

Initial Decision Making and Management of Persons Who May be Infected with Middle East Respiratory Syndrome Coronavirus (MERS-CoV)

Intended for use in Emergency Departments and Ambulatory Care Settings

Always follow Routine Practices including a Point of Care Risk Assessment

Screening

Patient presents with an acute respiratory infection (ARI)¹

- Ask patient and symptomatic accompanying persons to:
 - use tissues when coughing or sneezing
 - clean his/her hands after contact with respiratory secretions
 - wear mask while waiting to be seen (if tolerated)
 - wait in a separate area or keep 2 meters distance from other patients and staff
- Initiate appropriate Droplet and Contact precautions (hand hygiene, facial protection², gloves and gown)

Assessment (THINK)

Patient has travelled to, or resided

- in a country in the Middle East³
- within 14 days prior to onset of illness

Patient is a close contact⁴ of a person who developed ARI within 14 days after having travelled to or resided in the Middle East³

If an Aerosol Generating Medical Procedure (AGMP)⁵ is required

- Place patient in a single room with Droplet/Contact signage at room entrance
- Restrict patient to their room OR if transport out of room is required, have patient wear a mask at all times
- Postpone elective procedures that generate droplets

- Perform only if medically necessary
- AGMPs should be performed in Airborne isolation rooms
- Use fit-tested and seal-checked N95 respirators for all HCWs in the room

Reporting (TELL)

- Provide patient and caregiver with information regarding additional precautions and visitor restrictions
- Consult immediately with your Medical Health Officer, Public Health office or the Medical Health Officer on call
- Inform your Infection Control Professional (if applicable)
- Inform other departments (e.g., Laboratory, X-ray, Diagnostic imaging, ICU, bed management), facilities and ambulance control if diagnostic tests are ordered or transfers are planned
- Contact Laboratory prior to dispatch of samples to expedite STAT testing **(TEST as per SDCL Protocol)**

1. Acute Respiratory Infection (ARI): An infection of the upper or lower respiratory tract 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. **Please note:** elderly people and people who are immunocompromised may not have a febrile response to respiratory infection.
2. Facial protection includes: surgical or procedure masks and eye protection or a full face shield, or a mask with visor attached. Facial protection should be worn when within 2 meters of a patient.
3. Middle East countries of concern for MERS-CoV include: Saudi Arabia, Qatar, Jordan, United Arab Emirates, Oman, Bahrain, Iran, Iraq, Israel, Kuwait, Oman, Palestinian Territories, Lebanon, Yemen and Syria. Updates of affected countries available at: <http://www.phac-aspc.gc.ca/tmp-pmv/notices-avis/index-eng.php>
4. Close contact may include: a health care worker or family member OR someone who has lived with, or had face to face (within 2 meters) contact with respiratory secretions or body fluids of a person with the ARI.
5. Aerosol Generating Medical Procedure (AGMP): intubation and related procedures, Cardiopulmonary resuscitation, bronchoscopy, sputum induction, nebulized therapy, non-invasive positive pressure ventilation.