

Public Health Information about COVID-19 For all Dentists, Dental Hygienists, Dental Nurses and Clinical Dental Technicians For up to date information on Covid-19, log on to <u>www.hpsc.ie</u>

Coronaviruses are a large family of viruses that circulate among animals, including camels, cats and bats, with some causing illness in humans e.g. SARS (civet cats) and MERS (dromedary camels). Rarely, animal coronaviruses can change and infect people and then spread between people such as has been seen with MERS and SARS.

Common Signs of Infection	Clinical Guidance
 respiratory symptoms i.e. cough, shortness of breath and breathing difficulties 	 What should I do if a symptomatic person arrives or makes contact? The primary care algorithm (attached) is the best approach for you if a symptomatic person arrives in your surgery or makes contact with you. It would be the same steps to be followed as in any community clinical setting.
 fever in more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death. 	 What should I do if someone has been in an affected area recently? If a well person who attends a clinic has returned from mainland China in the previous 14 days, it would be prudent to defer the appointment until at least 14 days after last exposure in mainland China. In general, a generic travel question for everyone on the consultation form is always a useful, <i>e.g. Have you travelled abroad in the last month? If yes where?</i> This would help gather this information without singling out any particular group or individual.
Where can I get further information?	Infection Control and Waste Management
http://www.hpsc.ie/	 The IPC guidance and waste management would also be useful for your services as this would also apply for your setting and can be used accordingly <u>https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/</u>
There are several resources , guidance , posters and FAQs that you can use on the HPSC website so take a look there for general information. These can be printed off and used in any clinic/surgery as they are generic for any healthcare setting.	 Recommendations to prevent spread of infection include: regular hand washing, covering mouth and nose when coughing and sneezing, avoid close contact with anyone showing symptoms of respiratory illness avoid visiting wet or live markets and contact with animals, excretions and droppings thoroughly cooking meat and eggs. If you are unwell on return from travel to an affected area, contact your healthcare provider and tell them of recent travel.



COVID-19 (2019-nCoV): Risk Assessment for patients presenting to general practice and



healthcare settings other than receiving hospitals Interim Case Definition STANDARD In the 14 days before the onset of illness: PRECAUTIONS (SP) Been in mainland China excluding Hong Kong and Macau 1 CLOSE CONTACTS: Any individual who has had great-Contact¹ with a case of COVID-19 Maintain at least 1 METRE er than 15 minutes face-to-face OR DISTANCE (<2 metres* distance) contact with Worked in or attended a healthcare facility where patients with COVID-19 were being treated a laboratory confirmed case, in AND any setting. CONTACT & DROPLET Click here for further details on CLINICAL CRITERIA PRECAUTIONS: the definition of close contacts. Gloves severe acute respiratory infection requiring admission to hospital with clinical or radiological evidence of Long-sleeved gown, if pneumonia or acute respiratory distress syndrome available, if not, then *A distance of 1 metre is generally OR use plastic apron and regarded as sufficient to minimise roll up sleeves acute respiratory infection of any degree of severity (including at least one of the following: direct exposure to droplets however, fever, shortness of breath or cough) Eve protection (face for Public Health purposes, a close shield or goggles) OR contact definition of 2 metres has Respiratory protection Fever of unknown cause with no other symptoms (surgical face mask) been specified. Clinicians should be alert to the possibility of atypical presentations in patients who are immunocompromised. . Respiratory hygiene and cough etiquette YES NO STOP COVID-19 UNLIKELY Proceed as clinically If the patient PHONES indicated ISOLATE patient away from other patients (Advice for GPs) 1. 2. Initiate STANDARD CONTACT & DROPLET PRECAUTIONS CONTACT DETAILS: PUBLIC HEALTH Medical Officer Health 3. Provide the patient with a SURGICAL MASK if tolerated (MoH): (OOH 0818 501999) 1. You should contact PUBLIC HEALTH to 4. Explain the NOW and the NEXT to the patient DISCUSS details of the possible case HSE E: 01 635 2145 2. If the patient fits the CASE DEFINITION: HSE M: 057 935 9891 HSE MW: 061 483 338 1. Phone PUBLIC HEALTH to DISCUSS details of the possible case You should ALERT NATIONAL AMBULANCE a. HSE NE: 046 907 6412 2. If the patient fits the CASE DEFINITION: SERVICE (NAS) of a possible case of COVID-19 HSE NW: 071 985 2900 You should ALERT NATIONAL AMBULANCE SERVICE (NAS) of a possible case of for transfer of the patient. HSE SE: 056 778 4142 COVID-19 for transfer of the patient b. HSE S: 021 492 7601

 NAS will contact the <u>RECEIVING HOSPITAL</u>, who will alert ED/admitting team and IPC team in advance

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091 775 200

NAS: as per usual channels-

HSE W:

(0818 501999)

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Discard waste and decontaminate environment as per IPC guidelines

team in advance

may have had potential exposure

NAS will contact the RECEIVING HOSPITAL, who will alert ED/admitting team and IPC

Record details of all persons in the waiting room and practice team members who