



Early Identification of Respiratory Hazards

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Early Identification of Respiratory Hazards

Each healthcare facility should conduct a respiratory hazard evaluation to identify and evaluate the potential exposure of individuals to hazards, the extent of exposure and the consequent selection of measures required for respiratory protection.

The evaluation should determine the likelihood of occurrence and the level of exposure, which means that appropriate respiratory protection measures can subsequently be implemented.



Early Identification of Respiratory Hazards

early Identification of patients with acute infectious respiratory illnesses :

Respiratory triage

Respiratory pathway

Early recognition and source control of patients with acute infectious respiratory illnesses

Transportation of suspected/confirmed Infectious respiratory illnesses cases

Collecting and handling of respiratory specimens



Early Recognition and Source Control of Patients with Acute Infectious Respiratory Illnesses



Each healthcare facility should have a mechanism for the early recognition, screening, testing and evaluation of respiratory infectious diseases, particularly those transmitted through a droplet and airborne routes

Droplet Precautions



وزارة الصحة
Ministry of Health
الإدارة العامة لمكافحة عدوى المنشآت الصحية
General Directorate for Infection Control of Health Facilities



احتياطات العزل الرذاذي DROPLET PRECAUTIONS

يجب على الزوار مراجعة مكتب التمريض قبل الزيارة
All visitors must visit the nursing office before visiting

**All HCWs and visitors
must do the following:**

**before patient room or care area
entry :**

- 1- Practice hand hygiene
- 2- Wear Medical Mask

**before exit from patient room
or care area :**

- 1- All P.P.E must be removed
and discarded as medical waste
- 2- Practice hand hygiene



**على جميع الممارسين
الصحيين و الزوار اتباع التالي:**

**قبل دخول الغرفة أو منطقة
المريض:**

- 1- ممارسة نظافة الأيدي.
- 2- ارتداء الكمامات الطبية .

**قبل الخروج من غرفة المريض أو
منطقة المريض:**

- 1- يتم خلع مستلزمات الوقاية
الشخصية والتخلص منها في حاوية
النفايات الطبية .
- 2- ممارسة نظافة الأيدي.

Airborne Precautions



وزارة الصحة
Ministry of Health



احتياطات العزل الهوائي AIRBORNE PRECAUTIONS

يجب على الزوار مراجعة مكتب التمريض قبل الزيارة
All visitors must visit the nursing office before visiting

All HCWs and visitors
must do the following:

Before patient room :

- 1- Practice hand hygiene
- 2- Wear N95 Respirator .

Before exit from patient room :

- 1- All PPE must be removed Except N95 Respirator and discarded as medical waste.

after exit from patient room :

- 1- Remove N95 Respirator and discard as medical waste.
- 2- Practice hand hygiene .



على جميع الممارسين
المصحين و الزوار اتباع التالي:

قبل دخول الغرفة :

- 1- ممارسة نظافة الأيدي.
- 2- ارتداء الكمام التنفسي عالي الكفاءة .

قبل الخروج من غرفة المريض :

- 1- يتم خلع مستلزمات الوقاية الشخصية ماعدا الكمام التنفسي عالي الكفاءة والتخلص منها في حاوية النفايات الطبية .

بعد الخروج من غرفة المريض :

- 1- يتم خلع الكمام التنفسي عالي الكفاءة والتخلص منه في حاوية النفايات الطبية .
- 2- ممارسة نظافة الأيدي.

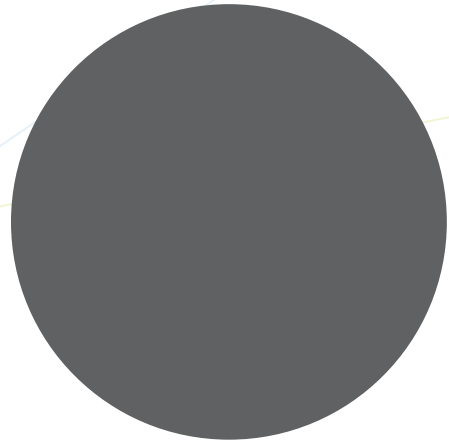
Respiratory Triage



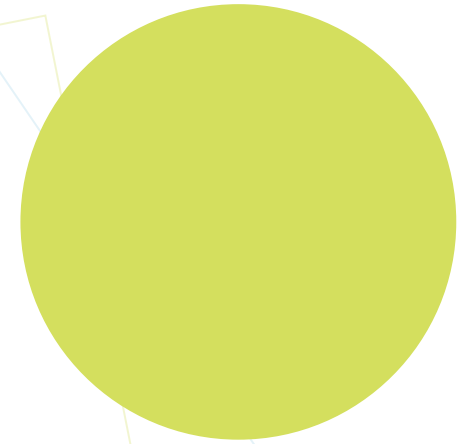
Respiratory Triage:



It is a simple screening method for the early detection of patients with respiratory symptoms.






It is a triaging scoring system applied to alert healthcare workers in an emergency (ED) and hemodialysis units (HD) for the possibility of occurrence of respiratory infections with a particular pathway for those patients



Respiratory triage and respiratory pathway are intended to be applied mandatory for healthcare facilities receiving patients with suspected or confirmed infectious respiratory disease.

Respiratory Triage Required Infrastructure

-  Desk or station at the first point in the ER entrance.
-  Ensure availability of medical masks and alcoholic hand rub solution at respiratory triage desk and the assigned health care worker should ask patients with respiratory symptoms to wear medical mask and practice hand hygiene before enter to the respiratory pathway.
-  There is attention poster about the mandatory pass-through respiratory triage area.



قسم التثقيف الصحي

طرق الوقاية من فيروس

كورونا

المسبب لمتلازمة الشرق الأوسط التنفسية



صحة أفضل

التوجه فرز البصري



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#دمتم بصحة

Respiratory Pathway Waiting Area



Respiratory Pathway Waiting Area

-  It is a separate area used only for suspected respiratory cases with good ventilation.
-  waiting area should be kept free of excessive equipment or furniture.

Respiratory Pathway Waiting Area



Respiratory waiting area should be provides with:

- 1- Chairs easy to be cleaned, fixed to maintain safe social distancing with distance between them 1-1.2 Meter.
- 2- Educational materials (bosters – screens) about respiratory hygiene and cough etiquette.
- 3- Hand hygiene supplies, tissues and ordinary waste receptacles.

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MEDICAL CENTRE

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RESPIRATORY CLINIC



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SAT-SUN 9-12
PH 55
HAANHEA

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ALL PATIENTS
WELCOME

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HEALTH

RESPIRATORY CLINIC

SPECIALISED TESTING
AND ASSESSMENT
FOR ALL FEVER OR
RESPIRATORY SYMPTOMS

BREATHING DIFFICULTIES
FLU-LIKE SYMPTOMS
COLDS
SORE THROAT
FEVER
ASTHMA
BRONCHITIS
TONSILLITIS
LUNG DISEASE
KAPPAHORE
ALL AGES
FAMILIES WELCOME

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RESPIRATORY CLINIC

Respiratory Pathway Respiratory Clinic

This is a specific clinic/s in the respiratory pathway in ER for examination of patients with respiratory symptoms according to the screening in respiratory triage.

Respiratory clinic should be provided with hand hygiene supplies (alcoholic hand rub solution, hand washing facility with accessories).

After clinical assessment by the physician will decide if the patient meet the case definition or not.

Accordingly, if needs swab will be directed to negative pressure isolation room (AIIR) if not available, a single room with portable HEPA filter could be used.

Respiratory Pathway Airborne Infection Isolation Room (AIIR)



Transportation of Suspected - Confirmed Infectious Respiratory Illnesses Cases

Avoid moving and transporting patients out of their rooms unless medically necessary.

Use designated portable chest imaging (i.e., chest x-ray) equipment.

If patient transport is necessary, use pre-determined transport routes with less traffic to minimize exposure for staff, other patients, and visitors

During transportation, the patient should be asked to wear a surgical mask, if clinically possible, and follow respiratory hygiene and cough etiquette instructions

Colored coded transportation cards should be used during transportation.

TRANSPORTATION CARD

DROPLET PRECAUTIONS

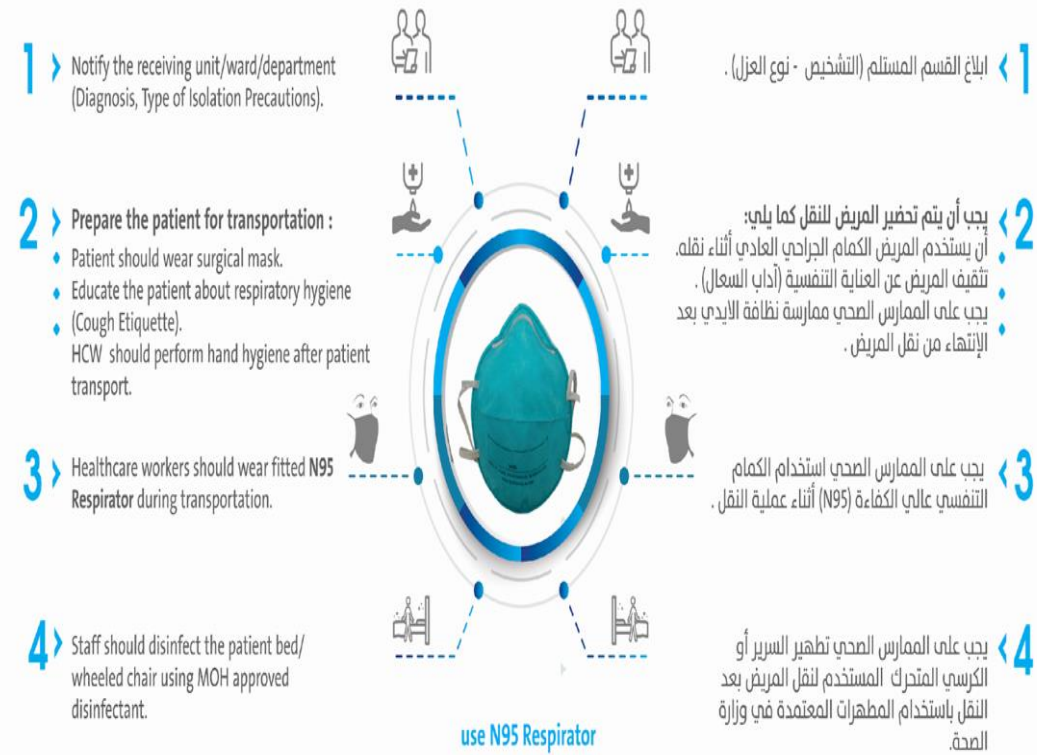
العزل الرذاذي



TRANSPORTATION CARD

AIRBORNE PRECAUTIONS

العزل الهوائي



Collecting and Handling of Respiratory Specimens

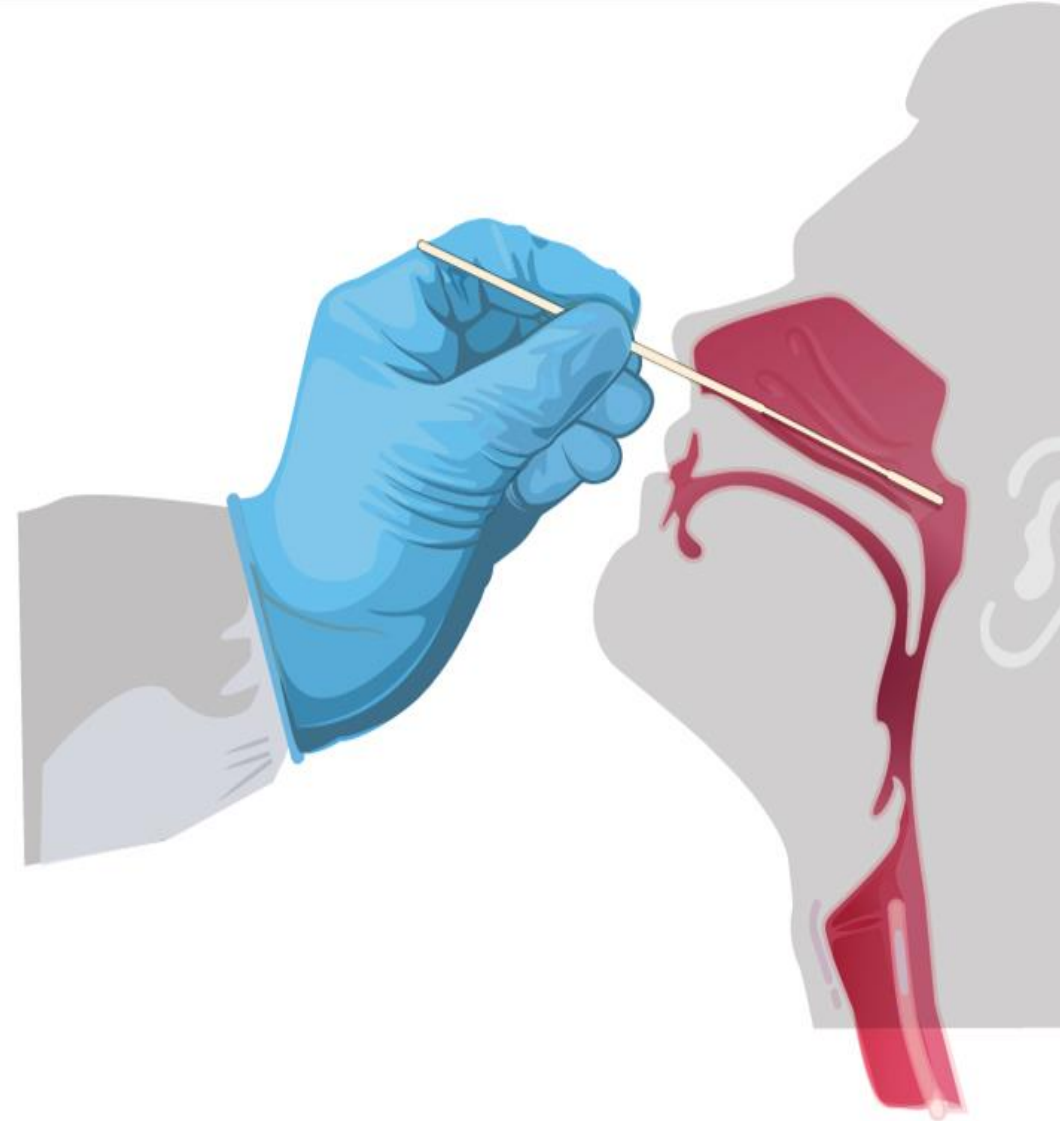
Respiratory samples are nasopharyngeal, oropharyngeal, or sputum samples.

These samples should be done in a negative pressure room or single room with a portable HEPA filter.

Specimen Collection Methods:

Collection of Upper Respiratory Tract Specimens:

1. Oropharyngeal (OP) and nasopharyngeal (NP) swabs.
2. Nasopharyngeal wash/aspirate.



Collecting and Handling of Respiratory Specimens

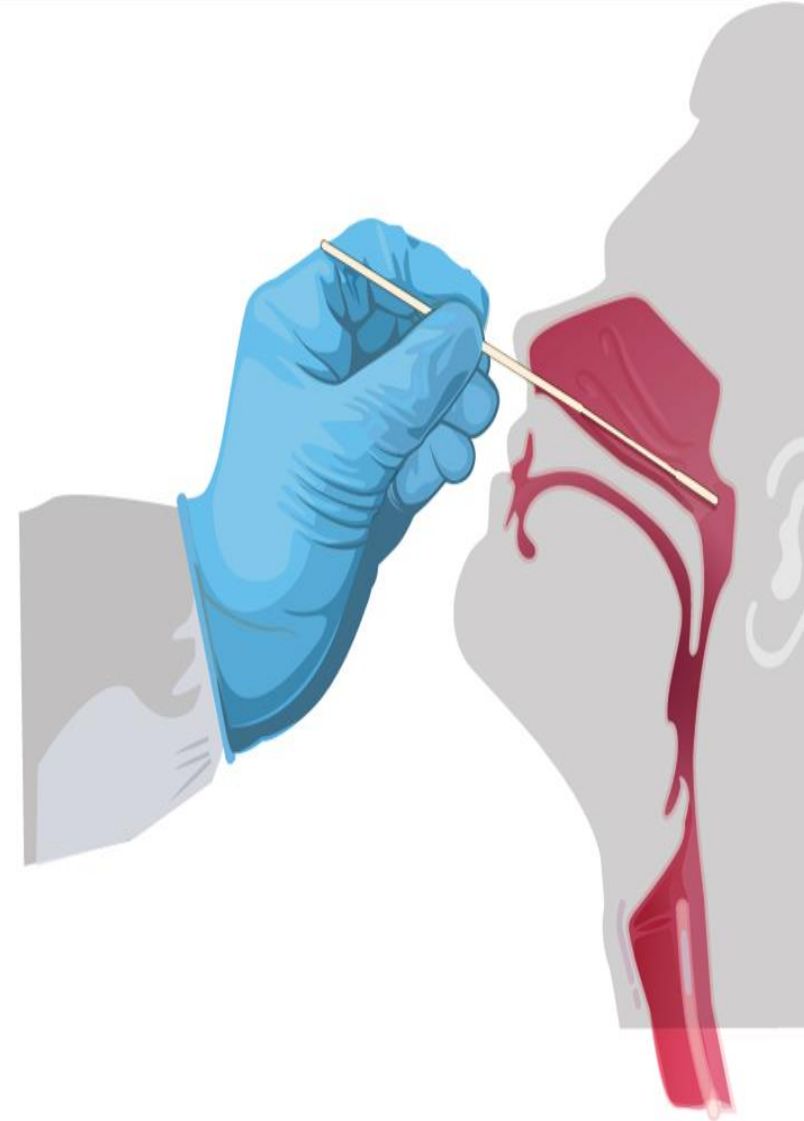
Sputum, tracheal aspirate, bronchi alveolar lavage (BAL) fluid, or pleural fluid.

Preferably, upper/lower respiratory samples should be performed in a negative pressure room or a single room with a portable certified HEPA filter.

The door must be closed at all times while in use.

The floor should be made of material that can be cleaned easily, preferably vinyl, and without cracks.

Ideally, the furniture should be made of steel or another material that is easy to clean and disinfect.





Hand washing basins equipped with liquid soap and paper towels or alcoholic hand rub dispensers.



Personal protective equipment should be available and accessible.



Environmental disinfectant spray or wipes should be available.



Medical waste containers with medical waste bags should be available inside the respiratory specimen collection room.



All HCWs should be trained about the proper use of PPE and various techniques of respiratory samples collection.



Thank You