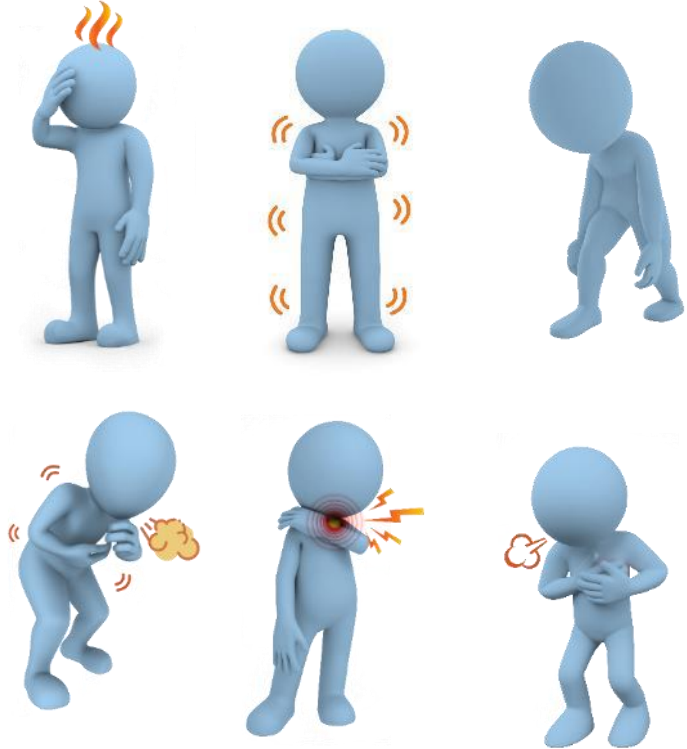
- Most people are being infected from other people, when in close contact.
- It probably spreads the same way as colds and flu – through droplets which are created when we talk, cough and sneeze.
- People can get infected when these droplets enter the nose, eyes or mouth or when they are inhaled.
- Touching contaminated objects puts the droplets onto your hands. If you touch your face the droplets can enter your nose / eyes / mouth.
- Some people have been infected following contact with an infected person with minimal or no symptoms.



Symptoms start like many other illnesses

Common symptoms are:

- Fever
- Chills including rigors (chills with shaking)
- Fatigue
- Cough
- Sore throat
- Shortness of breath and breathing difficulty



Symptoms start about one day after exposure, but can be as long as 14 days.

Some people have no symptoms, **most** have a mild illness. It can be severe and sometimes fatal.

Less common symptoms

1. Headache / muscle aches
2. Diarrhea
3. Sudden loss of sense of smell and taste
4. Abnormal heart rhythm and heart failure
5. Stroke



Many patients recover fully in about 2 weeks. In others, some symptoms like breathlessness and fatigue may continue for weeks.

Diagnosis and treatment



- Two upper respiratory tract specimens should be collected
- Each sample should consist of both (**nasopharyngeal and throat swabs**) utilizing the **two swabs** that comes with each viral transport medium .
- The small **thin** flexi swab is used for **nasopharyngeal** and the **thick** swab for **throat** .both swabs should be placed in the same container

There is no specific treatment.

Mild symptoms can be treated with medicine to lower the fever, or relieve pain.

If symptoms are more severe, treatment in hospital is required.



COVID-19 Prevention Measures

Maintain good hygiene

- Wash your hands
- Cover your coughs and sneezes. Use a tissue or your upper sleeve. Immediately throw the tissue in a bin and wash your hands.
- Wear a mask/face covering/ fabric mask in public places, especially when it is difficult to maintain 1-2 metres (3-6 feet) distance from others. Follow local guidelines.
- Avoid touching shared objects (light switches, handrails, door handles etc) as much as possible. If you must touch such objects, wash your hands or use sanitiser promptly afterwards. Ensure you do not touch your face.
- Clean and disinfect frequently touched surfaces each day, more often if you think they've been contaminated. Use normal cleaning supplies.
- Do not share food, drinks and personal items including mobile phones.



If you have any symptoms even if only mild, stay home and seek medical advice. Follow local guidelines.

More on use of masks

- Follow local guidelines
- Wear a mask:
 - When in face-to-face contact with others.
 - When social distancing cannot be achieved.
 - If you are in the high-risk groups.
 - When coughing or sneezing.
 - When caring for a sick person.
 - Within a healthcare facility or other public spaces.
- Masks alone don't protect – they should be used along with other hygiene measures.



Mask reduces the risk of the wearer spreading the virus

Avoid exposure

- Maintain social /physical distance - keep 1-2 metres (6 feet) away from others, even if they appear well.
- Avoid activities which expose you to large groups of people.
- Maintain social distance while greeting visitors. Avoid shaking hands, kissing or hugging.
- Work from home, where possible.
- Avoid non-essential travel.
- Keep away from people who are sick – don't let them cough or sneeze on you.
- Avoid visiting hospitals and other medical facilities unless you need medical care.



What to do if you get sick

- Stay home. Do not go to work. Minimise contact with other people until you have recovered. Monitor your condition
- Cover your coughs and sneezes – use a tissue or a mask if available – and wash your hands with soap and water.
- **Seek medical attention** if your symptoms worsen. Let the doctor know if you have travelled recently, and if you were in contact with someone who is sick.
- Wear a mask in case you need to visit a doctor. Use private transport as much as possible.



Screening and contact tracing

- “Screening” may be done at entry points to detect sick people. You may be asked where you have been, and your temperature may be taken.
- ICHE team perform “contact tracing” – identifying people who have been in contact with someone with COVID-19.
- These ‘contacts’ may be asked:
 - To stay at home for 5days
 - To monitor their health for 14 days in case they develop symptoms.
- Follow the advice of health authorities.



Automated Contact Tracing

How to Fill Out The COVID-19 Contact Tracing Form

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Covid-19
Contact Tracing
COVID-19 Contact Tracing Form
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CORONAVIRUS DISEASE
COVID-19
(COVID-19) Information
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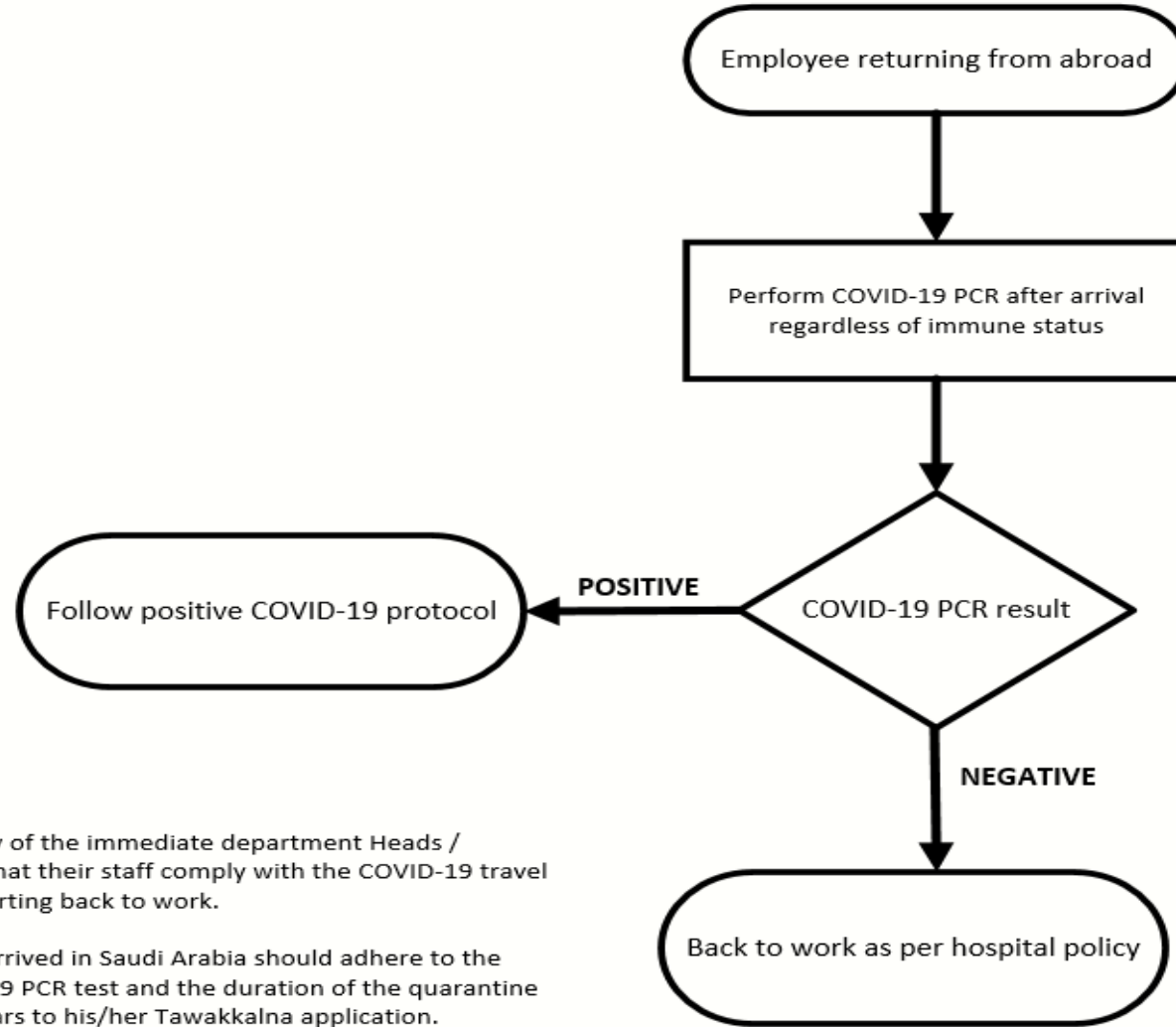
SEHATY يهن يديا
IN MY HANDS
Manage your appointments, view your Medical Reports, request Medication or Medical supplies Refills, contact Patient Relations and much more through Patient E-Services.
Sign in Learn More



Access the link below

https://kfshrcapps.kfshrc.edu.sa/COVID_19/EXPSurvey/survey.jsf

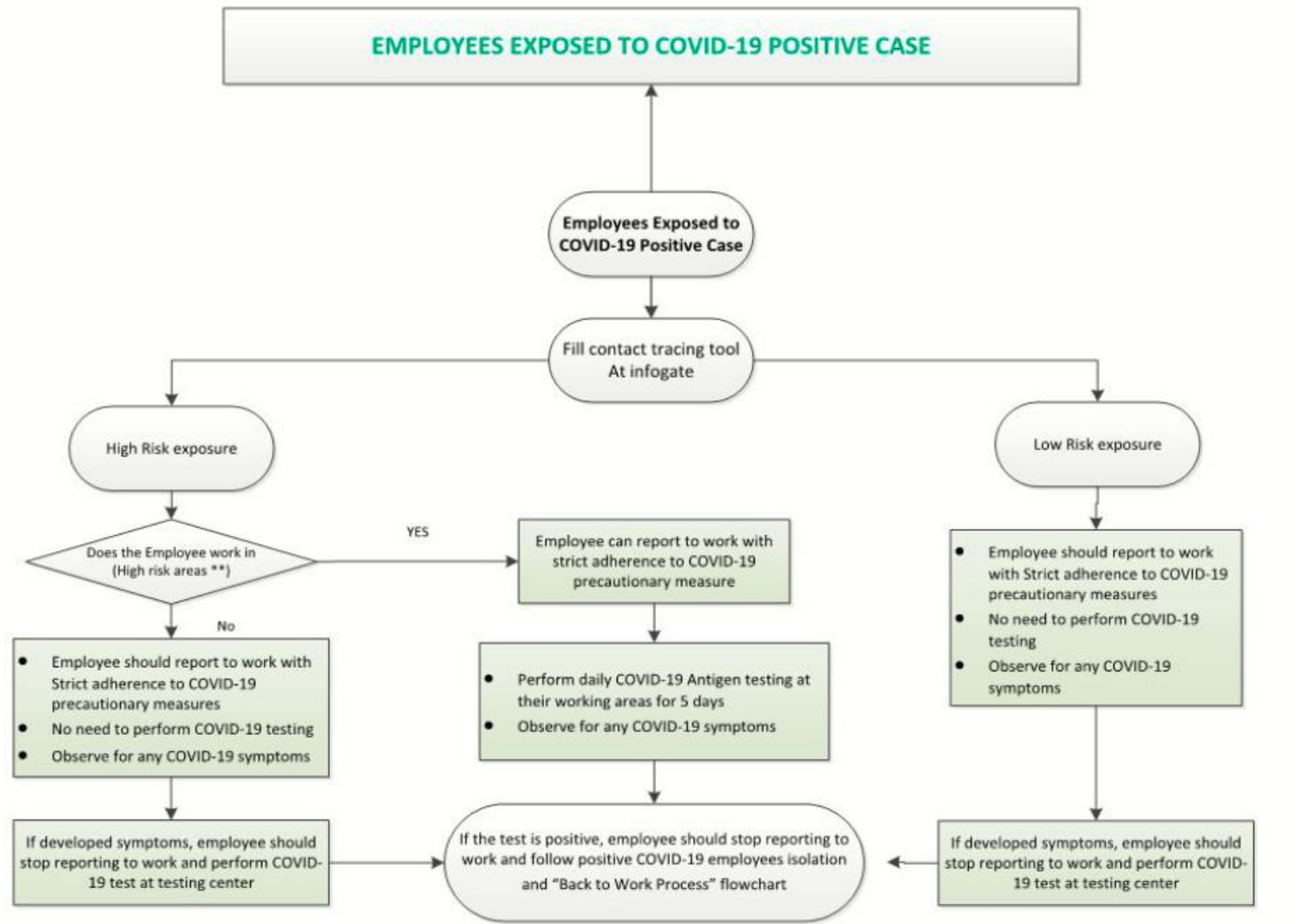
COVID-19 PROTOCOL FOR RETURNEES FROM ABROAD



NOTE:

- It is the responsibility of the immediate department Heads / Manager to ensure that their staff comply with the COVID-19 travel protocol before reporting back to work.
- The individual who arrived in Saudi Arabia should adhere to the times of the COVID-19 PCR test and the duration of the quarantine based on what appears to his/her Tawakkalna application.

Healthcare Worker Exposed to Covid-19 Positive



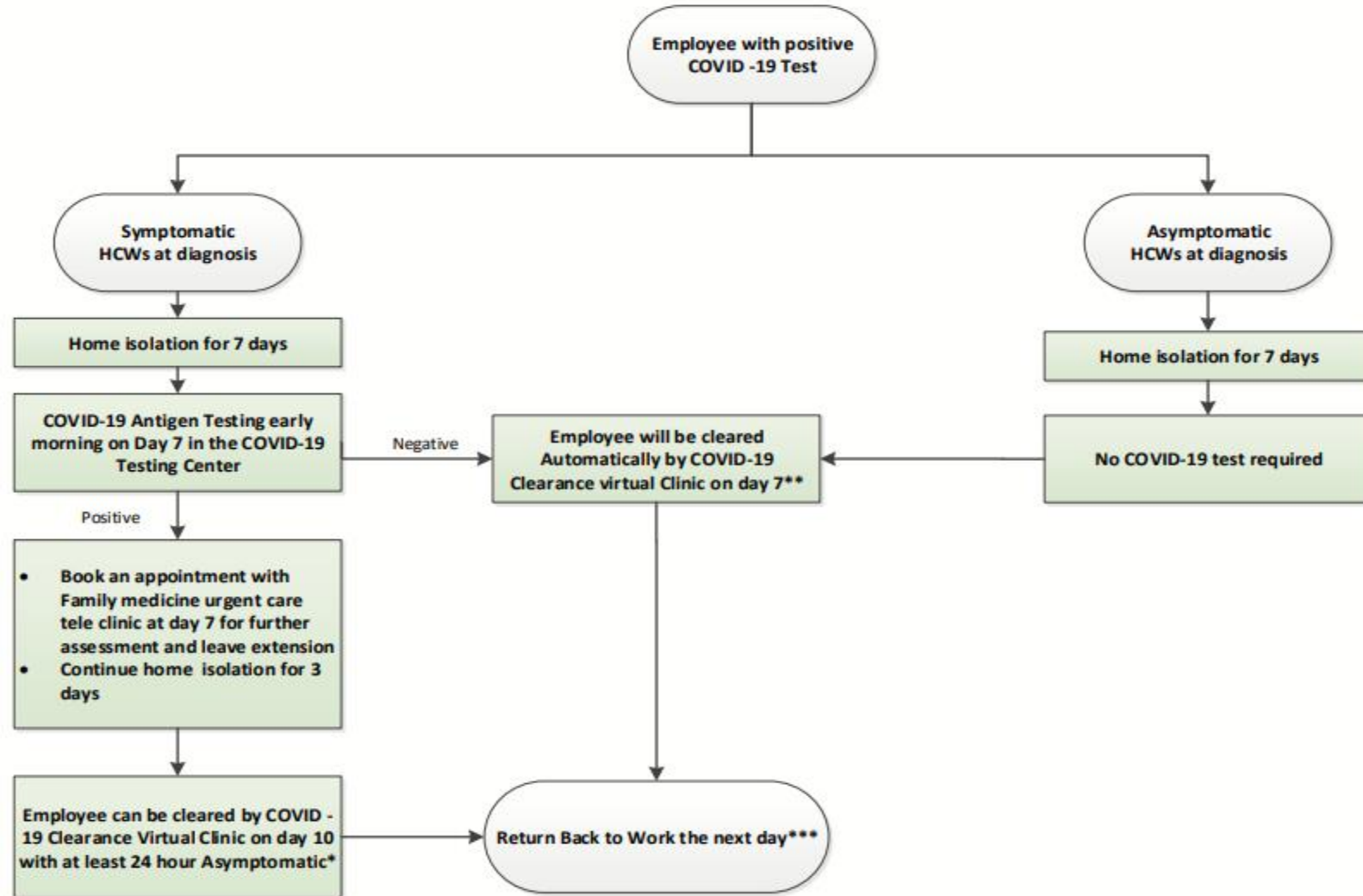
*Process For High-Risk Exposure Staff With No Signs Or Symptoms Returning To Work

- Employee presents to their working area and goes to a designated POCT negative pressure room or to a designated room with Hepa filter.
- POCT rapid COVID antigen will be done with full PPE by trained SN1 or Care Assistant.
- Employee will wait for 15 minutes until the result becomes available.
- The result has to be entered manually into ICIS iView and I & O POCT band (POC Rapid Antigen COVID-19 test).

(High risk areas **)

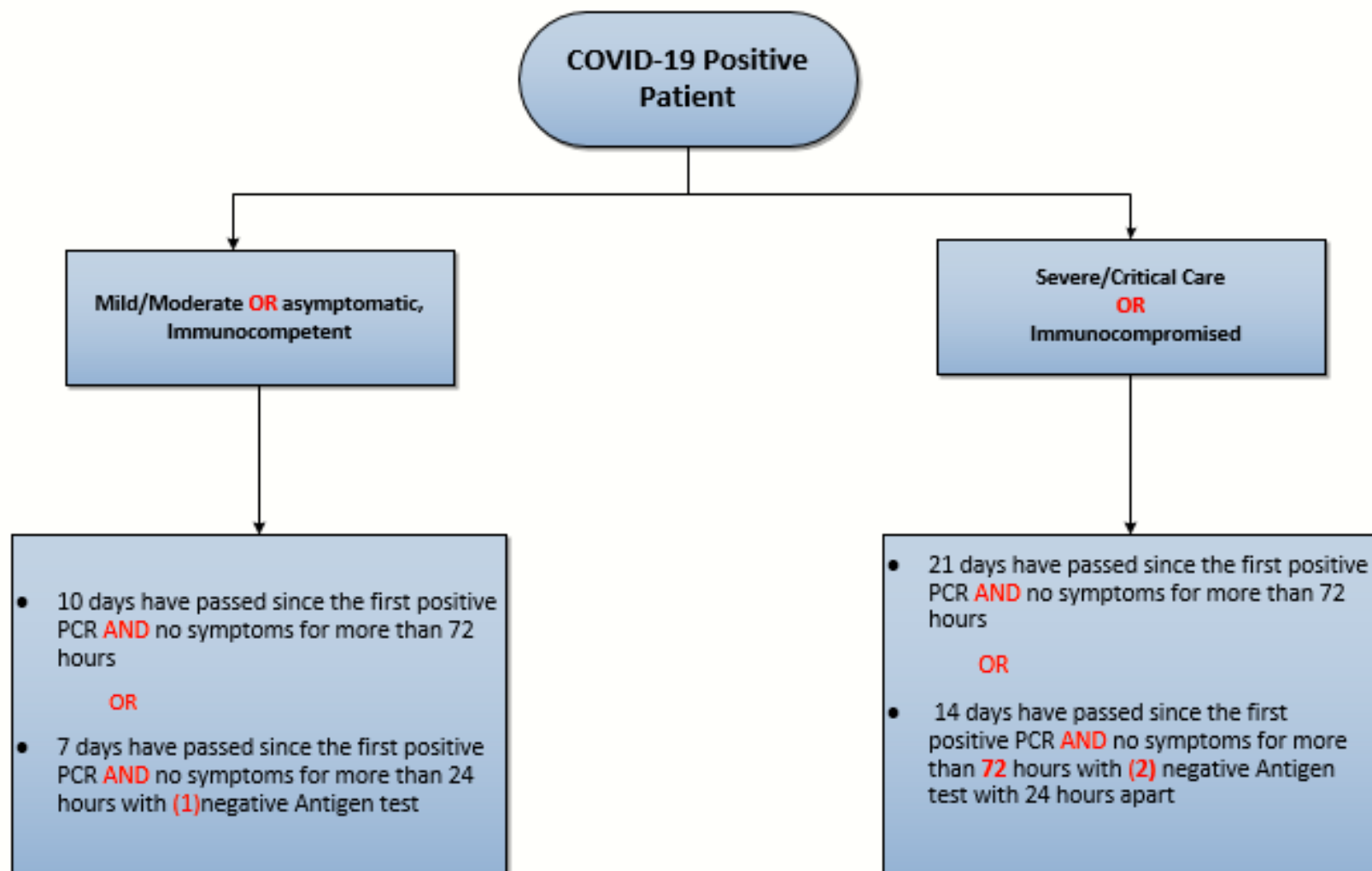
- Riyadh – high risk areas: KFNCCC & KACOLD
- Jeddah– high risk areas: Adult/ Pediatrics Oncology Wards, Adult/ Pediatrics Oncology Treatment Area, Renal Transplant Unit & MSICU
- Madinah– high risk areas: Level 04 A, B, C, D units & level 02 ICU & Infusion Bay Unit.

Back to Work Process for Employees with Positive COVID-19 Result (Version7)



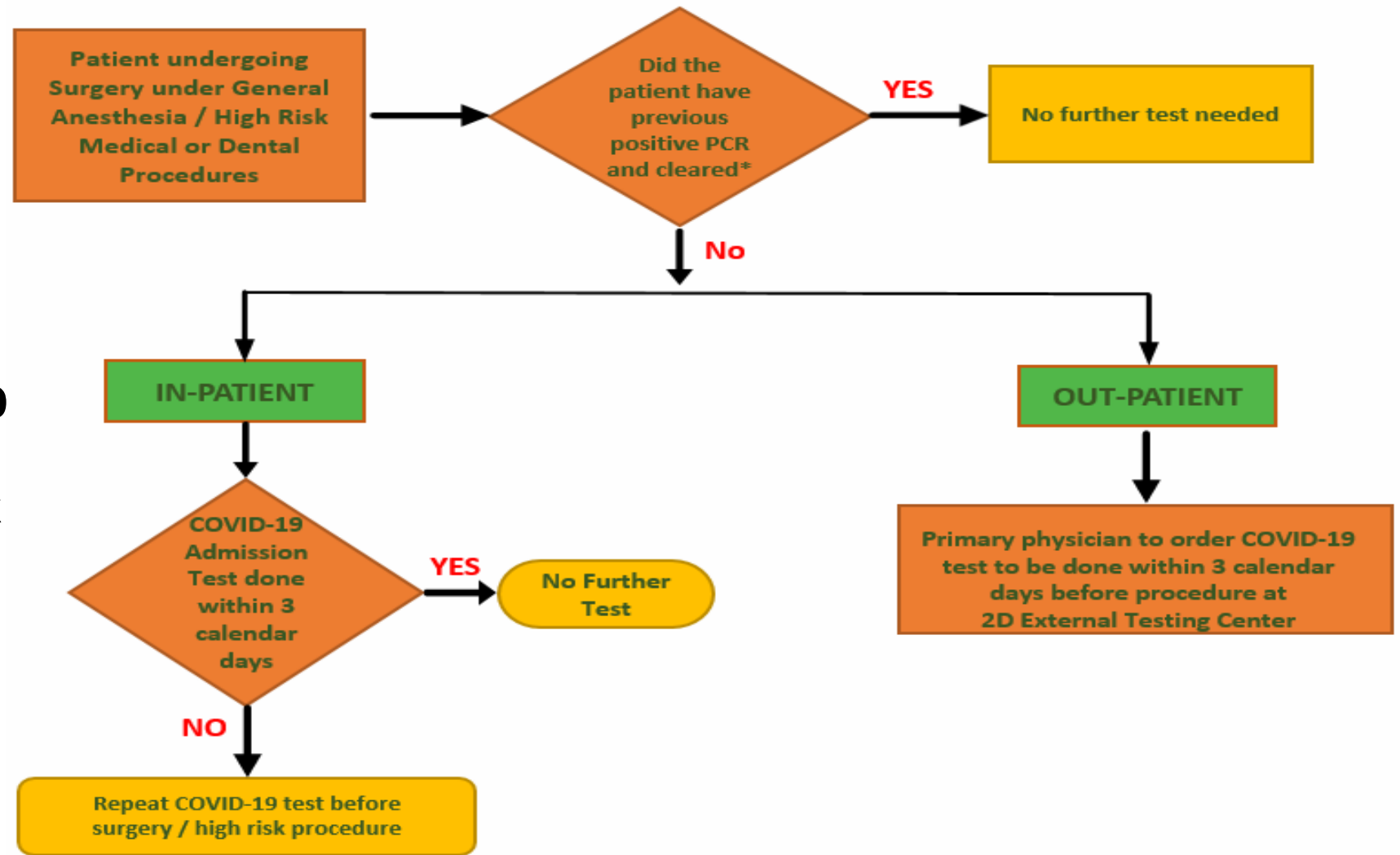
*Asymptomatic: resolution of fever without using antipyretic medication and improvement of respiratory symptoms (cough)
 ** Clearance clinic at Riyadh: Employee virtual COVID-19 Clearance Clinic
 ***Make sure Tawakkalna change status to green (Immune)

WORKFLOW: TRANSFER OF CARE FROM COVID-19 TO NON COVID-19 SERVICE



*No symptoms: resolution of fever without using antipyretic medication and improvement of respiratory symptoms (cough)

Guidelines of COVID-19 Testing/Re-testing for Surgical and High Risk Procedures



***Clearance defined as:**
 No symptoms for last 24 hours and one of the following:
 1. 14 days passed since first positive COVID-19 PCR (immuno competent)
 2. 14 days passed since first positive COVID-19 PCR and negative repeat PCR or positive SARS-2 Ab (Immunocompromised)
***Clearance note should be documented in ICIS by primary team (In-Patient) and Family Medicine/Tele-Clinic (Out-Patient)**

High Risk Medical Procedures: Bronchoscopy, Trans esophageal Echo, Upper Gastroenterology / Respiratory tract scope, Tracheostomy insertion, studies that require Non-invasive positive pressure ventilation, Clinical swallow exam, modified barium swallow study, changing tracheoesophageal prosthesis

High Risk Dental Procedures: All Restorative procedures requiring the use of High/Low speed handpiece with water coolant, Dental Hygiene using Cavitron, Root Canal Treatment, Periodontal surgeries and implant surgeries, oral surgeries, **or any procedure under General Anesthesia, or deep sedation**

Thank you
Questions