

Key Elements on Prevention and Control of Middle East Respiratory Syndrome (MERS) in Healthcare Settings

Early Detection and Surveillance

- In view of the emergence of MERS and the severity of illness, special attention to travel history and relevant epidemiological links in patients with respiratory symptoms and fever is essential.
- Please notify Centre for Health Protection (CHP) for cases fulfilling prevailing reporting criteria: <https://ceno.chp.gov.hk/casedef/casedef.pdf>
- Notification form: <http://www.chp.gov.hk/en/notification/13/33.html>

Isolation precautions

- Standard, contact and airborne precautions should be implemented for handling all suspected or confirmed cases.

Personal protective equipment (PPE)

- Wear N95 respirator, eye protection, gown and gloves when managing patients for managing suspected or confirmed cases.
- Vigilance on hand hygiene and proper donning/ removing of PPE is essential.
- Stay safe: strict adherence to safety measures when performing high-risk aerosol-generating procedures. Please refer: http://www.chp.gov.hk/files/pdf/ic_matrix.pdf

Triage station

- Staff should put on appropriate PPE including N95 respirator/surgical mask*, eye protection, gown and gloves.
(*Surgical mask could be an alternative for healthcare workers working in triage station base on nature of encounter upon risk assessment)

Isolation of patients

- Isolate patient in an airborne infection isolation room. Cohort patients with the same etiological diagnosis if single rooms are not available.
- Confirmed cases should not be nursed in the same area with suspected cases

Hand hygiene

- Perform hand hygiene with alcohol-based handrub. Wash hands with soap and water if hands are visibly soiled.

Specimen collection & Transportation

- Exercise standard, contact and airborne isolation during specimen collection.
- Adherence to Triple Packaging System for specimen for minimizing spillage risk during transportation.

Transport of patient

- Patient should wear a surgical mask and attendants should wear appropriate PPEs.

Environmental decontamination

- Clean and disinfect patient environment with sodium hypochlorite solution 1,000 ppm, especially high-touch areas, at least twice daily or whenever visibly soiled.
- Perform terminal disinfection upon patient discharge.

Decontamination of health care equipment

- Dedicate individual equipment.
- Clean & disinfect shared equipment before use on the next patient.
- Use bedpan washer for disinfection of bed-pans and urinals.

Linen and laundry

- Pack on site and avoid shaking.
- Used linen is classified as infected linen, and linen bags should be tagged with “infected linen” tag.

Waste management

- All waste from patients should be classified as clinical waste and should be disposed into red bag.
- Staff handling clinical waste should wear appropriate PPE.

Administration support

- Management should ensure adequate resources, issue formal instructions for visitors and patients, and post appropriate signage.
- Monitor staff sickness.
- Advise staff to report to supervisor if develop respiratory symptoms or pneumonia as soon as possible.