



RAFIK HARIRI UNIVERSITY HOSPITAL

RHUH MERS-COV ALERT AND RESPONSE PLAN

**R. RAAD- R. SHEHADE
QUALITY COORDINATORS
RHUH**

Introduction:



- RHUH is a dedicated governmental hospital that protects, promotes health and reduces inequities in the community and also supports governmental and public health organizations coordination.
- The number of staffed beds (according to the hospital decree) is 540 beds. The occupancy rate for the last three years has been between 88% & 94%
- RHUH was selected by the MOPH to become the primal and reference centre in the management of MERS-CoV (as for H1N1).

Objectives:

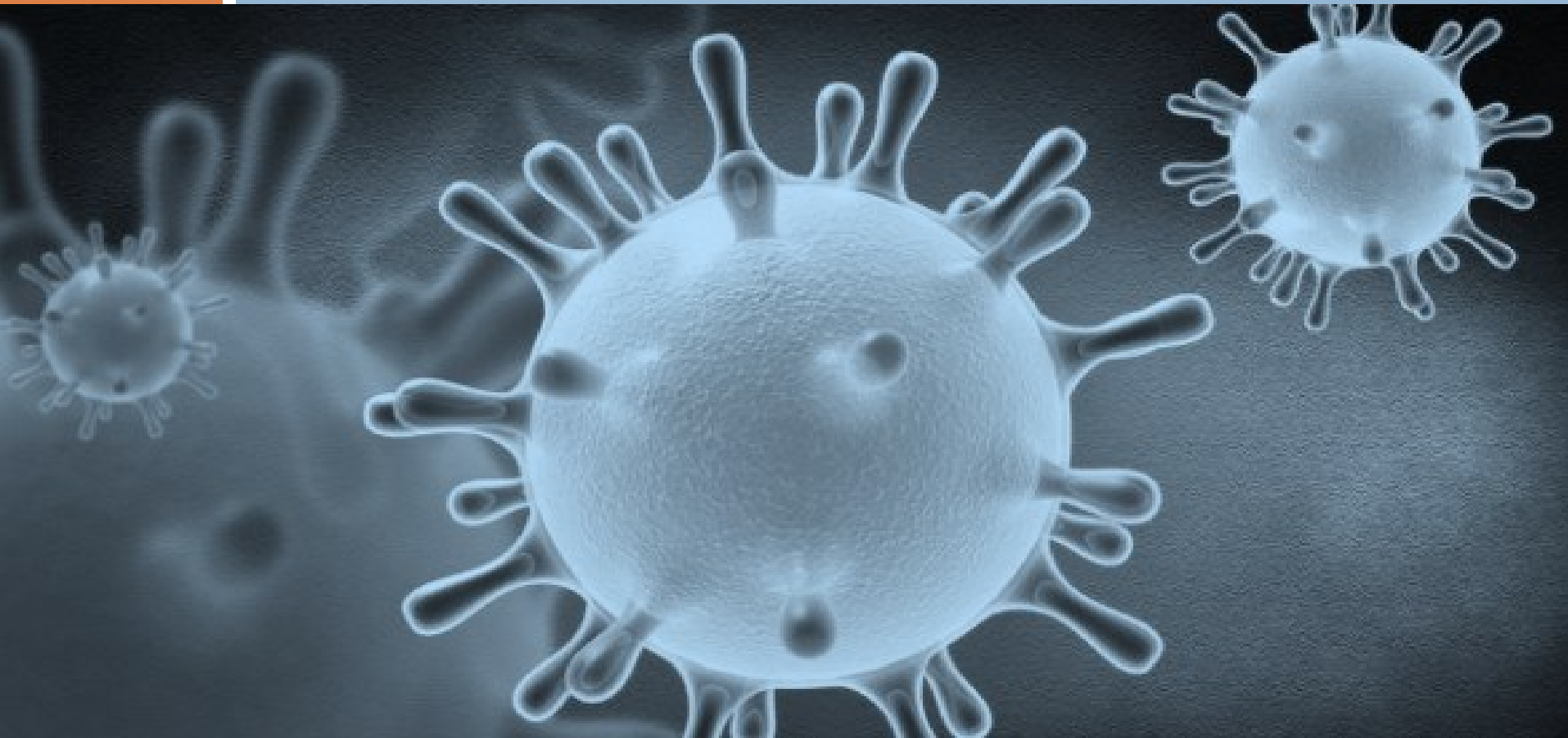


- Present RHUH preparedness to identify, protect, contain and treat MERS-CoV outbreaks in collaboration with the WHO.
- Enhance RHUH position as the premium teaching hospital in the public sector in Lebanon, despite its poor resources and its numerous problems.

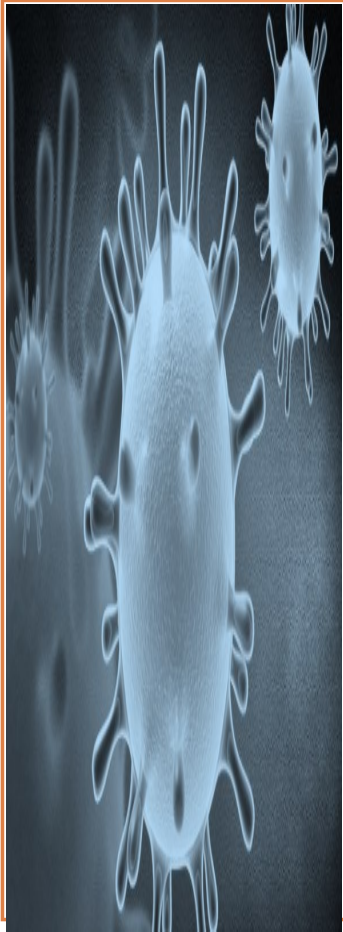
A hand in a white sleeve holds a vertical sign with the word 'SUCCESS' written vertically. To the left of the sign, the following business terms are listed in a staggered, pyramid-like arrangement: INNOVATION, SUCCES, EVALUATION, DEVELOPMENT, GROWTH, SOLUTION, PROGRESS, and MARKETING.

INNOVATION
SUCCES
EVALUATION
DEVELOPMENT
GROWTH
SOLUTION
PROGRESS
MARKETING

Patient Management Plan Components:



AAES



Accommodation

Additional Precautions

Education/Training

**Staff Monitoring for Disease
Hazards**

1- Accommodation:

- ❖ Collaborate with the MOPH in the transfer of a team of nurses to the airport to participate in identifying suspected cases.
- ❖ Identify appropriate room in ER for patients being investigated for the disease.
- ❖ Establish timeline for transfer of patient out of ER when admission is required.
- ❖ Create a separated, equipped area (4 beds) with needed isolation system for admitted patients (Airborne Infection Isolation Room)

2-Additional Precautions:

- ❖ Use of both Droplet/Contact and Airborne Precautions (i.e., use of gown, gloves, eye protection, N95).
- ❖ Patient wearing of a surgical mask during transportation, if tolerated.
- ❖ Precautions initiated whenever a case is suspected; and discontinued when case is cleared.
- ❖ Proper cleaning and disinfection process after patient discharge.
- ❖ Proper and safe linen and waste management (including handling, storage, and disposal)

3-Education/Training:

- ❖ Establish mechanism for updating staff knowledge regarding status of MERS-CoV.
- ❖ Allocate and train systematically a dedicated nursing team to care for the admitted cases.
- ❖ Define which hospital departments may be providing care and/or provide diagnostic services for the patient and require information.
- ❖ Limit visitors to family and provide education on PPEs requirements and use.

4-Staff Monitoring for Disease

Hazards:

- ❖ Consult with MOPH to develop a plan for follow-up of exposed staff and visitors.
- ❖ Assure monitoring and immediate reporting of signs and symptoms of acute illness.
- ❖ Report any occupational illness to the safety committee.

WHO Support



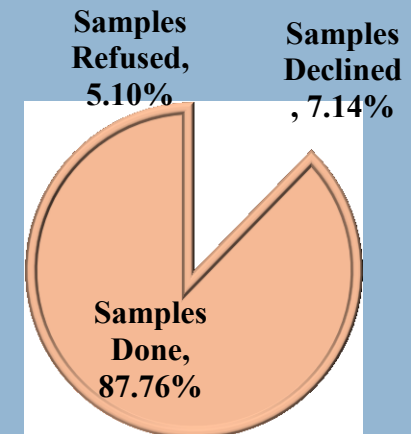
- Specific staff training before implementing the management process in our hospital.
- On site visit intended to evaluate the appropriateness of our accommodations: location and infrastructure, availability of needed resources, safe waste and linen management.
- Continuous, timely and proper laboratory tests including Quality Control for Molecular Diagnosis, safe transportation and storage of specimens (-70°C).

Results:



- 11 suspected MERS CoV were admitted to RHUH (first case admitted on February 2014).
- All cases admitted had a travel history to the Arabian Peninsula or contact with travelers coming from this area.
- Among the total tests done in RHUH (98 samples in and out patients): refused ones represent 5.1% and the declined ones 7.1%. The declined samples did not meet the clinical case definition for CoV symptoms and the refused ones were due to deficient sample collection (use of wrong cotton or wooden swab).

PCR Data

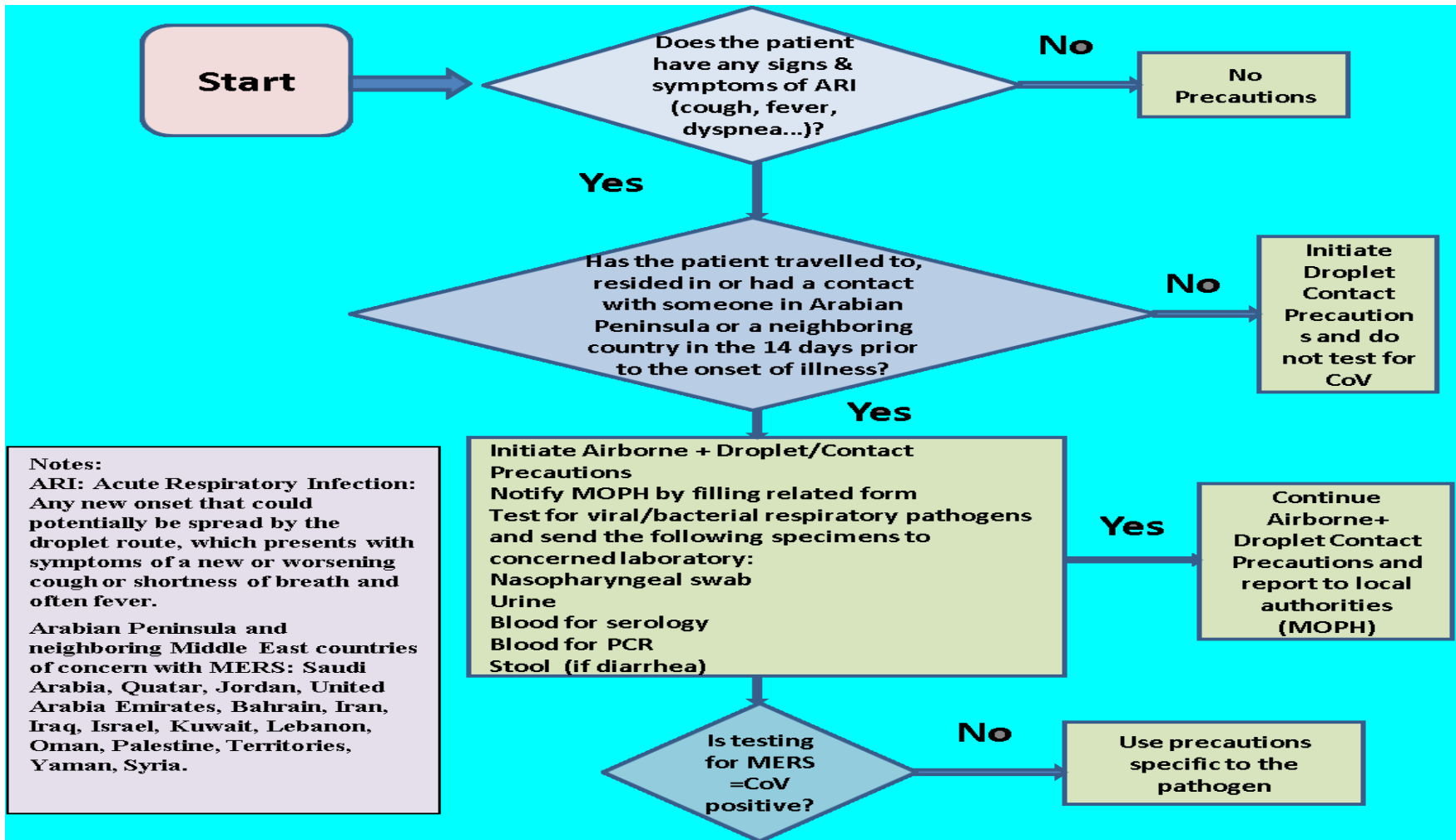


Conclusion:



- Although the incidence of the disease was very low; we consider that better precautions are needed to prevent the community and health staff from infection.
- We recommend at national level the creation of a centralized and specialized health institute "**Quarantine**" close to the airport and/or to the national port, dedicated only for highly contagious community diseases such as EBOLA, CoV, etc... where all cases shall be referred to minimize exposure.

RHUH Management Plan Algorithm



Notes:

ARI: Acute Respiratory Infection: Any new onset that could potentially be spread by the droplet route, which presents with symptoms of a new or worsening cough or shortness of breath and often fever.

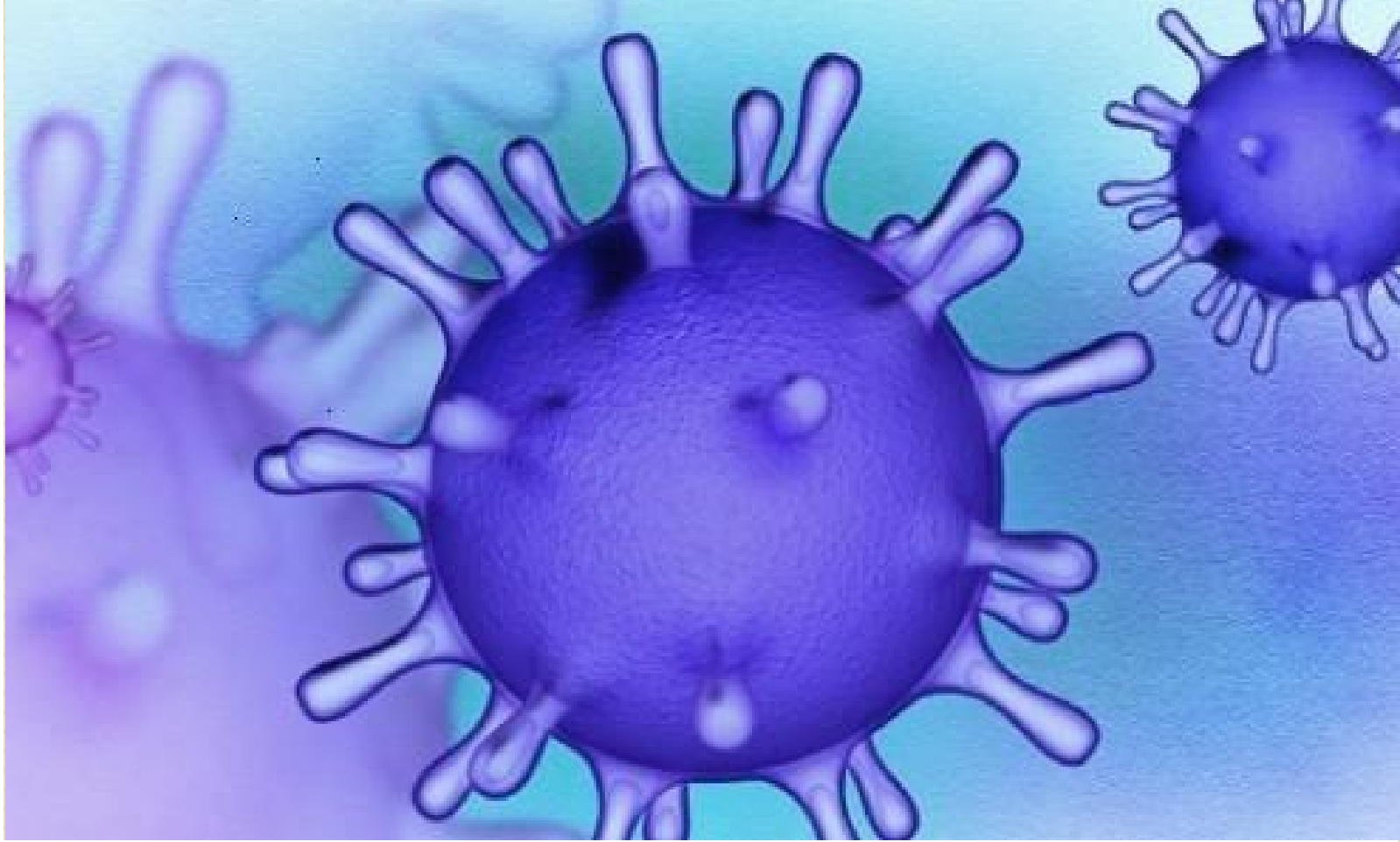
Arabian Peninsula and neighboring Middle East countries of concern with MERS: Saudi Arabia, Qatar, Jordan, United Arab Emirates, Bahrain, Iran, Iraq, Israel, Kuwait, Lebanon, Oman, Palestine, Territories, Yaman, Syria.



Acknowledgments:

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Thank You.